	Agency Name	Office of Family Support (OFS)
	Chapter No./Name	04 – Family Assistance Manual (FAM)
	Part No./Name	C. CASE PROCESSING
	Section No./Name	C-900-FITAP-SNAP ISSUING BENEFITS
	Document No./Name	C-940-SNAP Replacing Benefits
	Effective Date	March 1, 2017

I. STATEMENT OF POLICY

C-941-SNAP REPLACEMENT OF FOOD DESTROYED IN A HOUSEHOLD MISFORTUNE

Replacement benefits can be authorized if food purchased with food benefits are destroyed in a household misfortune.

Prior to authorizing replacement benefits, review the case record, the Register of Eligible Recipients and other applicable documentation to determine:

- if the benefit was correctly authorized;
- if the household has timely reported the destruction of the food in a household misfortune and
- if the household has timely executed the form [SNAP 38](#).


The household must:

1. Report verbally or in writing the loss of the food within 10 *** calendar **** days of the household misfortune.
2. Execute the form [SNAP 38](#) within 10 calendar days of the report of the household misfortune.

NOTE: If the 10th day falls on a weekend or holiday, the form [SNAP 38](#) must be received the day following the weekend or holiday.

The worker must:

1. Determine that food purchased with food benefits was destroyed in a household misfortune or disaster, such as, but not limited to, a fire or flood. If food was destroyed due to a power outage, the power must have been out for at least 24 hours. Verify this through:
 - a collateral contact,
 - documentation from a community organization including, but not limited to, the Red Cross or fire department, or
 - a home visit.
2. If the client visits a local office to sign a form [SNAP 38](#), a supervisor in that local office must notarize the form [SNAP 38](#) and obtain appropriate witness signatures.
3. Mail the form [SNAP 38](#) if the head of household or a responsible household member is unable to come to the office because of:

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- age, handicap, or distance from the office, and
- is unable to appoint an authorized representative.

NOTE: If form [SNAP 38](#) is mailed and returned, process the form without notarizing it. Form [SNAP 38](#) can only be notarized if the notary is present when the head of household, other responsible household member, or authorized representative signs the form.

4. Authorize replacement benefits within two days of the date the form [SNAP 38](#) is received by the local office or within 10 days of the report of the household misfortune, whichever is later.

NOTE: If the signed form [SNAP 38](#) is received within the 10-day limit, replacement benefits can be authorized in the month following the month of the misfortune.

5. Document the replacement in the case record.

There is no limit on the number of replacement benefits authorized to replace food destroyed in a household misfortune.


The value of the replacement benefit will be in the amount equal to the value of the food destroyed in the misfortune up to a maximum of one month's allotment *** for that SNAP household **** unless the loss includes food purchased with restored benefits which will be replaced in the amount of the loss up to the full value of the restoration.

*** Example: A one person household reports losing \$200 worth of food purchased with SNAP benefits. The household received \$150.00 in SNAP benefits. The maximum allotment for a one person household is \$194. Since the household only received \$150, the replacement amount cannot exceed the monthly allotment the household received. ****

Deny the request for a replacement benefit if:

- the household did not report the loss within 10 days of the household misfortune;
- the form [SNAP 38](#) was not executed within 10 days of the report of the household misfortune; or
- available documentation indicates that the household's request for replacement appears to be fraudulent.

Inform the household of the right to a fair hearing to contest the denial or delay of a replacement benefit. Do not make replacements while the denial or delay is being appealed.

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II. PROCEDURES

The worker for the case must verify the loss *** and issue replacement benefits, * if the form [SNAP 38](#) is mailed and returned **.

If client resides in a parish different from the worker’s parish, advise the client to visit their local office to sign the form [SNAP 38](#). * The worker in the local office that signed the form [SNAP 38](#) must verify the loss and issue replacement benefits. **

III. FORMS AND INSTRUCTIONS

[SNAP 38 Form/Instructions Affidavit Regarding Food Loss in a Household Misfortune](#)

IV. REFERENCES

[LAC 67:III. Chapter 19 Subchapter 1993](#)