# FNS-742 Verification Collection Report

SFAs with Meal Applications SY 2021-22





### FNS-742 – What is it?

- The FNS-742, also known as the Verification Collection Report, is an annual report submitted to the USDA
- It is a report that explains the results of verification for each participating SFA, and must be completed by <u>ALL</u> SFAs, *including Community Eligibility Provision (CEP) Schools and Residential Child Care Institutions (RCCI)*
- As an SFA, you are responsible for completing the report and submitting it to HCNP for processing and forwarding



### **FNS-742** Deadline

Submit the Verification Collection Report (FNS-742) in HCNP Systems by <u>December 10, 2021</u>

MARK YOUR CALENDAR!





# Gather Your Completed Verification Forms

#### Forms V-7a, V-7b, and V-7c

- Slides will indicate when to use your forms so you can enter the information into the FNS-742
- If you have not completed these forms, the forms are available at: https://hcnp.hawaii.gov/overview/nslp/

Click on Program Resources>Verification





## FNS-742 in HCNP Systems

#### Log into HCNP Systems

http://www.cnpweb.org/hawaii/Login

C	Checklist	Applications	Forms	Claims	Payments	Training	Users
Fo	rm Name	Revi	Revision Status			te Approved	Action
Oc	tober Survey	Survey to be fill	ed on last day of C	October 2021			
Ve	rification Repo	organization and the second second states and the second s		no later than Nover llection Report (FNS	nber 15. 5-742) by the announc	ed deadline.	+

- Go to the Forms tab
- Click the + symbol for the Verification Report (circled in red above)



### Section 1 – Sites and Students

#### Section 1 - Sites and Students

Total Schools,	All SFAs must report Section 1	A. Number of Schools OR Institutions	B. Number of Students
Residential Child Care	1-1: Total schools (Do not include RCCIs):		
Institutions (RCCIs) and Enrolled	1-2: Total RCCIs (Do not include schools counted in 1-1):		
	1-2a: RCCIs with day students (Report only day students in 1-2aB):		
Students	1-2b: RCCIs with NO day students:		

- ▶ In Box 1-1A, enter the total number of schools/sites in your SFA (red box)
- In Box 1-1B, enter the total number of students in your SFA (yellow box)
- > These numbers must be reflective of the **last operating day in October**.



### Section 2 – Alternate Provisions (Provision 2)

		ONLY SFAs with alternate provisions must report Section 2	A. Number of Schools AND Institutions	B. Number of Students
	2-1:	Operating Prov 2/3 in Base Year for NSLP or SBP:		
SFAs with	2-2:	Operating Prov 2/3 in NON BASE year for NSLP and SBP:		
schools operating		2-2a: Provision 2/3 students reported as FREE in a NON BASE year:		
alternate rovisions		2-2b: Provision 2/3 students reported as REDUCED PRICE in a NON BASE year:		
	2-3:	Operating the Community Eligibility Option:		
	2-4:	Operating other alternatives for NSLP and SBP:		
	2-5:	Operating an alternate provision(s) for only SBP or only NSLP:		

- Complete this section only if you have schools/sites in your SFA that participate in alternate provisions. This slide explains what to do if your SFA has any Provision 2 schools (BASE YEAR). Enter the number of schools/sites operating Provision 2 in box 2-1A (red box) and the total number of students (as of the last operating day in October) in those schools/sites in box 2-1B (yellow box)
- If all of the schools/sites in your SFA accept applications, skip this section and proceed to Section 3



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### Section 2 – Alternate Provisions (CEP)

Section 2 - Alter	Indie Provisions		
	ONLY SFAs with alternate provisions must report Section 2	A. Number of Schools AND Institutions	B. Number of Students
	2-1: Operating Prov 2/3 in Base Year for NSLP or SBP:		
SFAs with	2-2: Operating Prov 2/3 in NON BASE year for NSLP and SBP:		
schools operating	2-2a: Provision 2/3 students reported as FREE in a NON BASE year:		
alternate provisions	2-2b: Provision 2/3 students reported as REDUCED PRICE in a NON BASE year:		
	2-3: Operating the Community Eligibility Option:		
	2-4: Operating other alternatives for NSLP and SBP:		
	2-5: Operating an alternate provision(s) for only SBP or only NSLP:		

- This slide explains what to do if your SFA participates in CEP (Community Eligibility Provision). Enter the number of schools/sites operating CEP in box 2-3A (red box) and the total number of students (as of the last operating day in October) in those schools/sites in box 2-3B (yellow box)
- If all of the schools/sites in your SFA accept applications, skip this section and proceed to Section 3



### Section 3 – Direct Certification

#### Section 3 - Direct Certification

		ALL SFAs must report Section 3 or check box 3-1 if applicable	B. Number of
	3-1:	<ul> <li>Check the box only if all schools and/or RCCIs in the SFA were not required to perform direct certification with SNAP</li> <li>(i.e. NON BASE year Provision 2/3 for all schools).</li> </ul>	FREE Students
Students approved as FREE eligible	3-2:	Students directly certified through Supplemental Nutrition Assistance Program (SNAP): Do not include students certified with SNAP through the letter method.	
NOT subject to verification	3-3:	Students directly certified through other programs: Include those directly certified through Temporary Assistance for Needy Families (TANF) or Medicaid, and those documented as homeless, migrant, runaway, foster, Head Start, Pre-K Even Start, or non-applicant but approved by local officials. DO NOT include SNAP students already reported in 3-2.	
	3-4:	Students certified categorically FREE eligible through SNAP letter method: Include students certified for free meals through the family providing a letter from the SNAP agency.	

USE

FORM V-7b

- In Box 3-2B (red box), enter the number of students in your SFA directly certified to receive free meals via SNAP
- In Box 3-3B (yellow box), enter the number of students directly certified to receive free meals through <u>any method other than SNAP (e.g. TANF, Foster</u> Child, etc.)
- > These numbers are again reflective of the last operating day in October
- In Box 3-4B, enter 0 because this does not apply to Hawaii



**USE FORMS** 

V-7a and V-7b

Students approved as		ALL SFAs collecting applications must report Section 4	A. Number of Applications	B. Number of Students
FREE or REDUCED PRICE eligible through a household application	4-1: 4-2: 4-3:	Approved as categorically FREE Eligible: Based on those providing documentation (e.g. a case number for SNAP or TANF on an application) Approved as FREE eligible: Based on household size and income information Approved as REDUCED PRICE eligible: Based on household size and income information		
T-1: Total FREE	Eligib	le Students Reported: T-2: Total REDUCED PRICE E	Eligible Students Reported:	

- Box 4-1A (red box)— enter the total number of applications (as of the start of Verification, October 1) that were approved as Categorically Free (e.g. the application had a SNAP case number)
- Box 4-1B (yellow box) enter the total number of students (as of the last operating day in October) that were listed on the applications in Box 4-1A



# USE FORMS V-7a and V-7b

Students approved as FREE or REDUCED PRICE eligible through a household	ALL SFAs collecting applications must report Section 4	A. Number of Applications	B. Number of Students
	<ul> <li>4-1: Approved as categorically FREE Eligible: Based on those providing documentation (e.g. a case number for SNAP or TANF on an application)</li> <li>4-2: Approved as FREE eligible: Based on household size and income information</li> <li>4-3: Approved as REDUCED PRICE eligible: Based on household size and income information</li> </ul>		
application T-1: Total FREE	Eligible Students Reported: T-2: Total REDUCED PRICE E	iligible Students Reported:	

- Box 4-2A (red box) enter the total number of applications approved as Free (as of the start of Verification, October 1), based on household size and income
- Box 4-2B (yellow box) enter the total number of students (as of the last operating day in October) that were listed on the applications in Box 4-2A



# USE FORMS V-7a and V-7b

Students approved as	ALL SFAs collecting applications must report Section 4	A. Number of Applications	B. Number of Students
FREE or REDUCED	4-1: Approved as categorically FREE Eligible: Based on those providing documentation (e.g. a case number for SNAP or TANF on an application)		
REDUCED PRICE eligible through a household application	<ul><li>4-2: Approved as FREE eligible: Based on household size and income information</li><li>4-3: Approved as REDUCED PRICE eligible: Based on household size and income information</li></ul>		
T-1: Total FREE	Eligible Students Reported: T-2: Total REDUCED PRICE E	Eligible Students Reported:	

- In Box 4-3A (red box), enter the total number of applications approved as reduced price (as of the start of Verification, October 1) based on household size and income
- In Box 4-3B (yellow box), enter the total number of students (as of the last operating day in October) that were listed on the applications in Box 4-3A



**USE FORM** 

V-7b

Students approved as	ALL SFAs collecting applications must report Section 4	A. Number of Applications	B. Number of Students	
FREE or REDUCED	4-1: Approved as categorically FREE Eligible: Based on those providing documentation (e.g. a case number for SNAP or TANF on an application)			
PRICE eligible	4-2: Approved as FREE eligible: Based on household size and income information			
through a household application	4-3: Approved as REDUCED PRICE eligible: Based on household size and income information	ousehold size and income		
T-1: Total FREE	Eligible Students Reported: T-2: Total REDUCED PRICE E	ligible Students Reported:		

- In Box T-1 (red box), enter the total number of students eligible for free meals based on applications and direct certification. This is the SUM of Boxes (3-2B), (3-3B), (3-4B), (4-1B), (4-2B), and (2-2aB, if applicable)
- In Box T-2 (yellow box), enter the total number of students eligible for reduced price meals based on applications. This number comes from Boxes (4-3B) and (2-2bB, if applicable)



#### Section 5 - Free and Reduced Applications (not directly certified)

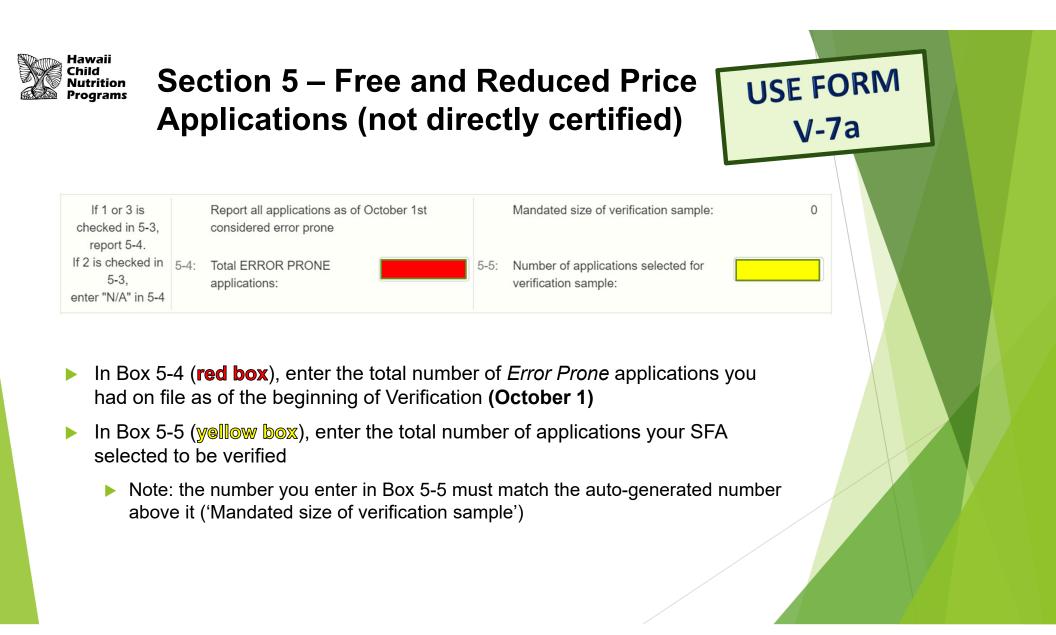
	<ul> <li>ALL SFAs must report Section 5 or check box 5-1 if applicable</li> <li>Check the box only if all schools and/or RCCIs are exempt from verification (see instructions for list of exemptions).</li> <li>If 5-1 is checked, no further reporting in Section 5 is required.</li> </ul>					
5-2: Was Verification performed and completed?			Type of Verification process approved on the Sponsor Application:			
⊖ Yes,	completed by November 15th		1. O Standard (Lesser of 3% or 3,000 error-prone)			
<ul><li>○ Yes,</li><li>15th</li></ul>	completed after November		2. O Alternate one (Lesser of 3% or 3,000 selected randomly)			
-	verification was NOT performed e process was not completed.		<ol> <li>Alternate two (Lesser of 1% or 1,000 error prone applications PLUS lesser of one-half of one percent of 500 applications with SNAP/TANF/FDPIR case numbers)</li> </ol>			

**USE FORM** 

**V-7**a

#### Answer the question in Field 5-2

In 5-3, select the verification process that was used. All SFAs should have used the Standard Method.





ALL SFAs must report Section 5-7 or check box 5-6 if applicable							
5-6: Check the box if direct verification was not conducted in the SFA, (i and/or RCCIs in the SFA performed direct verification). If 5-6 is che	.e. not one of the schools cked, skip 5-7.	A. Number of Applications	B. Number of Students				
Report if FREE and/or REDUCED PRICE eligibility is confirmed through direct verification with SNAP/TANF/MEDICAID as of November 15th	5-7: Confirmed through direct verification:						

- Direct Verification = using records from public agencies (e.g. Department of Human Services) to verify program participation.
  - Direct Verification is typically not done in Hawaii. If you think your SFA conducted Direct Verification for any application(s), enter the appropriate numbers in Box 5-7A (number of applications) and 5-7B (number of students)
- For most SFAs in Hawaii, Direct Verification is <u>not</u> conducted, so please <u>check</u> <u>Box 5-6</u>. Box 5-7A and 5-7B will therefore be left blank.



**USE FORM** 

					-						
			5	-8: Re	sults of Verificat	ion by Original	Benefit Type				<b>L</b>
	For each original	benefit type (A,B			umber of application					It category (1, 2, 3	8, & 4).
	A. FREE - Ca	tegorically Eligi	ble		B. FR	EE - Income		C. REDUCED PRICE - Income			
Certified as FREE based on SNAP/TANF documentation (e.g. case number) on application					Certified as FREE based on income/household size application			Income Certified as REDUCED PRICE based on income/household size application			
	Result Category	a. Applications	b. Students	R	esult Category	a. Applications	b. Students	R	esult Category	a. Applications	b. Students
1.	Responded, NO CHANGE:			1.	Responded, NO CHANGE:			1.	Responded, NO CHANGE:		
2.	Responded, Changed to REDUCED PRICE:			2.	Responded, Changed to REDUCED PRICE:			2.	Responded, Changed to FREE:		
3.	Responded, Changed to PAID:			3.	Responded, Changed to PAID:			3.	Responded, Changed to PAID:		
4.	NOT Responded, Changed to PAID:			4.	NOT Responded, Changed to PAID:			4.	NOT Responded, Changed to PAID:		

- Enter the results of verification in Section 5-8
- Every application your SFA verified must be listed here, in the appropriate part
- The total number of applications in this section must match the number entered in Box 5-5 and VC-1
- Proceed to next slide for further instructions with this section



**USE FORM** 

A. FREE - Categorically Eligible Certified as FREE based on SNAP/TANF documentation (e.g. case number) on application				B. FRI	EE - Income	C. REDUCED PRICE - Income		
					ed on income/household size	Income Certified as REDUCED PRICE based on income/household size application		
	Result Category	a. Applications	b. Students	Result Category	a. Applications b. Student	Result Category	a. Applications b. Students	
1.	Responded, NO CHANGE:			1. Responded, NO CHANGE:		1. Responded, NO CHANGE		
2.	Responded, Changed to REDUCED PRICE:			2. Responded, Changed to REDUCED PRICE:		2. Responded, Changed to FREE:		
3.	Responded, Changed to PAID:			3. Responded, Changed to PAID:		3. Responded, Changed to PAID:		
4.	NOT Responded, Changed to PAID:			4. NOT Responded, Changed to PAID:		4. NOT Responded, Changed to PAID:		

- Part A. "FREE Categorically Eligible" applications (e.g. case number on application): based on verification result (#1, #2, #3, or #4), enter number of applications in Column a (red boxes), and the number of students in Column b (yellow boxes)
- ▶ Do the same for Part B "Free Income" and Part C "Reduced Price Income"
- ▶ The next slide shows an example of how to complete Section 5-8



EXAMPLE: an SFA verified one reduced price application with two students. The Verification Result was the household did not respond and the eligibility status was changed to paid.

	For each original	benefit type (A,B, & C), repo	rt the number of applicat	tion by Original Benefit Typ ions and students as of Nover ications already reported in 5-	mber 15th for each	result category (1, 2, 3, & 4).	
do	Certified as FREE	tegorically Eligible based on SNAP/TANF ase number) on application	Certified as FREE ba	REE - Income sed on income/household size pplication	C. REDUCED PRICE - Income Income Certified as REDUCED PRICE based on income/household size application		Based on the example above, this SFA
F	Result Category	a. Applications b. Students	Result Category	a. Applications b. Students	Result Catego	a. Applications b. Studer	
1.	Responded, NO CHANGE:		1. Responded, NO CHANGE:		1. Responde NO CHAN		<ul> <li>Go to Part C. Reduced Price – Income</li> <li>C.4.a: enter 1 (application)</li> </ul>
2.	Responded, Changed to REDUCED PRICE:		2. Responded, Changed to REDUCED PRICE:		2. Responde Changed FREE:		• C.4.b: enter 2 (students)
3.	Responded, Changed to PAID:		3. Responded, Changed to PAID:		3. Responde Changed 1 PAID:		
4.	NOT Responded, Changed to PAID:		4. NOT Responded, Changed to PAID:		4. NOT Responde Changed PAID:		

**USE FORM** 



# Section 6 – Verification for Cause / Certification

#### Section 6 - Verification for Cause / Certification

VC- Total questionable applications verified for cause (Enter "N/A" if not applicable):1:

Report the number of applications as of November 15th verified for cause in addition to the verification requirement.

**USE FORM** 

- In Box VC-1, enter the number of applications your SFA verified for cause. Include the results of verification for cause in the appropriate category in Section 5-8.
- If your SFA did not verify any applications for cause, enter N/A in Box VC-1





- Complete the report by entering your information in 6-1 and <u>check</u> Box 6-2.
- Click the Save button. If any errors are identified, correct all errors and click Save.
- Double check that the Verification Report is in 'Pending Approval' status. HCNP will review for accuracy and let you know if any changes are needed.



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https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf, (AD-3027) found online at: https://www.usda.gov/oascr/how-tofile-a-program-discrimination-complaint, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

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