Worker Guide
Effective Narration

Full and complete narration has been proven as a method for sharing information. Good narration is important for all programs, not just SNAP. A good narrative is very beneficial to any person reading the case file, including the hearings representative, overpayment writer, investigator, management, Quality Control, branch specialist or other reviewers.

A good narrative includes: *Who, What, Where, When and How (and sometimes Why).*

- The narrative should be written at the time of the contact. This is to assure that ALL pertinent information is documented and you do not later need to rely on your memory of all the facts;
- Be specific: give the facts. However, there is no need to write a book. Narration is a key component in discussions about the family’s income. It is essential to narrate how income was computed using an average, anticipation, or conversion. Remember to include what months or pay periods were used in the computations;
- If income is anticipated or converted, the family’s statements regarding expected work hours, rate of pay and pay periods are very important.

Narrate the following:

- Date and type (office visit, telephone, etc.) of contact;
- The name of the person contacted. If not a household member, indicate who they are and what significance they have to the case. Such as landlord, employer, etc.;
- The information received during the contact;
- Action(s) taken as a result of the information received and the effective date(s). If adverse action, what notice is being sent?
- If the information gained is not used or does not apply to the case, state why the information is not being used or why it does not apply;
- If no action taken, why not?
Narrative examples

Categorical eligibility

8/21 OV, (part of intake interview narrative) Alex reports the only income is $175 a week UI. \((175 \times 4.3) = 752.50\). Income below 185 percent FPL and 3400 given. The household is categorically eligible.

Household composition

8/21 OV, Kerry reported he moved to 987 Patient St. on August 14 and is staying with his parents. He is purchasing and preparing meals separately from them. He is paying $200 a month for rent, including utilities. Kerry is 21 years old and cannot get SNAP separate from his parents. He said parent’s income is too high and they do not want to apply. He is ineligible. Too late to close for August 31, sent notice to close effectively September 30.

Anticipated income

8/21 TC, Marcia is working at McDonalds. Start date: August 17, paid $7.75/hr and expects 25 hr/wk. The first pay date will be August 28 for pay period ending August 22. \(EML = 833.13\) \((7.75 \times 25 = 193.75 \times 4.3)\). Income below 185 percent FPL, so still categorically eligible. Too late to send reduction notice for September 1, send SNAP reduction notice effective October 1. Also, send Notice of Information or Verification Needed (DHS 210A) requesting proof of new job, hourly wage and rate of pay. Proof is due by September 15.

Shelter

8/21 TC, Hildegard reported a move to 1234 School Way. Only Hildegard and boyfriend (filing together, as they purchase and prepare together) live at the new address. New rent is $425/mo. They were approved for subsidized housing and their share of rent will be $175/mo. Responsible for the gas heating costs. Entitled to the FUA. Change address on FCAS effective September 1. Too late to send notice to reduce benefits for September 1. Tickler for rent change and send SNAP reduction notice effective October 1.

Shared shelter

8/21 TC, Sophie reported a move to 567 Choice Way. Ralph moved with her. They are still SEU. The new rent is $675 a month with electric heat. They split the costs for rent and utilities (including heat). Entitled to FUA. Half the rent is $337.50. Change address and shelter costs effective September 1 as will increase benefits.
Medical deduction I

8/21 OV, Sally, an SSD recipient, reported and provided proof of new (unpaid) doctor bills: August 1: Oak Hills Rehab = $1,525, August 15: Dr. Osborne = $170, and August 15: Central City Hospital = $345. Sally has nine months left in her certification period. $2,040/9 = $226.67 as the monthly medical deduction. Sally also presented prescription cost of $189.00/mo. These costs are not allowable as they are covered by her medical card. $226.67 coded on FCAS as a medical deduction effective September 1.

Medical deduction II

8/21 OV, Ethel is in the office to verify her medical deduction for September 1 recertification. She has Medicare of $58.70/mo and prescriptions of $89.66/mo:

- Prescription 1: $122.95/100 day Rx, annual cost: $448.77/12 = $37.40/month
- Prescription 2: $23.39/PRN (1x cost), pro-rated 12 mo = $1.95/mo
- Prescription 3: $9.53/90 day supply, annual cost = $38.65/12 mo = $3.22/mo
- Prescription 4: $49.01/90 day supply, annual cost = $198.76/12 mo = $16.56/mo
- Prescription 5: $70.95/90 day supply, annual cost = $287.74/12 mo = $23.98/mo
- Prescription 6: $8.97/100 day supply, annual cost = $32.74/12 mo = $2.73/mo
- Prescription 7: $36.52/10 day supply (1x cost), $36.52/12 mo = $3.04/mo
- Prescription 8: $9.29/10 day supply (1x cost), $9.29/12 mo = $.78/mo

Total medical deduction coded on FCAS is $148.36.

NOTE

Unless the information is needed for case or service plans, do not narrate medical information, including prescription names, online.
Verification viewed and not copied for file

8/21 OV, Joseph is in the office to verify his income from Veteran’s Administration (VA). Viewed letter from VA dated August 5 stating his disability has been changed to 50 percent and he will begin receiving $850 a month in September. Too late to adjust benefits for September, sent notice to reduce effective October 1.

Verification via Collateral Contact

8/21 TC, Contacted Maria at HUD at 541-800-0000. She verified George is billed for $125 rent after the subsidy. Increasing the rent to $125 as of September 1 on FCAS.