How to Streamline Verification of Eligibility for Medicaid and SNAP

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Section 1  Executive Summary

This toolkit provides resources for advocates and state agencies seeking to streamline the eligibility verification process for Medicaid and SNAP.

Federal law requires the state and county agencies that administer Medicaid and SNAP to verify that a client is eligible before approving or renewing benefits. An agency may have to verify eligibility factors such as income, household size, assets, and citizenship or immigration status. There are three main methods of verification: obtaining client statements (known as self-attestation), accessing data from other agencies or commercial entities, or requiring the client to provide additional documentation.

In many cases, agencies can rely on a combination of client statements and available data sources to confirm eligibility factors without requiring additional documents from the client. This has several benefits:

- It lowers costs for agencies and clients by reducing administrative burden and expediting processing.\(^1\)
- It reduces the risk that an eligible client will be unable to obtain or keep benefits because they didn’t receive the notice requesting documents, they didn’t understand what they needed to do to verify their eligibility, or the agency didn’t properly process their documents.
- It improves accuracy.

Federal Medicaid and SNAP regulations lay out the factors that must be verified, what sources can be used, whether self-attestation is an option, and where states have flexibility. This toolkit provides detailed information on these regulatory requirements and options and available data sources. Advocates can use the toolkit to analyze state regulations, policy, and operational practices and identify opportunities to streamline verification. State agencies can also use the toolkit to better understand federal requirements and identify where state policies can be clarified or improved.

Section 2 of this toolkit, Federal Verification Requirements, outlines the requirements for Medicaid and SNAP at application and renewal. It covers policies for each program as well as the specific eligibility factors agencies must verify, when they may use self-attestation or data sources, and when paper documentation may be required.

Section 3, Data Sources to Verify Eligibility, lists federal, state, and commercial data sources that can be used to verify eligibility and explains how states can access this data.

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Section 4, **Streamlining Verification**, discusses how agencies can combine policy, data sources, and operational practices to streamline eligibility determinations at various points in the eligibility process.

Table 1 summarizes the eligibility factors that must be verified for each program and the data sources available to meet that requirement.

<table>
<thead>
<tr>
<th>Eligibility Factor</th>
<th>Medicaid Verification Requirement</th>
<th>SNAP Verification Requirement</th>
<th>Available Data Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Security Number (SSN)</td>
<td>Required if client is eligible to receive one (can verify post-enrollment)</td>
<td>Required</td>
<td>- Social Security Administration (SSA) - State Verification and Exchange System (SVES)/State On-Line Query (SOLQ)</td>
</tr>
<tr>
<td>Income</td>
<td>Required (can verify post-enrollment)</td>
<td>Required</td>
<td>- Equifax The Work Number (also known as TALX)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Quarterly wage data (Medicaid only)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Internal Revenue Service (IRS) tax data (Medicaid only)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- State tax system</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- SNAP data (Medicaid only)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- SSA - Beneficiary &amp; Earnings Data Exchange (BENDEX)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- SSA - State Data Exchange (SDX)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- State unemployment system</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- State pension system</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- State child support system</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Public Assistance Reporting Information System (PARIS) (veterans benefits, federal income)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Other human services programs (e.g., TANF)</td>
</tr>
<tr>
<td>Identity</td>
<td>Agency may require in conjunction with citizenship verification</td>
<td>Required</td>
<td>- SSA - SVES/SOLQ</td>
</tr>
<tr>
<td>Residency</td>
<td>Agency may accept client statement</td>
<td>Required</td>
<td>- State system for driver licenses and IDs</td>
</tr>
<tr>
<td>Citizenship</td>
<td>Required before enrollment (when there is a delay in verifying, clients can get benefits during reasonable opportunity period)</td>
<td>Agency may require only if client statement is questionable</td>
<td>- SSA - SVES/SOLQ</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Department of Homeland Security (DHS) – Systematic Alien Verification for Entitlements (SAVE)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- State vital records system</td>
</tr>
<tr>
<td>Eligibility Factor</td>
<td>Medicaid Verification Requirement</td>
<td>SNAP Verification Requirement</td>
<td>Available Data Sources</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>----------------------------------</td>
<td>-------------------------------</td>
<td>------------------------------------------------------------</td>
</tr>
<tr>
<td>Immigration Status of Non-Citizen Applicants</td>
<td>Required before enrollment (when</td>
<td>Required</td>
<td>• DHS – SAVE</td>
</tr>
<tr>
<td></td>
<td>there is a delay in verifying,</td>
<td></td>
<td>• SSA – Qualifying Quarters</td>
</tr>
<tr>
<td></td>
<td>clients can get benefits during</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>reasonable opportunity period)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age (Date of Birth)</td>
<td>Agency may accept self-</td>
<td>Not required</td>
<td>• State vital records system</td>
</tr>
<tr>
<td></td>
<td>attestation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Household Size/Composition</td>
<td>Agency may accept self-</td>
<td>Agency may require if client</td>
<td>• IRS</td>
</tr>
<tr>
<td></td>
<td>attestation</td>
<td>statement is questionable;</td>
<td>• State tax system</td>
</tr>
<tr>
<td></td>
<td></td>
<td>agency may opt to verify for</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>all clients</td>
<td></td>
</tr>
<tr>
<td>Shelter Expenses</td>
<td>N/A</td>
<td>Agency may require if client</td>
<td>• Public housing authority system (if client resides in</td>
</tr>
<tr>
<td></td>
<td></td>
<td>statement is questionable;</td>
<td>subsidized housing)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>agency may opt to verify for</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>all clients</td>
<td></td>
</tr>
<tr>
<td>Dependent Care Expenses</td>
<td>N/A</td>
<td>Agency may require if client</td>
<td>• None</td>
</tr>
<tr>
<td></td>
<td></td>
<td>statement is questionable;</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>agency may opt to verify for</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>all clients</td>
<td></td>
</tr>
<tr>
<td>Pregnancy</td>
<td>Agency must accept self-</td>
<td>N/A</td>
<td>• None</td>
</tr>
<tr>
<td></td>
<td>attestation unless it has</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>contradictory information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Support Paid</td>
<td>N/A</td>
<td>Required</td>
<td>• State child support system</td>
</tr>
<tr>
<td>Hours Worked (for certain SNAP clients)</td>
<td>N/A</td>
<td>Required</td>
<td>• Equifax The Work Number</td>
</tr>
<tr>
<td>Disability Status/Enrollment in Disability</td>
<td>Required for categories of</td>
<td>Required</td>
<td>• SSA – BENDEX</td>
</tr>
<tr>
<td>Program/Unfitness for Work</td>
<td>assistance based on disability</td>
<td></td>
<td>• SSA – SDX</td>
</tr>
<tr>
<td>Resources (assets)</td>
<td>Required for non-MAGI clients</td>
<td>Agency may require if client</td>
<td>• Asset Verification Service (AVS) (bank accounts)</td>
</tr>
<tr>
<td></td>
<td>with asset test (can do post-</td>
<td>statement is questionable;</td>
<td>• Lexis Nexis public records (property, cars, boats, etc.)</td>
</tr>
<tr>
<td></td>
<td>enrollment)</td>
<td>agency may opt to verify for</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>all clients</td>
<td></td>
</tr>
<tr>
<td>Medical Expenses</td>
<td>Required if seeking retroactive</td>
<td>Required</td>
<td>• SSA – BENDEX (Medicare premiums)</td>
</tr>
<tr>
<td></td>
<td>coverage of past medical</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>expenses</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

N/A in the table denotes criteria that are not an eligibility factor in the given program.
Federal Medicaid and SNAP regulations outline the specific eligibility factors that must be verified at application and renewal and what forms of verification are acceptable.

This section begins by explaining the general principles behind the federal requirements for each program. It then describes the specific rules for applications and renewals.

Section A: Medicaid

General Principles in Medicaid

Federal Medicaid regulations lay the groundwork for a streamlined application and renewal process that relies heavily on electronic data sources to verify client statements. The regulations require that agencies utilize all available and useful data sources and only request information from the client if they are unable to verify needed information through a data source.\(^2\)

The verification process is the same for determinations based on modified adjusted gross income (MAGI) (used for children, parents, pregnant people, and adults who are under 65 and not eligible based on a disability) and non-MAGI budgeting, (used for people who are 65 and older and people with disabilities) even though the eligibility rules differ.

There are three basic steps to verify Medicaid eligibility for all factors except citizenship and immigration status, which is discussed later in this toolkit.

1. The client completes an application or renewal form with information about their identity, income, household, and other factors affecting eligibility and attests to the information they provide.
2. The agency gathers information about the client from federal, state, and commercial data sources.
3. The agency compares the client statement to the data and determines if there are any differences that may affect eligibility. If the client statement and data sources are reasonably compatible, no further information is needed from the client. (See box.) If there is a difference that may affect eligibility, the agency can require either a reasonable explanation or paper documentation from the client to resolve the difference.\(^3\)

\(^2\) 42 C.F.R. §435.952(c).
\(^3\) 42 C.F.R. §435.952.
States set policy about which data sources they use to verify eligibility, when they accept client statements, and when they require documentation. For MAGI determinations, states must develop and submit plans outlining their approach to verification.4

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**Reasonable Compatibility**

When determining Medicaid eligibility, an agency compares the client statement on the application or renewal form to information obtained from data sources. If the information is the same, or the difference between them doesn’t affect eligibility, they are considered reasonably compatible. If there is a difference that may affect eligibility, the agency can require that the client provide a reasonable explanation or additional documents to verify their eligibility.5

For income verification, agencies may choose to establish a **reasonable compatibility standard** that applies when the income on the client statement is below the eligibility threshold, but data sources show income above the threshold. As long as the difference is less than the standard the state chooses to apply, the client statement and data source are considered reasonably compatible, and the client statement is used to determine eligibility. More than half of states have a reasonable compatibility standard, most often 10 percent.6

When states must verify assets for categories of Medicaid with a resource test, if both the client statement and the data returned from financial institutions show assets below the limit, the client is considered eligible. States! can also establish a reasonable compatibility standard for assets, for situations where the client statement is below the limit but the data source shows assets above the limit.

For other eligibility factors, an agency may choose to request additional information when there is a discrepancy between the client statement and a data source. For example, if someone’s date of birth on an application is different from what the state has on file for another program or what data from the Social Security Administration (SSA) shows, the agency may request clarification from the client.

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**Medicaid Applications**

At application, agencies cannot rely solely on self-attestation for **citizenship** or **immigration status** and must verify it through an electronic service or additional documentation before issuing benefits.7 If the client has stated that they are a citizen or hold an eligible immigration status, but the agency is unable to verify their status, the agency must approve coverage if the client is otherwise eligible and provide a reasonable opportunity period of at least 90 days while the client and agency work to verify their status.8

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4 42 C.F.R. §435.945(j). For individual state verification plans, see https://www.medicaid.gov/medicaid/eligibility/medicaidchip-eligibility-verification-plans/index.html.


7 42 C.F.R. §435.956(a).

8 42 C.F.R. §435.956(b).
The client may need to provide a document verifying identity in conjunction with certain citizenship verification documents.9

Agencies must verify **Social Security numbers (SSNs)**, though limited exceptions apply, such as when a client is ineligible to receive an SSN.10

Agencies must verify **income** through electronic data sources where possible.12 The agency compares the client statement and the data source and determines if any difference between them affects eligibility.

- If the statement and data source are reasonably compatible, the client’s self-attested income is used in making the eligibility determination.
- If they aren’t reasonably compatible, the agency may request a reasonable explanation or additional documentation, such as a pay stub, to resolve the discrepancy.13
- If no information is available in data sources to verify income — as is common with self-employed clients, for example — the agency may request further documentation from the client, such as a self-employment ledger.

Agencies must use an asset verification system (AVS) to verify **resources** (assets) for seniors and people with disabilities in coverage groups with a resource limit.14 The agency compares the client statement to the AVS data and requests additional documentation if the two are not reasonably compatible.

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9 42 C.F.R. §435.407(b)
10 42 C.F.R. §435.956(d); see also 42 C.F.R. §435.910.
12 42 C.F.R. §435.948.
13 42 C.F.R. §435.952.
Agencies may accept self-attestation of residency, age (date of birth), and household size or verify these factors through available data sources. The agency may only request additional documentation from the client if the data source contradicts the client statement or shows no information.\textsuperscript{15}

If a client states they are pregnant, the agency must accept that statement unless they already possess information that is contradictory to that statement.\textsuperscript{16}

There are other factors agencies may have to verify for certain groups, such as people seeking eligibility as a caretaker relative of a minor child, an American Indian or Alaska Native, or a former foster care youth. Agencies may accept the client statement, rely on a data source, or require additional documentation for these factors.

States have the option of conducting post-enrollment verification for all eligibility factors except citizenship or immigration status. (See Table 2.) Post-enrollment verification allows the agency to enroll the client in Medicaid based on the information they attested to on their application. The agency then compares the information to data sources and requests additional documentation, if necessary, usually within two months of enrollment. If the client doesn’t provide the requested documentation, the agency can terminate their coverage.

\begin{table}[h]
\centering
\caption{Verification Requirements for Medicaid Applications}
\begin{tabular}{|l|c|c|c|}
\hline
Eligibility Factor & Agency Must Access Data Source Before Enrollment & Agency Must Access Data Source, But Can Be Post-Enrollment & Agency Can Accept Self-Attestation & Notes \\
\hline
Citizenship or Immigration Status & X & & & If agency is unable to verify and applicant has attested to an eligible citizenship or immigration status (and is otherwise eligible), client must be enrolled and given reasonable opportunity period of at least 90 days to verify eligibility. \\
\hline
Social Security Number & & X & & Must be verified (with limited exceptions) if client is eligible to receive one. Not required for non-applicants. \\
\hline
Income & & X & & Agency must accept client statement if reasonably compatible with data sources. \\
\hline
Resources (non-MAGI population) & & X & & Agency must accept client statement if reasonably compatible with data in asset verification system. \\
\hline
\end{tabular}
\end{table}

\textsuperscript{15} 42 C.F.R. §435.956(c) and (f).
\textsuperscript{16} 42 C.F.R. §435.956(e).
### Verification Requirements for Medicaid Applications

<table>
<thead>
<tr>
<th>Eligibility Factor</th>
<th>Agency Must Access Data Source Before Enrollment</th>
<th>Agency Must Access Data Source, But Can Be Post-Enrollment</th>
<th>Agency Can Accept Self-Attestation</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residency</td>
<td></td>
<td>X</td>
<td></td>
<td>Agency can request additional information from client if agency accesses data source and it contradicts client statement (or there is no information returned from the data source).</td>
</tr>
<tr>
<td>Age (Date of Birth)</td>
<td></td>
<td>X</td>
<td></td>
<td>Agency can request additional information from client if agency accesses data source and it contradicts client statement (or there is no information returned from the data source).</td>
</tr>
<tr>
<td>Household Size</td>
<td></td>
<td>X</td>
<td></td>
<td>Agency can request additional information from client if agency accesses data source and it contradicts client statement (or there is no information returned from the data source).</td>
</tr>
<tr>
<td>Pregnancy</td>
<td></td>
<td>X</td>
<td></td>
<td>Agency must accept client statement unless it possesses contradictory information.</td>
</tr>
</tbody>
</table>

### Medicaid Renewals

Agencies must conduct periodic renewals of Medicaid eligibility, usually every 12 months.\(^{17}\) At renewal, agencies must verify eligibility factors subject to change, such as income.\(^{18}\) Agencies must assume other factors have not changed, including citizenship status, and not attempt to re-verify those factors.

Agencies must first attempt to renew eligibility using information available from the case file and data sources. This process is known as an *ex parte* renewal.\(^{19}\) If the data sources confirm ongoing eligibility, the agency sends the client a notice that their eligibility has been renewed. The client isn’t required to take any action, unless the information on the notice is incorrect.

If the agency can’t confirm ongoing eligibility through data sources, it sends the client a pre-populated renewal notice which the client must complete, sign, and return.\(^{20}\) Eligibility workers then compare the

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\(^{17}\) 42 C.F.R. §435.916(a)(1).

\(^{18}\) 42 C.F.R. §435.916(e).


\(^{20}\) 42 C.F.R. §435.916(a)(3).
statements on the renewal form to data sources and should only require clients to provide additional
documentation if there is information in data sources that is not reasonably compatible with the client
statement.

Section B: SNAP

General Principles in SNAP

Federal SNAP regulations require verification of several factors that determine a client’s eligibility and
benefit amount. Agencies have the option to verify additional factors.

Eligibility factors for SNAP can be verified through documentary evidence, data sources, or collateral
contacts, who are people outside of the household able to confirm their circumstances, such as an
employer, landlord, or social service agency.

State agencies have a legal obligation to help clients obtain required verification documents. Eligibility
workers must assist the client and must accept any reasonable documentary evidence they provide.21
Agencies cannot require specific documents and must use the best available information for income when
other efforts fail.22 For example, if a client doesn’t receive a traditional paycheck and the employer refuses
to verify their income, the agency must accept a client statement or other records provided by the client.

Some eligibility factors, such as dependent care and shelter expenses, are necessary to determine
deductions when calculating the SNAP benefit amount. The state may require verification of those factors
for the client to receive the deduction. However, if verification isn’t provided, the application must still be
approved without the deduction if the client is otherwise eligible.

21 7 C.F.R. §273.2(f)(5)(i).
SNAP Applications

Federal regulations outline what agencies must verify for a SNAP application, though states have the option to verify more and must verify any questionable information.23 (See box.)

For certain clients, such as those subject to SNAP’s three-month time limit, the agency may need to obtain additional verification beyond those listed below. There are also factors that may need to be verified, such as disability for purposes of work registration, but verification is not required for the initial eligibility determination.

At application, agencies must verify:24

- income (both earned and unearned);
- identity;
- Social Security number; and
- residency (with exceptions for certain clients, such as those experiencing homelessness).

If applicable, agencies must verify:25

- immigration status of non-citizen clients;
- child support paid;
- hours worked and countable months in other states (for certain clients subject to the time limit);
- medical expenses (a deduction available only to elderly or disabled clients);
- unfitness for work (if the client is claiming an exemption from the student exclusion); and
- disability status.

If the client statement is considered “questionable,” agencies must verify:26

- dependent care expenses;
- resources;
- shelter expenses;

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24 7 C.F.R. §273.2(f)(1).
25 Ibid.
26 7 C.F.R. §273.2(f)(2). Agencies have the option to mandate verification for these factors even if not questionable. 7 C.F.R. §273.2(f)(3).
• citizenship status;
• household composition;\textsuperscript{27} and
• other factors that affect eligibility or benefit levels.\textsuperscript{28}

Some SNAP applicants are entitled to \textit{expedited SNAP} benefits, meaning they must be able to access their benefits within 7 days of applying instead of the regular 30-day timeframe. For expedited SNAP, agencies must verify \textbf{identity} before issuing benefits. Agencies must also make reasonable efforts to verify other factors within the expedited timeframe, but benefits cannot be delayed because those factors haven’t yet been verified.\textsuperscript{29} All factors must be verified for households to receive benefits beyond the one to two months of expedited benefits.

\begin{table}[h]
\centering
\caption{Verification Requirements for SNAP Applications}
\begin{tabular}{|l|c|c|c|}
\hline
\textbf{Eligibility Factor} & \textbf{Must Be Verified for All Applications} & \textbf{Must Be Verified If Applicable} & \textbf{Must Be Verified If Questionable; Agency Has Option to Require Verification in All Circumstances} & \textbf{Notes} \\
\hline
Income & X & & & Includes both earned income (from employment) and unearned income (Social Security benefits, unemployment insurance, etc.). \\
\hline
Identity & X & & & Only factor that must be verified before expedited SNAP benefits issued. \\
\hline
Social Security Number & X & & & Not required for non-applicants. \\
\hline
Residency & X & & & Exceptions must be made for certain clients, such as those experiencing homelessness. \\
\hline
Immigration Status & X & & & Only applies if non-citizen household members are applying for benefits. \\
\hline
Child Support Paid & X & & & \\
\hline
Hours Worked and Countable Months & X & & & Only applies to certain adults subject to the time limit. \\
\hline
Medical Expenses & X & & & Deduction is only available to elderly or disabled clients; application must be processed without deduction if verification not provided. \\
\hline
\end{tabular}
\end{table}

\textsuperscript{27} 7 C.F.R. §273.2(f)(1)(x).
\textsuperscript{28} 7 C.F.R. §273.2(f)(3).
\textsuperscript{29} 7 C.F.R. §273.2(f)(3)(i).
### TABLE 3
Verification Requirements for SNAP Applications

<table>
<thead>
<tr>
<th>Eligibility Factor</th>
<th>Must Be Verified for All Applications</th>
<th>Must Be Verified If Applicable</th>
<th>Must Be Verified If Questionable; Agency Has Option to Require Verification in All Circumstances</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unfitness for Work</td>
<td></td>
<td>X</td>
<td>Must be verified if claiming unfitness for work for purposes of student exclusion.</td>
<td></td>
</tr>
<tr>
<td>Disability Status</td>
<td></td>
<td>X</td>
<td>Must be verified if claiming exemption from work requirements or eligibility for medical deduction.</td>
<td></td>
</tr>
<tr>
<td>Dependent Care Expenses</td>
<td></td>
<td></td>
<td>Application must be processed without deduction if verification not provided.</td>
<td></td>
</tr>
<tr>
<td>Household Composition</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resources</td>
<td></td>
<td>X</td>
<td>Only applicable if state has resource/asset test.</td>
<td></td>
</tr>
<tr>
<td>Shelter Expenses</td>
<td></td>
<td>X</td>
<td>Application must be processed without deduction if verification not provided.</td>
<td></td>
</tr>
<tr>
<td>Citizenship Status</td>
<td></td>
<td>X</td>
<td>Can only require verification if questionable.</td>
<td></td>
</tr>
</tbody>
</table>

#### SNAP Periodic Reports and Other Changes

Many agencies conduct a SNAP periodic report (also known as an interim report or semi-annual report) between the application and recertification, usually at the six-month mark.

If an agency conducts a periodic report, agencies must ask the client if they have experienced changes in:

- unearned income of more than $125;
- employment, including starting or stopping a job, wage rate or salary, or change between part-time and full-time status; or a change of more than $125 in income;
- household composition;
- residence and shelter costs;
- resources (if the state has a resource/asset test);
- legal obligation to pay child support; and

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• if subject to the three-month time limit, a change in work hours that brings the client below 20 hours per week.

If a client reports changes in any of these areas, the state must follow the same verification rules as at application: changes in income (and resources and child support, if applicable) must be verified while agencies can accept self-attestation for other factors. If a client reports no changes at the periodic report, the agency shouldn’t require any verification documents.

For changes that the client reports or that the state otherwise learns about during the certification period, the same basic verification rules apply. However, states have flexibility about whether they need to act or seek verification for certain changes. In some instances, such as when the state receives unclear information, states may not act or pursue verification until the next recertification or periodic report.32

**SNAP Recertifications**

At a SNAP recertification (which is generally every year, though may be less frequent for households with elderly and disabled members), agencies do not have to re-verify all eligibility factors. They only must verify:33

• a change in income if there is a change in the source or if the change is greater than $50/month;
• medical expenses if previously unreported or changed by more than $25/month;
• a change in the legal obligation to pay child support; and
• work hours for certain clients subject to the three-month time limit.

Agencies may choose to verify other information that has changed, as well as unchanged information if it is incomplete, inaccurate, inconsistent, or outdated. If they do so, they must follow the same verification rules as at application.34

**Section 3** Data Sources to Verify Eligibility

Understanding how agencies access and use data can help identify ways to streamline determinations by increasing reliance on data sources and minimizing requests for the client to submit documentation.

Agencies can access a variety of federal, state, and commercial databases to verify eligibility. Under the Social Security Act, states must have an Income and Eligibility Verification System (IEVS), which they use to

32 7 C.F.R. §273.12(c).
34 7 C.F.R. §273.2(f)(8)(i)(D).
obtain data from federal and state sources to determine and renew eligibility for Medicaid, SNAP, and other programs.35

For Medicaid, federal regulations require agencies to access information from certain data sources, to the extent they find them useful. These sources include SSA, IRS, quarterly wage data from state workforce agencies, and SNAP.36

For SNAP, federal regulations require that agencies access certain data sources, including quarterly wage data, SSA, certain information from the IRS, and unemployment insurance data through their IEVS.37 States are also required to conduct data matching with the Electronic Disqualified Recipient System (eDRS),38 the National Directory of New Hires (NDNH),39 Systematic Alien Verification for Entitlements (SAVE),40 the Prisoner Update Processing System (PUPS),41 and SSA’s Death Master File (DMF).42

Section A: Accessing Data Sources

Data Sources for Applications

When an agency receives a Medicaid or SNAP application, the system (or an eligibility worker) enters identifying information (usually SSNs) provided by the client into federal, state, and commercial databases. If the data sources confirm the information on the application, that eligibility factor is considered verified, and the client usually doesn’t need to submit any verification documents.

For example, the state agency that issues driver licenses and state IDs might return a match showing the client has an active ID in that state, confirming that they are a state resident. Or the SSA may return information confirming that a client is receiving Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) and verifying the benefit amount.

36 42 C.F.R. §435.948(a).
37 7 C.F.R. §272.8.
38 7 C.F.R. §273.16.
39 7 C.F.R. §272.16.
40 7 C.F.R. §272.11.
41 7 C.F.R. §272.13.
In other instances, the data source may conflict with the client statement, provide information that wasn’t reported, or not show any information. If a client reports they have no income, but the state quarterly wage data shows they were working in the last quarter, the agency may send the client a request for information (RFI) and ask them to confirm that they are no longer working. SNAP agencies may also check databases to see if a client is disqualified or already receiving benefits in another state.

If the data source provides information that may affect eligibility, the agency may request additional documentation from the client, but they generally cannot take negative action without first making that request.

If no information is returned from the data sources to verify the client statement, the agency may need to request additional documentation from the client. For example, workers compensation usually can’t be verified through a data source, so clients must provide documentation.

When eligibility workers access data sources, they may have to log in separately to each relevant data source, enter the SSNs of all household members, and individually review each result. Other states have systems (sometimes referred to as spider systems) that take the household’s SSNs, automatically run them against all relevant data sources, and return the results to the eligibility worker, ideally in a way that is integrated into the eligibility system. States that add a new data source may at first require separate logins to that source until it can be fully integrated into the eligibility system.

**Periodic Data Matches**

Many agencies also periodically check data sources for current clients to identify relevant changes in circumstances, known as periodic data matches. For example, a state may run a match of clients against quarterly wage data and identify those whose income may have exceeded the eligibility threshold in the last quarter. Agencies also use matches to identify clients who have died, become incarcerated, or are receiving benefits in another state. If there is a match, the system may automatically generate a RFI to send to the client or may generate a task in the system for an eligibility worker to investigate further.

**Renewals, Periodic Reports, and Recertifications**

As in the application process, agencies run clients through multiple data sources at renewal (in Medicaid) and periodic report and recertification (in SNAP).

For Medicaid, this is first done as part of the ex parte process to attempt to confirm ongoing eligibility. If the agency is unable to renew the client through the ex parte process and the client is required to submit a renewal form, the agency then uses data sources to verify the information the client provides.

For SNAP, agencies do not always check data sources during a periodic report when the client reports no changes, but usually will do so if the client reports changes. Agencies do check data sources at the time of SNAP recertification to verify the information provided by the client on the recertification form.
Section B: Federal Data Sources

Federal Data Services Hub

The Federal Data Services Hub (“hub”) provides access to multiple data sources through a single connection. The hub was built to allow state Medicaid agencies and state-based health insurance exchanges to easily access multiple federal sources relevant for determining eligibility for Medicaid and qualified health plans.43 Most of these data sources were previously available to states but required multiple individual connections and data sharing agreements.

Through the hub, agencies can access information from SSA, Department of Homeland Security (DHS), Department of Veterans Affairs (VA), Equifax The Work Number (also known as TALX, a commercial data source), IRS, and other sources.44 However, some information from the hub can only be used for eligibility determinations for health insurance affordability programs like Medicaid, and cannot be used for SNAP determinations.45

Social Security Administration

The SSA maintains several databases with information on SSNs; citizenship status; income from retirement, survivors, or disability benefits: death records: incarceration information; and more.

Agencies can access multiple SSA databases at once through various pathways. One pathway is through the State On-Line Query (SOLQ) interface, which allows agencies to access several SSA databases with income information in real time as they process an application or renewal. Agencies can also use a batch process called the State Verification & Exchange System (SVES) to access multiple SSA databases to identify changes in client information on a regular basis. For example, if a client receiving SNAP or Medicaid is newly approved for SSI, or their SSDI amount changes, that is identified through this batch exchange and the agency can update the income information in their SNAP or Medicaid case file.

Tables 4 and 5 describe SSA and other federal data sources useful to agencies administering Medicaid and SNAP.


<table>
<thead>
<tr>
<th>Data Source</th>
<th>Type of Information Relevant to SNAP or Medicaid</th>
<th>Details</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>BENDEX (Beneficiary &amp; Earnings Data Exchange)</td>
<td>Income, Medicare enrollment, medical expenses</td>
<td>Social security retirement, survivors, and disability (SSDI) benefits; Medicare eligibility and premiums</td>
<td>▪ Batch process</td>
</tr>
<tr>
<td>SDX (State Data Exchange)</td>
<td>Income</td>
<td>SSI benefits</td>
<td>▪ Batch process</td>
</tr>
<tr>
<td>Qualifying Quarters (QC)</td>
<td>Qualifying quarters of work for determining immigrant eligibility</td>
<td>Number of qualifying quarters client has in SSA records</td>
<td>▪ Batch process, Triggered through SVES (see below)</td>
</tr>
<tr>
<td>PUPS (Prisoner Update Processing System)</td>
<td>Incarceration status</td>
<td>Participating jails and prisons provide names, dates of birth, SSNs, and date of incarceration of inmates</td>
<td>▪ Batch process, Triggered through SVES (see below), SSA provides incentive payments to prisons and jails, but participation is limited</td>
</tr>
<tr>
<td>DMF (Death Master File)</td>
<td>Death records</td>
<td>Records of people who have been reported as deceased by family members, funeral homes, etc.</td>
<td>▪ Batch process</td>
</tr>
<tr>
<td>SVES (State Verification &amp; Exchange System)</td>
<td>Citizenship, immigrant eligibility, SSN, income, incarceration status</td>
<td>Citizenship verification, SSN verification, Social Security retirement and survivors benefits, SSI benefits, SSDI benefits, prisoner information</td>
<td>▪ Batch process, information returned within 24 hours, Allows states to access BENDEX, SDX, prisoner records, and QC through a single query, Verifies citizenship for clients born in the US based on SSA records</td>
</tr>
<tr>
<td>SOLQ (State On-Line Query)</td>
<td>Citizenship, immigrant eligibility, SSN, income, incarceration status</td>
<td>Citizenship verification, SSN verification, Social Security retirement and survivors benefits, SSI benefits, SSDI benefits, prisoner information</td>
<td>▪ Real-time, Allows states to access BENDEX, SDX, prisoner records, and QC through a single query, Online version of SVES, Verifies citizenship for clients born in the US based on SSA records</td>
</tr>
</tbody>
</table>

### TABLE 4
Social Security Administration Data Sources

<table>
<thead>
<tr>
<th>Data Source</th>
<th>Type of Information Relevant to SNAP or Medicaid</th>
<th>Details</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>BEER (Beneficiary Earnings Exchange Record)</td>
<td>Income</td>
<td></td>
<td>• Batch process</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Requested through BENDEX</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Information may be from over one year ago</td>
</tr>
<tr>
<td>IRS (Internal Revenue Service)</td>
<td>Department of the Treasury</td>
<td>Income, tax filing status</td>
<td>Information from a client’s tax return including taxpayer identity, filing status, family size, and MAGI income; income information may be available to SNAP agency through separate interface</td>
</tr>
<tr>
<td>SAVE (Systematic Alien Verification for Entitlements), also known as Verify Lawful Presence</td>
<td>Department of Homeland Security – US Citizenship and Immigration Services (USCIS)</td>
<td>Immigration Status</td>
<td>Provides client immigration status based on USCIS records through submission of alien registration or admission number</td>
</tr>
<tr>
<td>PARIS (Public Assistance Reporting Information System)</td>
<td>Department of Health and Human Services – Administration for Children and Families</td>
<td>Income, other health insurance</td>
<td>Department of Veterans Affairs match shows eligibility for VA benefits and if clients already receive income or medical assistance from the VA</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income, other health insurance</td>
<td>Department of Defense (DOD)/ Office of Personnel</td>
</tr>
</tbody>
</table>

**Notes**


## TABLE 5
### Other Federal Data Sources

<table>
<thead>
<tr>
<th>Data Source</th>
<th>Federal Agency</th>
<th>Type of Information Relevant to SNAP or Medicaid</th>
<th>Details</th>
<th>Notes</th>
</tr>
</thead>
</table>
| NDNH (National Directory of New Hires)\(^49\) | Department of Health and Human Services – Office of Child Support Enforcement | Management match shows if client is receiving income from DOD or another federal source and if they are eligible for health insurance | Interstate match shows if duplicate payments are being issued for the same program in more than one state | - Batch process  
- Compares participation data on Medicaid, SNAP, TANF, and child care |
| | | Employers report information on new hires including name, SSN, first day of work, and employer information | | - Employers report new hires to state directory of new hires, which report to NDNH  
- Federal agencies report directly to NDNH  
- SNAP agencies are required to check NDNH at application and recertification\(^50\)  
- State workforce agencies must transmit data to NDNH within 4 months of the end of the quarter  
- Medicaid agencies generally don’t have access to this nationwide data and rely on workforce agency data for their state  
- National data on unemployment insurance benefits |
| | | Quarterly wage data from state workforce agencies | | |
| | | Unemployment insurance application or benefit receipt reported by state workforce agencies | | |

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\(^50\) 7 C.F.R. §272.16.
### TABLE 5

<table>
<thead>
<tr>
<th>Data Source</th>
<th>Federal Agency</th>
<th>Type of Information Relevant to SNAP or Medicaid</th>
<th>Details</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCOA (National Change of Address Database)(^{51})</td>
<td>US Postal Service (USPS)</td>
<td>Addresses</td>
<td>Reports of address changes clients submit to the USPS</td>
<td>States may run regular batch inquiries against NCOA to identify new addresses reported by clients</td>
</tr>
<tr>
<td>Electronic Disqualified Recipient System (eDRS)(^{52})</td>
<td>US Department of Agriculture – Food and Nutrition Service</td>
<td>Disqualifications</td>
<td>Data on clients disqualified from SNAP for program violations</td>
<td>Includes length of disqualification and number of times client has been disqualified Used by SNAP agencies to determine current ineligibility and length of subsequent disqualifications</td>
</tr>
</tbody>
</table>

### Section C: State Data Sources

In addition to federal data sources, agencies have data-sharing agreements with other state agencies to gather information that may affect Medicaid and SNAP eligibility. State databases can be valuable sources of information to verify residency, income, and other important information. Table 6 shows examples of state data sources that may be useful for Medicaid and SNAP eligibility determinations. Note that agency names may differ across states.

### TABLE 6

<table>
<thead>
<tr>
<th>Data Source</th>
<th>Type of Information</th>
<th>Notes</th>
</tr>
</thead>
</table>
| SWICA – State Wage Information Collection Agency (usually state Department of Labor) quarterly wage data | Income              | • Usually available to the agency 2-3 months after the quarter ends  
• Provides quarterly earnings of employees, reported by employers  
• Can be used to verify income eligibility for Medicaid  
• Often used in periodic data matches |

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<table>
<thead>
<tr>
<th>Data Source</th>
<th>Type of Information</th>
<th>Notes</th>
</tr>
</thead>
</table>
| State New Hire database (usually through state Department of Labor) | New hires | - Employers must report new or rehired employees within 20 days (or less in some states)
- Employers report to a state database, and state agency then reports to National Directory of New Hires (NDNH) |
| Agency administering unemployment insurance | Income | - Current information about amount and duration of unemployment benefits |
| Secretary of State/Department of Motor Vehicles | Identity, residency | - Driver licenses and state ID |
| Agency administering child support | Income, child support paid | - Contains information on child support received and paid |
| Department of Vital Records | Citizenship, date of birth, parentage | - Birth certificates |
| Department of Revenue | Income | - State tax data may be helpful in verifying self-employment income, but data is often old and annual amount |
| Agency administering state pensions | Income | - Contains pension payment information for former state employees
- Participation of local and state institutions varies
- Can be used to suspend Medicaid when a client is incarcerated
- Timely cross-matches can help with efforts to connect justice-involved clients to benefits upon release |
| State and local jail/prison database | Incarceration status | |
| SNAP Disqualified Participants | Disqualified participants | - Tracks clients ineligible for SNAP due to intentional program violation or other reasons |
| Agency administering SNAP | Income, resources | - Medicaid agencies can use SNAP data to verify eligibility at application and renewal⁵³ |
| Agency administering other health and human service programs (e.g., TANF) | Income, verification documents, etc. | - Can use income and other data as well as documents submitted by clients for TANF, other cash assistance programs, etc. to verify eligibility for Medicaid or SNAP |
| Housing authority | Housing expenses | - Can access client’s rent payment if residing in Section 8 or other subsidized housing |
| State lottery/gaming agency | Lottery winnings | - Can be used to identify SNAP clients with “substantial” lottery or gaming winnings⁵⁴ |


⁵⁴ 7 C.F.R. §272.17.
Section D: Commercial Data Sources

Commercial data sources provide another valuable source of information for Medicaid and SNAP agencies, particularly for income and asset verification. Accessing these sources can be very costly for state agencies; some commercial services charge per match. But when used strategically, they can greatly reduce administrative burden on both clients and agencies and result in overall decreased costs.

<table>
<thead>
<tr>
<th>Service</th>
<th>Type of Information Relevant to SNAP or Medicaid</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equifax The Work Number (also known as TALX)</td>
<td>Income</td>
<td>▪ Contains data from over 3 million employers&lt;br&gt;▪ Usually current and precise information – shows amount of last paycheck&lt;br&gt;▪ Can be accessed through the hub for Medicaid&lt;br&gt;▪ Separate state contracts required for SNAP or if state doesn’t access through the hub&lt;br&gt;▪ High cost per hit&lt;br&gt;▪ One of few sources that is current enough to be used to verify earned income for SNAP</td>
</tr>
<tr>
<td>Asset Verification Service (AVS)</td>
<td>Resources</td>
<td>▪ Current account balances at local and national financial institutions, plus historical records going back up to 60 months&lt;br&gt;▪ Often implemented through contractors like PCG or Softheon</td>
</tr>
<tr>
<td>Experian Remote Identity Proofing Service</td>
<td>Identity verification</td>
<td>▪ Verifies identity through knowledge-based quiz using client’s credit history&lt;br&gt;▪ Can be accessed through the hub&lt;br&gt;▪ May be a substantial barrier if required before submitting an online application&lt;br&gt;▪ Difficult to complete for immigrants, clients with limited credit history, etc.</td>
</tr>
<tr>
<td>National Accuracy Clearinghouse (NAC)</td>
<td>Duplicate participation</td>
<td>▪ Database of active SNAP participants from all states and territories&lt;br&gt;▪ Used to prevent duplicate participation across states&lt;br&gt;▪ First piloted with 5 states&lt;br&gt;▪ In the process of expanding nationwide</td>
</tr>
</tbody>
</table>

56 Equifax The Work Number, [https://theworknumber.com/](https://theworknumber.com/).
58 7 C.F.R. §272.18.
Section 4 Streamlining Verification

Streamlining verification accelerates case processing, reduces agency burden, and helps ensure eligible clients can obtain the supports they need. Agencies should set clear policy on what must be verified, maximize the use of self-attestation and data sources, and simplify the process for clients to submit documents when necessary.

Verification Policy

The first step in streamlining eligibility verification is setting clear policy.

For Medicaid, this includes accepting self-attestation when possible and setting clear policy for renewals on which factors are subject to change and must be asked about and verified. Clear policy is also needed on reasonable compatibility, which, when applied correctly, can significantly reduce verification requests. If the attestation and data source are both below the eligibility threshold, the difference doesn’t affect eligibility and no documentation should be required. Developing a policy and providing examples can help eligibility workers understand how to apply reasonable compatibility to different scenarios. In addition, agencies can program their systems to correctly apply the policy to applications and at renewal.

For SNAP, agencies can streamline the process by not requiring verification of factors like household expenses unless questionable. Agencies must clearly define when information is questionable. Without guidance, some eligibility workers may flag most cases as questionable and always request verification. This delays processing, creates additional workload for the agency, and increases the likelihood that an eligible household will lose benefits. Eligibility workers need clear information with examples to help them understand when to request verification. At the periodic report and recertification stage, client forms should include only the necessary questions, and eligibility workers should only verify changes when federally required to do so.

Finally, in both programs, agency culture plays a major role. If the agency culture emphasizes a fear of audits or negative quality control findings, eligibility workers are likely to request excessive verification, adding to their workload and increasing the likelihood that eligible clients won’t successfully access the program. Instead, the agency culture should prioritize “one-touch” processing, meaning the eligibility worker does everything possible to process the case in one sitting, including using data sources and
collateral contacts to verify eligibility factors on the spot when possible. The one-touch approach encourages workers to use every resource available to process the case, rather than causing delays and increasing procedural denials by unnecessarily requesting documentation from the client.

**Using Data Sources Wisely**

Relying on federal, state, and commercial databases to verify eligibility where possible allows for fast and accurate eligibility determinations. At the same time, having more data is not always better. Agencies that administer SNAP and Medicaid should avoid providing eligibility workers with outdated, unreliable, or irrelevant data, such as information on property ownership for programs without an asset test.

States should also exercise caution when conducting periodic data matches. While such checks may identify clients who have experienced substantial changes in income, they often identify others who had small and temporary increases in income due to working overtime, for example. Such clients may lose coverage if they do not receive the RFI, don’t understand what they must do, or can’t obtain the required documents. Agencies should carefully set the parameters around these checks to avoid sending unnecessary RFIs that may lead eligible clients to lose coverage.

**Simplifying Document Submission**

While data sources can be used to verify most eligibility factors, sometimes the agency must request additional documentation from the client. If this proves necessary, agencies can limit confusion and burdens on clients by:

- using clear requests for information that specifically identify what is needed, such as the exact dates of pay stubs, so the client can provide the correct information;
- clarifying which alternatives are available to meet the verification requirements (for example, if the client can’t provide a pay stub);
- providing notifications by email and text, in addition to paper; and
- making it easy to submit documents through multiple channels, including by allowing a client to take a picture of the document with their smartphone and upload the information through a mobile-responsive client portal.

Streamlining verification through clear policy, maximizing the use of available data sources, and simplifying document submission reduces burden for agencies and helps ensure eligible clients can access and retain the health insurance and food assistance they need to thrive.