

United States Department of Agriculture (USDA), Food and Nutrition Service (FNS) Month-To-Month Contingent Approval to Continue Issuing Supplemental Nutrition Assistance Program (SNAP) Emergency Allotments (EA) Benefits under the Families First Coronavirus Response Act of 2020

Section 2302(a)(1) of the Families First Coronavirus Response Act of 2020, allows States to request COVID-19 EA “for households participating in the supplemental nutrition assistance program... to address temporary food needs.” The State must support its request with sufficient data, as determined through FNS guidance. A household’s EA cannot increase the current monthly household SNAP benefit allotment beyond “the applicable maximum monthly allotment for the household size.” Accordingly, SNAP households that already receive the maximum monthly allotment for their household size are not eligible for EA.

States that have already received FNS approval for EA issuance in March and April, or April and May, are approved to continue issuing EA benefits each month. This approval to extend these EAs will remain in place **until such a time as the Secretary for Health and Human Services rescinds the public health emergency declaration** that was issued on January 27, 2020, under section 319 of the Public Health Service Act **or the State-issued emergency or disaster declaration expires.**

This approval is contingent upon the State submitting the information below to the FNS Region no sooner than the 15th of each month for the subsequent month and awaiting FNS acknowledgement before sending the Emergency Allotment issuance file(s) to their Electronic Benefits Transfer processor.

Prior to each month of EA issuance, the State shall provide the following information to its FNS Regional SNAP contact(s), who will acknowledge receipt:

State/Territory: _____

1. [Month] EA Issuance date(s):

(Provide exact dates of planned EA issuance for the month or annotate above if the State will be providing EA benefits in accordance with the State’s regular issuance schedule.)

2. [Month] estimate of the number of households and estimated EA amount:

Number of households receiving emergency allotment benefits: _____

Amount of emergency allotment benefits issued for one month: \$ _____

3. **Confirmation** that one or more of the following conditions exists due to COVID-19. (Check all that apply):

- Residents of the State are confirmed to have contracted COVID-19
- Some or all areas of the State are containment or quarantine zones
- Businesses have closed or significantly reduced their hours
- The State’s residents have experienced economic impacts due to job suspensions or losses

— The State's residents have been directed to practice social distancing

And

— The State's emergency or disaster declaration remains active.

All FNS requirements shall remain the same as listed in the initial State approval.

USDA reserves the right to withdraw or otherwise modify this approval subject to availability of funding.