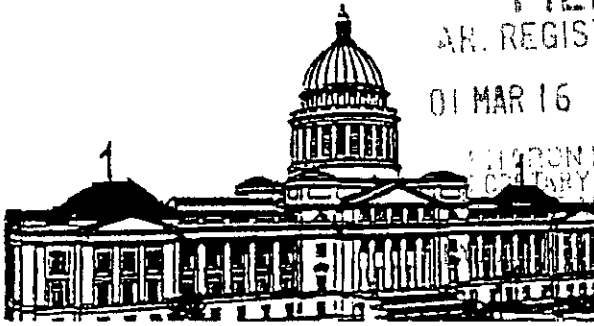


ARKANSAS REGISTER

Transmittal Sheet



FILED
AR. REGISTER DIV.

01 MAR 16 PM 2:44

SHARON PRIEST
SECRETARY OF STATE
ARKANSAS

Sharon Priest
Secretary of State
State Capitol Rm. 01
Little Rock, Arkansas 72201-1094

For Office

Use Only:

Effective Date

Code Number

01020 01003

Name of Agency

Arkansas Department of Human Services

Department

Division of County Operations

Contact Person

Sandra Miller, Assistant Director, DCO, OPPD

Phone

682-8251

Statutory Authority for Promulgating Rules

P.L. 104-193, Food Stamp Act of 1977

FSC 01-02

Date

Intended Effective Date

Legal Notice Published

2-15-01

☐ Emergency

Final Date for Public Comment

3-16-01

☒ 10 Days After Filing

Filed With Legislative Council

2-15-01

☐ Other

Reviewed by Legislative Council

Adopted by State Agency

April 1, 2001

CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted
In Compliance with Act 434 of 1967 As Amended.

A handwritten signature in dark ink, appearing to read "R. W. White", written over a horizontal line.

Signature

Director

Title

2/7/01

Date

**DEPARTMENT OF HUMAN SERVICES
DIVISION OF COUNTY OPERATIONS
AMENDING LEGISLATIVE REGULATION
ARKANSAS LEGISLATIVE COUNCIL**

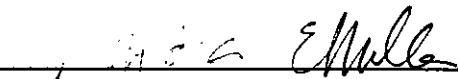
NUMBER AND TITLE: FSC 01-02, Maximum Excess Shelter Deduction
(Appendix D).

PROPOSED EFFECTIVE DATE: April 1, 2001

STATUTORY AUTHORITY: The Personal Responsibility and Work
Opportunity Reconciliation Act of 1996

NECESSITY AND FUNCTION: The maximum excess shelter deduction will
increase to \$340 for initial applications and recertifications

PAGES FILED: A total of 2 pages were filed.



**Sandra Miller
Assistant Director, Division of County Operations
Office of Program Planning and Development**

PROMULGATION DATE: April 1, 2001

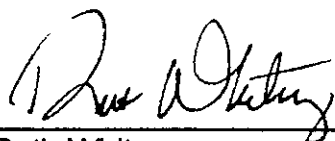
CONTACT PERSON: Sandra Miller
Assistant Director, Division of County Operations
Office of Program Planning and Development
P.O. Box 1437, Slot 1220
Little Rock, AR 72203-1437

(501) 682-8251

NOTICE OF RULE MAKING

Pursuant to the Food Stamp Act of 1977 and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, a proposed change in the maximum excess shelter deduction will increase the deduction to \$340 for initial applications and recertifications.

Copies of the revised policy may be obtained by writing to the Division of County Operations, Attention: Food Stamp Policy Section, P. O. Box 1437, Slot 1241, Little Rock, AR 72203-1437. All comments must be submitted within 30 days of the date of publication of this notice. If you need any material in a different format, such as large print, contact our Americans with Disabilities Act Coordinator at 682-8920 (Voice) or 682-8933 (TDD). The Arkansas Department of Human Services is in compliance with Titles VI and VII of the Civil Rights Act and operates, manages and delivers services without regard to political affiliation, religion, disability, age, veteran status, sex, race, color or national origin.



Ruth Whitney
Director
Division of County Operations

**QUESTIONNAIRE FOR FILING PROPOSED RULES AND REGULATIONS
WITH THE ARKANSAS LEGISLATIVE COUNCIL AND JOINT INTERIM COMMITTEE**

DEPARTMENT/AGENCY HUMAN SERVICES

DIVISION COUNTY OPERATIONS

DIVISION DIRECTOR RUTH WHITNEY

CONTACT PERSON Sandra Miller

ADDRESS Donaghey Plaza South, P.O. Box 1437, Slot 1220, Little Rock, AR 72203-1437

PHONE NO. 682-8251

INSTRUCTIONS

- A. Please make copies of this form for future use.
- B. Please answer each question completely using layman terms. You may use additional sheets if necessary.
- C. If you have a method of indexing your rules, please give the proposed citation after "Short Title of this Rule below.
- D. Submit two (2) copies of this questionnaire attached to the front of two (2) copies of your proposed rule and mail or deliver to:

Donna K. Davis
Subcommittee on Administrative Rules and Regulations
Arkansas Legislative Council
Bureau of Legislative Research
Room 315, State Capitol
Little Rock, AR 72201

1. What is the short title of this rule?
FSC 01-02
2. What is the subject of the proposed rule?
A change in the maximum excess shelter deduction
3. Is this rule required to comply with federal statute or regulations? YES XXX NO
If yes, please provide the federal regulation and/or the statute citation.
4. Was this rule filed under the emergency provisions of the Administrative Procedure Act? YES XXX NO
If yes, what is the effective date of the emergency rule?
When does the rule expire?

Will this emergency rule be promulgated under the regular provisions of the Administrative Procedure Act? YES NO
5. Is this a new rule? YES XXX NO
Does this repeal an existing rule? YES XXX NO
Is this an amendment to an existing rule? XX Yes NO

Is this an amendment to an existing rule? If yes, please attach a markup showing the changes in the existing rule and a summary of the substantive changes.

6. What state law grants the authority for this proposed rule? If codified, please give Arkansas Code citation.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996

7. What is the purpose of this proposed rule?

To transmit the change in maximum excess shelter deduction.

8. Will a public hearing be held on this proposed rule? ☐ YES ☒ NO

9. When does the public comment period end?

3-16-01

10. What is the proposed effective date of this proposed rule?

April 01, 2001

11. Do you expect this rule to be controversial? ☐ YES ☒ NO

If yes, please explain.

12. Please give the names of persons, groups, or organizations which you expect to comment on these rules. Please provide their position (for or against) if known.

NAME	GROUP/ORGANIZATION	ADDRESS
David Manley Attorney at Law	Legal Services of Arkansas	209 West Capitol, Suite 36 Little Rock, AR 72201

PLEASE ANSWER ALL QUESTIONS COMPLETELY.

DEPARTMENT HUMAN SERVICES

DIVISION COUNTY OPERATIONS

PERSON COMPLETING THIS STATEMENT Kissia Nathaniel

TELEPHONE NO. 682-8286 FAX NO. 682-1469

FINANCIAL IMPACT STATEMENT

To comply with Act 884 of 1995, please complete the following Financial Impact Statement and file with the questionnaire and proposed rules.

SHORT TITLE OF THIS RULE FSC 01-02

1. Does this proposed, amended, or repealed rule or regulation have a financial impact? XXX YES NO

If you believe that the development of a Financial Impact Statement is so speculative as to be cost prohibited, please explain.

This increase in food stamp benefits will be 100% federally funded. There will not be an impact on State funds.

3. If the purpose of this rule or regulation is to implement a federal rule or regulation, please give the incremental cost for implementing the regulation.

2000-2001 Fiscal Year

General Revenue	\$	0
Federal Funds	\$	0
Cash Funds	\$	0
Special Revenue	\$	0
Other	\$	0
Total	\$	0

2001-2002 Fiscal Year

General Revenue	\$	0
Federal Funds	\$	0
Cash Funds	\$	0
Special Revenue	\$	0
Other	\$	0
Total	\$	0

4. What is the total estimated cost by fiscal year to any party subject to the proposed, amended, or repealed rule or regulation?

2000-2001 Fiscal Year \$ 91,800 2001-2002 Fiscal Year \$ 367,200

5. What is the total estimated cost by fiscal year to the agency to implement this regulation?

2000-2001 Fiscal Year \$ 0 2001-2002 Fiscal Year \$ 0

MANUAL TRANSMITTAL
Arkansas Department of Human Services
Division of County Operations



☐ Policy ☐ Form ☒ **Policy Directive**

Issuance Number FSC 01-02

Food Stamp Certification Manual

Issuance Date 04/01/01

FROM: Ruth Whitney, Director

Expiration Date Until Superseded

SUBJ: Maximum Excess Shelter Deduction

<u>Page to be deleted</u>	<u>Dated</u>	<u>Page to be added</u>	<u>Dated</u>
Appendix D	01/01/01	Appendix D	04/01/01

Effective April 1, 2001, the maximum excess shelter deduction will increase to \$340 for initial applications and recertifications only. On going certifications will continue to be subject to the \$300 maximum excess shelter limit. Do not apply the new maximum excess shelter deduction when a quarterly report or other reported change is processed. This is the only change to Appendix D.

Inquiries to: Kissia Nathaniel, Food Stamp Section (501) 682-8286

APPENDIX D**April 1, 2001****CURRENT STANDARDS****CURRENT STANDARD DEDUCTIONS**

Type of Deduction	Amount	Effective Date
1. Earned Income	20%	05-01-86
2. Standard	\$134	12-01-95
3. Utility Standard	\$172	10-01-99
4. Maximum Excess Shelter (Initial applications and Recertifications)	\$340	04-01-01
Maximum Excess Shelter (Ongoing certifications)	\$300	10-01-00
5. Maximum Per Dependent (Under Age Two)	\$200	09-01-94
6. Maximum Per Dependent (Age Two and Older)	\$175	09-01-94

Current SSI Maximum Payments

Type of Payment	Amount	Effective Date
SSI Only – Individual	\$530	01-01-01
SSI Only – Couple	\$796	01-01-01
SSA/SSI – Individual	\$550	01-01-01
SSA/SSI – Couple	\$816	01-01-01
SSI Only-Individual Reduced	\$353	01-01-01
SSI Only –Couple Reduced	\$531	01-01-01
SSA/SSI-Individual Reduced	\$373	01-01-01
SSA/SSI-Couple Reduced	\$551	01-01-01

Current Medicare Premium - \$50.00 (Part B Only)