




STATE OF NEW MEXICO  
**Human Services Department**  
**Governor Michelle Lujan Grisham**  
David R. Scrase, M.D., Cabinet Secretary  
Angela Medrano, Deputy Cabinet Secretary  
Kari Armijo, Deputy Cabinet Secretary  
Karmela Martinez, Director ISD

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## General Information Memorandum

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### ISD-GI 22-06

**TO:** ISD Employees  
**FROM:** Karmela Martinez, Director, Income Support Division   
**DATE:** April 11, 2022  
**RE:** FFY 2022 SNAP Performance Report-Second

Attached please find the second issue of the Supplemental Nutrition Assistance Program (SNAP) Performance Report for FFY 2022. This report includes all Quality Control (QC) findings received for the review months of October 2021 through November 2021. Additional data included in this report is the recertification timeliness.

The FFY 2022 Performance Goals for the state are:

- Cumulative Payment Error Rate of 6% or better (Payment Accuracy 94%)
- Cumulative Negative Error Rate of 1% (Case and Procedural Error Rate (CAPER) of 99%)
- Expedite and Non-Expedite application processing timeliness of 95%

In lieu of the mandatory reviews, Supervisors are required to complete the reviews returned by the Accuracy Improvement team, as well as the ROM's requirement to review five Pre-disposition SNAP cases and two SNAP denials. These reviews should be reviewed within three business days.

If there are any questions or comments, please contact Carolyn Craven, of the Quality Assessment Bureau, at 827-7224 or e-mail at [Carolyn.Craven@state.nm.us](mailto:Carolyn.Craven@state.nm.us).

Attachment: Second SNAP Performance Report for FFY 2022





# SNAP PERFORMANCE REPORT

**Second Edition**

**Federal Fiscal Year 2022**

Quality Control Review Findings  
October 2021-November 2021

Issued by:  
Quality Improvement Section  
Quality Assessment Bureau, New Mexico Human Services Department

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# SNAP Performance Report

## SNAP Performance Report: Second Edition




This Supplemental Nutrition Assistance Program (SNAP) Performance Report for Federal Fiscal Year (FFY) 2021 includes all Quality Control (QC) findings received for the review months of **October 2021 to November 2021**.

### State Performance Goals

The State reports on three areas and is evaluated by the United States Department of Agriculture (USDA) Food and Nutrition Service (FNS) on these areas:

- **Payment Accuracy**
- **Case and Procedural Error Rate (CAPER)**
- **SNAP Timeliness for Expedite and Non-Expedite**

For FFY 2022, the State Performance Goals are as follows:

<p><b><u>Payment Accuracy</u></b></p>  <p><b>A cumulative error rate of 6% or better for a payment accuracy of 94% or better.</b></p>	<p><b><u>CAPER</u></b></p>  <p><b>A cumulative negative error rate of 1% or better for a CAPER accuracy of 99% or better.</b></p>	<p><b><u>SNAP Timeliness</u></b></p>  <p><b>A timeliness rate of 95% or better for SNAP Expedite and Non-Expedite.</b></p>
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The Payment Error Rate is figured from the QC Positive Sample cases for the review month, which are the cases actively receiving SNAP benefits. QC reviews the last action taken on the case to certify the eligibility, which could be an Application, Interim Report, or Recertification.

The CAPER Error Rate is figured from the QC Negative Sample cases for the review month, which are SNAP cases that were denied or terminated during the review month. QC reviews the last action taken to deny/terminate eligibility. The CAPER rate reviews the caseworker action and notices sent to the household. If a notice is not clear and concise and/or does not match the case record, the case is found in error even if the action to deny the case was correct.

# Payment Accuracy

## State Cumulative Payment Error Rate

The cumulative rates are the ongoing totals and averages taken from the total QC reviews for the fiscal year. These totals contain reviews from the months of **October 2021 to November 2021**.

### Ineligible Benefits

\$0 (0.00%) was incorrectly issued to recipients who were not eligible to receive SNAP benefits.

### Total Error Amount

\$6,074 was incorrectly issued to recipients and is a combination of overpaid, underpaid, and ineligible benefits. This is based on the total cases reviewed by QC and the \$52,667 total benefits issued within those cases.



### Underpaid Benefits

\$509 (0.97%) was not appropriately issued to recipients who were eligible to receive a higher amount in SNAP benefits.

### Overpaid Benefits

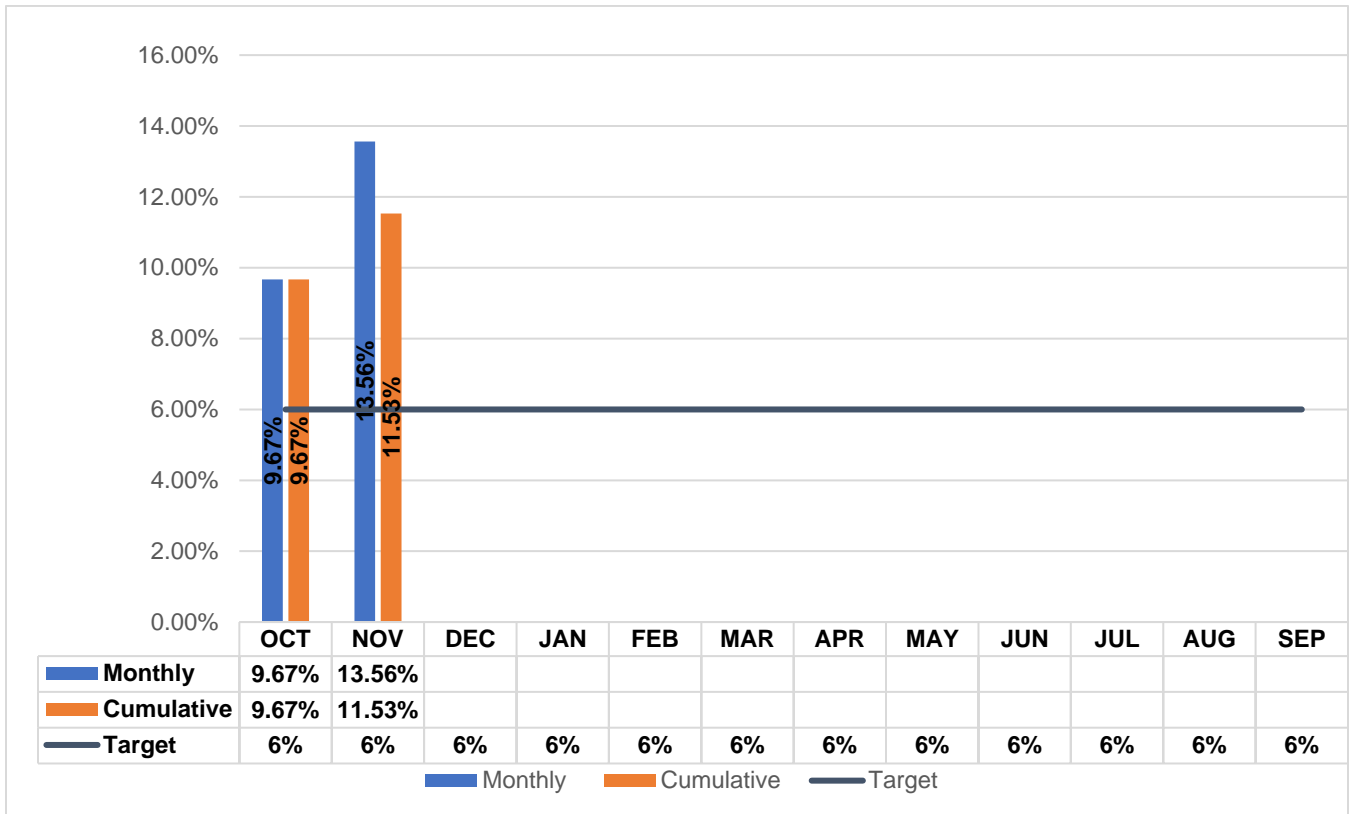
\$5,565 (10.57%) was incorrectly issued to recipients who were eligible for a lesser amount in SNAP benefits.

### Cumulative Totals - October 2021- November 2021

<b>Total Benefits Paid in QC Sample</b>	<b>\$52,667</b>
<b>Total Error Amount in QC Sample</b>	<b>\$6,074</b>
<b>Total Cases Reviewed by QC</b>	<b>162</b>
Total Cases with Errors	22
Total Correct Cases	140
Total Cases with Overpaid Benefits	18
Total Cases with Underpaid Benefits	4
Total Cases with Ineligible Benefits	0
Cases Dropped (In Sample, not Reviewed by QC)	34

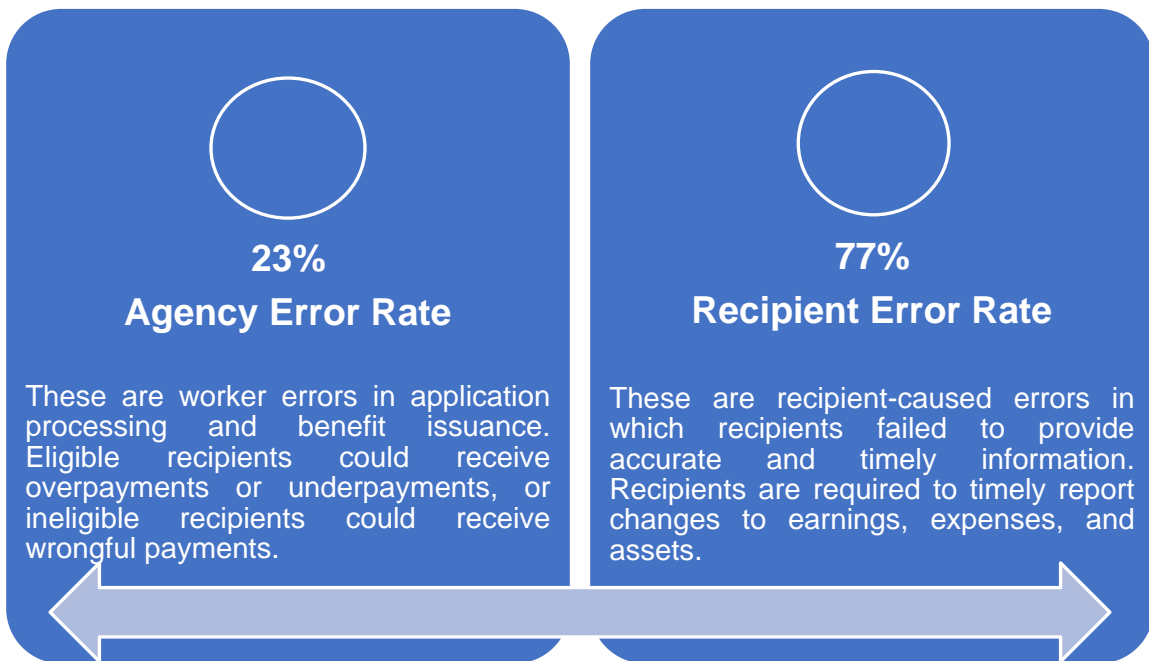
# FFY 2022 State Payment Error Rates

Monthly vs. Cumulative Error Rates



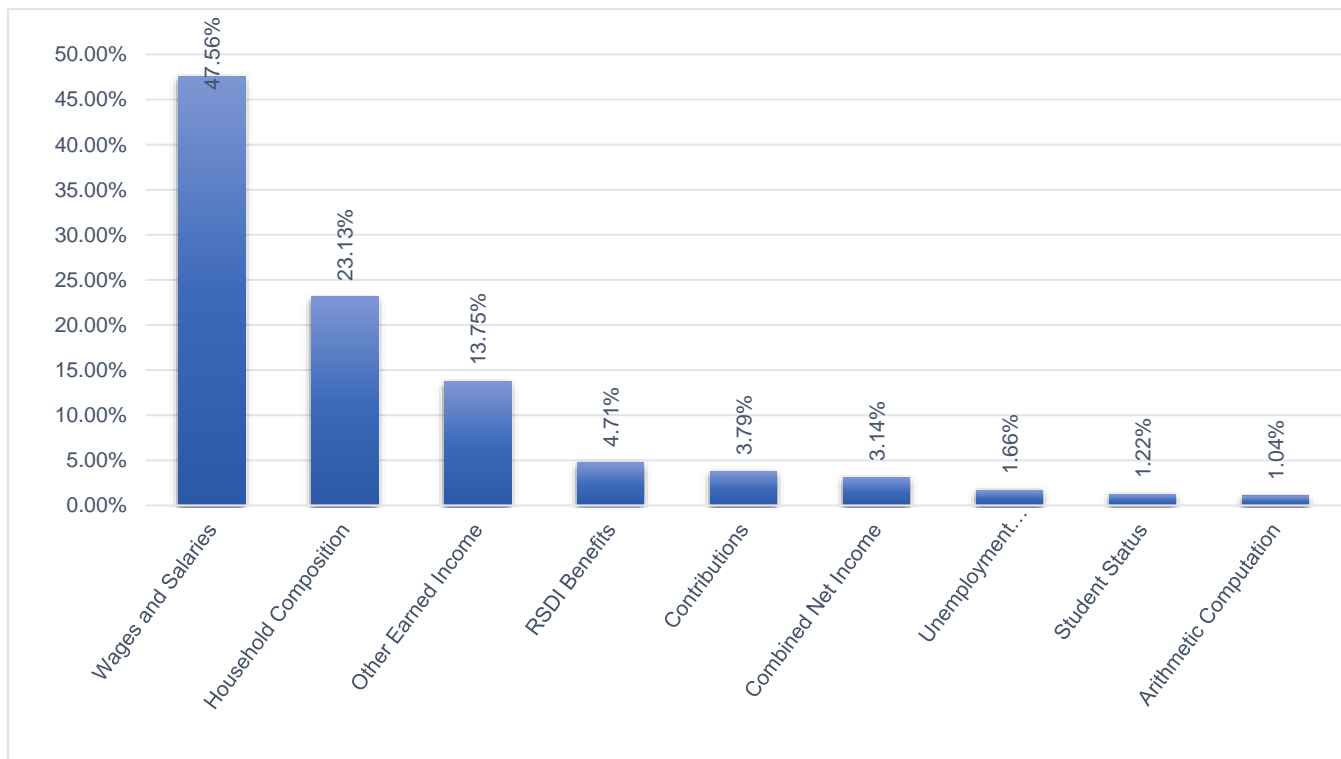
Monthly totals are for the individual review month, cumulative totals are the totals of all months ongoing added together.

## Are they Agency or Recipient Errors?



## FFY 2022 SNAP Error Trends – Cumulative Totals

Cumulative Totals - October 2021- November 2021		
Error Element	Error Amount	Error Percentage
Wages and Salaries	\$2,889	47.56%
Household Composition	\$1,405	23.13%
Other Earned Income	\$835	13.75%
RSDI Benefits	\$286	4.71%
Contributions	\$230	3.79%
Combined Net Income	\$191	3.14%
Unemployment Compensation	\$101	1.66%
Student Status	\$74	1.22%
Arithmetic Computation	\$63	1.04%





Error Findings as Reported to Field Offices

November 2021 QC Reviews

Review Number	Error Cause	Reason for the Error	Over/Under	Error Amount	Cause	Error Description
10134	Household Composition	Eligible person(s) with income excluded	Over	\$194	Client	Due to RM income exceeding gross income standard, income for the prior 3 months was reviewed to determine if a reportable change occurred. QC verified via LL, employer statement and check stubs provided, HH members were married in August 2021 & were living together since June 2021, presenting themselves as a married couple as of June 2021. HH provided check stubs showing 1 <sup>st</sup> month prior wages 10/2021 \$2861.15 & \$3969.24 to total \$6830.39 EI, 2 <sup>nd</sup> month prior wages 9/2021 \$2698.65 & \$3969.24 to total \$6667.89 EI, 3 <sup>rd</sup> month prior wages 8/2021 \$2598.98 & \$3969.24 to total \$6568.22. HH exceeded the income standard in each of the 3 months prior to RM; a reportable change occurred & must be considered in the error determination. QC determined 3 <sup>rd</sup> month prior to RM (8/2021) is what should have been reported. QC allowed converted income of \$6568 from employer 8/11 \$1239.29 8/25 \$1359.77 to determine \$2599 EI 8/11 \$1984.62 + 8/25 \$1984.62 to determine \$3969 EI. Total EI of \$6568 exceeds gross FY21 gross standard of \$2987 for HHBG of three.
10191	Wages and Salaries	More income received from this source than budgeted	Over	\$293	Agency	RM: \$434 EI with \$2000, \$3275 prorated EI to determine \$5709 combined gross income. Comp II: QC determined client contacted agency on 10/14/21 & requested her case be processed with check stubs provided. Determined known & verified income, therefore agency was correct to make changes. QC verified employment never ended as agency entered end date of 10/13/21. QC corrected agency figures to use the following income: 9/24/21 \$266 & 10/08/21 \$196 to total \$462; 9/17/21 \$1015.20 & 10/01/21 \$1170.15 to total \$2185. Total income \$2647. 9/16/21 \$853.12; 9/23/21 \$678.28; 9/30/21 \$405.84 & 10/07/21 \$634.38 to total \$1929 prorated EI. Combined gross income of \$4576. QC determined HH was not entitled to participate in SNAP due to income exceeding gross income standard.
10123	RSDI Benefits	Variance resulting from use of automatic Federal information exchange system	Over	\$286	Client and Agency	QC determined agency incorrectly processed medical deduction and shelter due to unverified expenses. Further, HH failed to report absent parent monthly contribution and ASPEN system failed to update mass change for RSDI. QC corrected agency figures allowing 4 HHM \$537 RSDI, \$110 SSI, \$246 other In-State cash assistance, \$500 contribution, \$0 shelter with no HCSUA/LUA/TS allowed and \$0 medical deduction.
10180	Household Composition	Newborn infant improperly excluded	Under	\$282	Agency	RM: 4 HHM \$390 EI, \$903 EI and \$198 SE deduction allowed. Comp II: 4 HHM \$410 EI, \$0 EI and \$180 SE with TS deduction allowed. QC found HH provided PR 9/15/2021 reporting changes to HHBG and income, agency did not review/processed change and documented unable to verify income unable to process. On 9/30/21 certification extended 9/30/21 - 3/31/22 due to covid 19 waiver with no changes made. No evidence to find HUMAD was sent to client for reported information. QC corrected agency figures

						to PR provided 9/2021 showing HH reporting new member allowing QC used RM circumstances as final determination due to least quantitative error between both comparisons.
10164	Wages and Salaries	Unreported source of income (do not use for change in employment status)	Over	\$161	Client	RM \$8528 combined gross income. Verified employment from 11/30/20 - 2/23/21. Employer verified employment from 1/12/21. Comp II: HH failed to report QC reviewed 3-month look back to determine if a reportable change occurred while on simplified reporting. HH was over gross income limit in all months: 10/21 with \$8876.85 EI, 9/21 with \$ 7227.05 EI & 8/21 with \$ 6105.53 per verified income from submitted paystubs. QC allowed \$6106 converted EI in final determination, as EI received was a reportable change and exceeded the FPG of \$1771. For both comparisons HH is subject to the minimum allotment as a HHBG of 1 that qualified under BBCE, even though household income exceeded the BBCE gross income limits in the sample month and the 3 lookback months.
10115	Wages and Salaries	Unreported source of income (do not use for change in employment status)	Over	\$311	Client	QC reviewed corrected figures to determine client was employed at initial 8/2020 action and was reportable. HH failed to report client had returned to work prior to initial application date of 8/7/2020. Per employer statement provided to QC, client returned to work on 8/3/2020. QC finds \$840 in anticipated income. QC contacted employer to determine anticipated income of \$1553 ongoing income based on employment verification of anticipated wages at 27 hours weekly at \$14.38 hourly. \$2393 combined gross income for corrected figures. QC determined \$2393 total gross income, \$805 shelter plus HCSUA.
10118	Wages and Salaries	Unreported source of income (do not use for change in employment status)	Over	\$400	Client	During QC interview, HH reported employment paid semi-monthly; QC verified with employer, client has been employed since 6/17/15, other household member has been employed since 1/16/20, both work between 15 to 25 hrs. per week, it is not indicative to work any overtime and does not receive tips. Employer verified client has been employed since 5/17/21, works between 30 to 40 hrs. per week; the Work No should be utilized to obtain income verification. RM: \$1389 EI (\$884 EI & \$505 from other bar) & \$514 EI for other household member. Comp II: \$1709 EI (\$1109 EI & \$600 from other employer) & \$472 EI for other household member. QC determined client was employed & provided check stub for 6/4/21, which is more than 30 days prior to the 7/8/21 application with no explanation from agency why paystubs used that was outside of the 30-day time frame. Further, QC determined HH failure to report client's employment with one of the jobs and other household members employment.
10166	Other Earned Income	Unreported source of income (do not use for change in employment status)	Over	\$835	Client	Employer verified client is an at will contractor working 2 to 10 hrs./day at a rate of \$13.50/hr.; hired 12/22/20. RM \$4536 EI which is over the gross income limit of \$3644 for HHBG of 4. Comp II: QC reviewed agency figures and determined HH failed to report income which began 12/22/20. QC reviewed 3-month look back to determine if a reportable change occurred while on simplified reporting. HH was over gross income limit in all months: 10/21 with \$4536 EI, 9/21 with \$4536 EI and 8/21 with \$4536 EI per EVF. QC allowed \$4536 converted EI in final determination, based on earnings received a reportable change occurred. Final determination HH is ineligible; \$4536 combined gross income exceeds FPG of \$3644 for HHBG of 4.

10113	Wages and Salaries	Unreported source of income (do not use for change in employment status)	Over	\$195	Client and Agency	During QC interview HH stated she was not employed. QC found HH active hire date 10-15-21, termination date 10-28-21. Employer verified that they use The Work No for employment verifications. SOLQ and HTPQ inquiries verified \$858 monthly RSDI since 1/1/21. RM: verified terminated income of \$660.15, \$858 RSDI, \$500 shelter plus HCSUA with client eligible for minimum allotment. Comp II: \$1755 EI, \$858 RSDI, \$500 shelter plus HCSUA with client eligible for minimum allotment. HH failed to report income for 6/19/21 application submitted, as client was employed. Contact with employer verified client initially hired to work between 60-70 hrs. per pay period at \$13.50 hourly. Further, ASPEN programming failed to update RSDI to the new FY21 amount of \$858 effective 1/1/21.
10149	Wages and Salaries	Unreported source of income (do not use for change in employment status)	Over	\$230	Client	RM: \$3366 EI, \$597 shelter plus HCSUA. QC verified total gross of \$3366 exceeds gross income standard of \$1771 for HHBG of one to determine HH eligible for minimum allotment amount. Due to RM income exceeding gross income standard, income for the prior 3 months was reviewed to determine if a reportable change occurred. QC verified client was employed since 2016. 1st month prior wages 10/2021 \$2723.34, 2nd month prior wages 09/2021 \$2511.26, 3rd month prior wages 08/2021 \$2458.13. HH exceeded the income standard in each of the 3 months prior to RM; therefore, a reportable change occurred and must be considered in the error determination. QC determined 3rd month prior to RM (8/2021) is what should have been reported. QC allowed EI of \$2458 from employer based on wages received 8/12/2021 \$1220.48 & 8/26/2021 \$1237.65 to total EI \$2458 exceeds FY 21 gross income standard of \$1755 for HHBG of one. State QC determined the HH qualified under BBCE at time of certification and is eligible for minimum allotment as 1 person HH.
10193	Contributions	Unreported source of income (do not use for change in employment status)	Over	\$230	Client	RM:1 HHM, UEI-SSI \$794, UEI- Contribution \$525, \$534.64 shelter plus HCSUA.Comp II: 1 HHM UEI-SSI \$794, UEI- Contribution \$525, \$553.64 shelter plus HCSUA. QC reviewed agency figures to determine no evidence found HH reported the monthly contribution. QC verified contribution given to HH monthly of \$525 since before 9/2020 & QC verified mortgage loan payments at last action Home Loan Serv \$540 plus MFA \$13.64 = \$553.64.

# FFY 2022 SNAP Payment Error Rates

## Regional and County Breakdowns

Percentages are on based total amount of benefits in error divided by the total of benefits issued.

Source of Report: Based on data transmitted to FNS

		OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	TOTAL AVG.
Region 1 Northwest Region	Cibola	0.00%	0.00%											0.00%
	McKinley	64.04%	10.61%											32.29%
	San Juan	32.08%	0.00%											14.49%
	Sierra	0.00%	0.00%											0.00%
	Socorro	9.63%	0.00%											6.42%
	N. Valencia	0.00%	17.87%											14.96%
	S. Valencia	0.00%	0.00%											0.00%
<b>Region 1 Totals</b>		<b>28.77%</b>	<b>6.35%</b>											<b>16.49%</b>
Region 2 Northeast Region	Colfax	0.00%	0.00%											0.00%
	Guadalupe	0.00%	0.00%											0.00%
	Quay	0.00%	0.00%											0.00%
	Rio Arriba	0.00%	0.00%											0.00%
	San Miguel	15.47%	16.12%											15.84%
	Sandoval	0.00%	56.40%											18.12%
	Santa Fe	0.00%	36.80%											23.12%
Taos	20.20%	56.57%											49.80%	
<b>Region 2 Totals</b>		<b>4.89%</b>	<b>37.61%</b>											<b>22.57%</b>
Region 3 Central Region	NE Bernalillo	0.00%	0.00%											0.00%
	NW Bernalillo	3.19%	0.00%											2.81%
	SE Bernalillo	0.00%	18.15%											10.73%
	SW Bernalillo	6.26%	8.61%											7.39%
	Torrance	0.00%	0.00%											0.00%
<b>Region 3 Totals</b>		<b>3.53%</b>	<b>6.70%</b>											<b>5.01%</b>
Region 4 Southeast Region	Chaves	0.00%	0.00%											0.00%
	Curry	0.00%	0.00%											0.00%
	Artesia	0.00%	90.70%											90.70%
	Carlsbad	0.00%	0.00%											0.00%
	Lea	0.00%	19.60%											19.60%
	Lincoln	0.00%	0.00%											0.00%
Roosevelt	0.00%	0.00%											0.00%	
<b>Region 4 Totals</b>		<b>0.00%</b>	<b>14.99%</b>											<b>7.78%</b>
Region 5 Southwest Region	E. Dona Ana	0.00%	0.00%											0.00%
	Grant	0.00%	0.00%											0.00%
	Luna	20.47%	0.00%											17.98%
	Otero	0.00%	0.00%											0.00%
	S. Dona Ana	6.40%	0.00%											5.22%
	W. Dona Ana	0.00%	0.00%											0.00%
<b>Region 5 Totals</b>		<b>4.23%</b>	<b>0.00%</b>											<b>3.09%</b>
<b>State Totals</b>		<b>9.67%</b>	<b>13.56%</b>											<b>11.53%</b>

## SNAP Payment Error Rates Mitigation Strategies

*Identified reasons for cases found in error during the month of November:*

- Reported Information disregarded or not applied
- Client failed to report required information
- Agency failed to follow up on inconsistent or incomplete information

Description of activity developed to resolve deficiencies:

The High Efficiency and Accuracy Team (HEAT) consists of a County Director and Line Manager from each ISD Region and the Field Support Bureau, representatives from the ASPEN Help Desk, Policy & Program Development Bureau, Quality Assessment Bureau, and the Training Support Bureau. Monthly meetings are held with regional representatives to evaluate and discuss the monthly Quality Control Payment and CAPER errors. Staff identify the reason for the error and steps to prevent recurring errors and submit inquiries for policy and procedure clarifications.

Presentations are developed targeting areas identified and are discussed at monthly staff meetings at the local field offices.

# FFY2022 Case and Procedural Error Rate (CAPER)

## State Cumulative Negative Error Rate

### Invalid Closure Breakdown

Out of the 33 invalid denials/closures identified, 15 were identified as incorrect closures, and 18 were identified as incorrect denials.

### Negative Error Amount

33 cases out of 144 were found to have been denied or closed incorrectly. These cases were found to have errors with denial/closure reasons, timeliness, and/or notices.

**22.92%**  
CAPER  
Error Rate

### Incorrect Notices

27% of the incorrect negative actions reported were due to unclear or incorrect notices issued.

### Incorrect Denials

73% of the incorrect negative actions reported were due to incorrect denial/closure reasons and/or untimely denials/closures.

### Cumulative Totals - October 2021- November 2021

Total Cases in Sample Pulled for Review	150
Cases Dropped (Sampled not Reviewed by QC)	6
Total Cases Reviewed	144
Total Valid Cases	111
Total Invalid Cases	33

# FFY 2022 Top Error Trends in CAPER Reviews

Cumulative Totals from CAPER Reviews: October 2021- November 2021

Reason for the Error	When the Errors Occurred		Total Errors	Percent of Cases with Error
	Denials	Terminations		
<b>Wages and Salaries</b>				
Agency failed to follow up on inconsistent or incomplete information	3	3	6	18.75%
Improper income calculation	1	1	2	6.25%
Income from known/processed source included that should not have been	1	0	1	3.13%
Failed to consider or incorrectly considered reported information	1	0	1	3.13%
<b>Total</b>	<b>6</b>	<b>4</b>	<b>10</b>	<b>31.25%</b>
<b>Notices</b>				
Notice not clearly understandable	1	3	4	12.50%
Notice was not complete	1	1	2	6.25%
Notice was sent to wrong address	1	0	1	3.13%
Policy incorrectly applied	1	0	1	3.13%
Notice reason does not match reason for action	1	0	1	3.13%
<b>Total</b>	<b>5</b>	<b>4</b>	<b>9</b>	<b>28.13%</b>
<b>Verification</b>				
Improper Denial/Termination – failure to provide-verification was received or is in case file	0	1	1	3.13%
Policy incorrectly applied	0	1	1	3.13%
Verification was in case file	1	0	1	3.13%
<b>Total</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>9.38%</b>
<b>Application</b>				
Late denial agency failed to process the application timely	2	1	3	9.38%
<b>Total</b>	<b>2</b>	<b>1</b>	<b>3</b>	<b>9.38%</b>
<b>Student Status</b>				
Failed to consider or incorrectly considered Eligible Student Status	0	1	1	3.13%
Eligible student excluded and met exemption – Employment requirements met	1	0	1	3.13%
<b>Total</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>6.25%</b>
<b>Action Type</b>				
Policy incorrectly applied	0	1	1	3.13%
<b>Total</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>3.13%</b>
<b>Combined Gross Income</b>				
Policy incorrectly applied	0	1	1	3.13%
<b>Total</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>3.13%</b>
<b>Medical Deductions</b>				
Failed to consider or incorrectly considered Medical deductions	1	0	1	3.13%
<b>Total</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>3.13%</b>
<b>Other Unearned Income</b>				
Policy incorrectly applied	1	0	1	3.13%
<b>Total</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>3.13%</b>

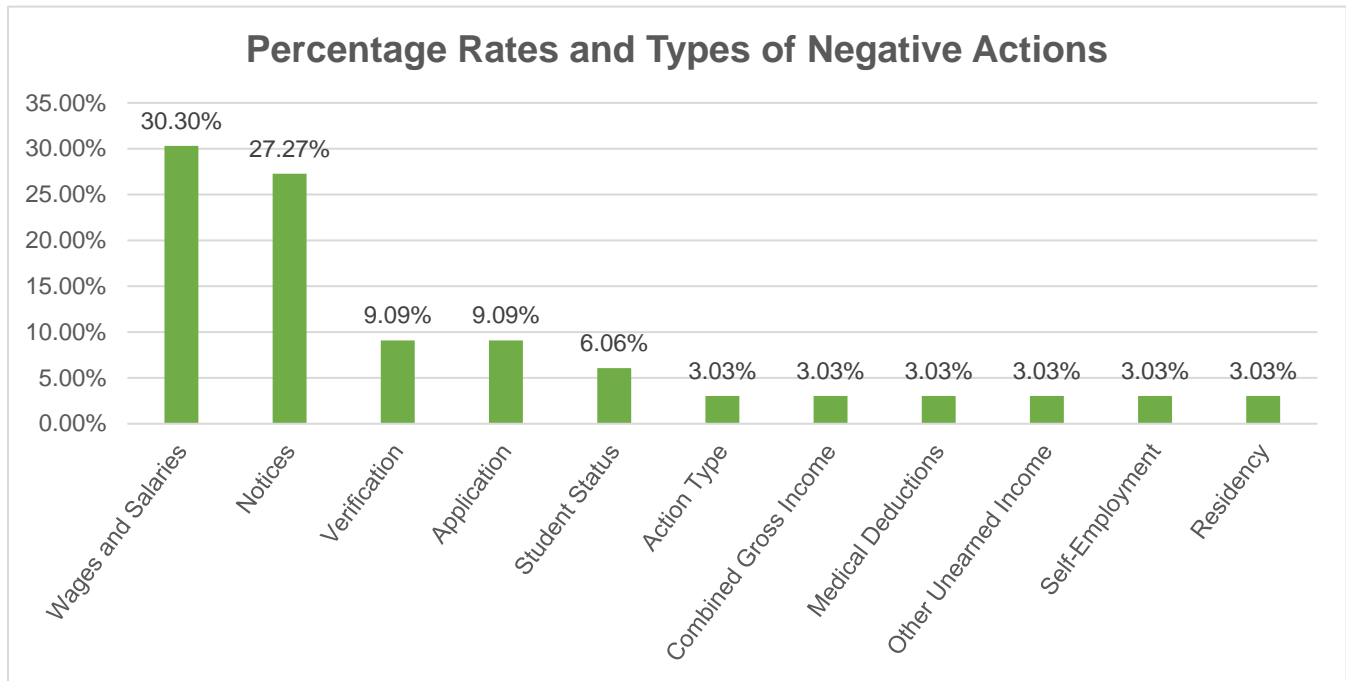
Self-Employment				
Agency failed to follow up on inconsistent or incomplete information	0	1	1	3.13%
Total	0	1	1	3.13%



## FFY 2022 CAPER Errors – Cumulative Totals

Percentage Rates and Types of Negative Actions: October 2021- November 2021

Error	Denials		Closures		Total Invalid	Percentage Total
Wages and Salaries	6	18.18%	4	12.12%	10	30.30%
Notices	5	15.15%	4	12.12%	9	27.27%
Verification	1	3.03%	2	6.06%	3	9.09%
Application	2	6.06%	1	3.03%	3	9.09%
Student Status	1	3.03%	1	3.03%	2	6.06%
Action Type	0	0.00%	1	3.03%	1	3.03%
Combined Gross Income	0	0.00%	1	3.03%	1	3.03%
Medical Deductions	1	3.03%	0	0.00%	1	3.03%
Other Unearned Income	1	3.03%	0	0.00%	1	3.03%
Self-Employment	0	0.00%	1	3.03%	1	3.03%
Residency	1	3.03%	0	0.00%	1	3.03%



# CAPER Error Findings as Reported to the Field Offices

November 2021 QC Reviews

Review Number	Error Reason	Detailed Error Description
76	Policy & Notice	QC determined case denial/closure is invalid due to EI being calculated incorrectly, income was based off check stubs 11/5 \$934.78 & 9/24 \$885.36 and other income was based off of check stubs 11/12 \$1314.38 & 11/26 \$1306.88 which allowed OT on both paystubs with no verification if OT is indicative of regular pay. Client was also issued a noncompliance notice for 3rd level sanction on 11/10/21 to implement 3rd level sanction amount of \$539. Policy 8.102.620.10C(1) indicates that payment reduction shall take place with the first payment following expiration of notice of adverse action which would have been the month of 12/21 as client had until 11/23/21 to come into compliance. Incorrect for \$539 TANF sanction amount to have been counting toward the SNAP program in the month of 11/21.
80	Policy & Notice	QC determined case action is invalid, as 1st HUMAD was sent requesting verification of income for 12/25/20. 2nd HUMAD was sent on 10/25/21 requesting verification of termination of Unemployment Compensation Benefits as agency notated per DWS shows active UCB. QC determined requested information sent to HH outdated and not clear. No indication found HH provided information; however, wages requested from employer were outdated information requested for application date of 10/19/21. Therefore, notices sent were not clear, concise and accurate on all reasons for closure action.
82	Policy & Notice	Review of case shows that agency had already verified that client was working 20+ hours a week and still requested verification of student status, even though HH was considered an eligible college student by meeting an exemption per 8.139.400.11 A (3-d), therefore the request of student status-enrollment was not necessary to determine college student eligibility. Per PC 19-84, agency should have sent a HUMAD for proof of financial aid received. Action to close case due to client not providing verification of student enrollment status is incorrect as it was not necessary for case processing.
92	Notice	QC determined action taken by agency and listed reason for closure was correct. ECF inquiry shows no evidence provided information to agency by due date of 11/1/21. However, QC found all information listed on notice was not accurate. QC determined the effective month of closure listed on notice of January 2022 is incorrect. Review of ASPEN shows closure action on 11/18/21 was effective for the month of December 2021.
93	Notice	Review of application shows physical address reported but client left mailing address left blank as application notes under mailing address: "if your mailing address is different, please fill below, if not, please leave blank. ASPEN filing representative information AR mailing address not verified. QC determined no evidence found application submitted on 10/18/21 to show mailing address for HH nor for AR. MAD application for (PFOC) submitted on 10/18/21 also verifies mailing address. Further, PO Box address agency indicated was from 2016 information. QC determined agency used incorrect address for appointment notice, missed appointment and NOMI to determine this action as invalid.
95	Policy & Notice	CR shows HUMAD was issued 10/22/21 with due date of 11/04/21 requesting proof of income 10/22/21 and 10/15/21 and 10/1/21. CR shows agency mailed a second HUMAD 11/04/21 due date of 11/20/21 as verification had not been received. CR shows another HUMAD was issued on 11/05/21 for requested wages 8/13/21 and 8/27/21 with due date of 11/19/21; this HUMAD generated another HUMAD on 11/19/21 with due date of 11/20/21. QC cannot determine why HUMADs for 11/05/21 and 11/19/21 were issued out for SNAP. Based on case review QC determined wages requested should have been based on 30 consecutive days wages received prior to application date of 10/21/21; August 2021 wages were outside of the 30 days and were verified with client per Work number inquiry. With numerous HUMAD's issued NOCA sent to client not clear or understandable.
103	Policy & Notice	QC review of income finds agency used WN to verify employment ended 10/1/21 and final pay issued on 9/30/21 \$3000 for 160 hours. WN inquiries found in ECF to show 10/22/21 and 11/8/21 to show proof of termination effective 10/1/21 with last payment of \$9/30/21 for \$3000. QC determined HH received last pay issued on 9/30/21 \$3000 with no evidence of wages issued for month October 2021. QC determined denial action invalid as no indication found wages received for 10/21 and ongoing. Denial action with NOCA invalid.
105	Policy & Notice	QC review of income as follows: Client received pay and provided 10/6/21 \$847.37 for 66.46 @ \$12.75/hr., check 9/22/21 \$326.15 for 25.58 hours @ \$12.75/hr. and check 9/30/21 \$306.25 for 24.5 hrs. @ \$12.50/hr. Client provided pay 10/8/21 \$1299.19 for \$79.95 hours @ \$16.25/hr. plus .03 hrs. of OT for \$.73 and pay 10/22/21 \$1532.44 for 77.23 hours @ \$16.25/hr. plus \$277.45 store bonus; OT and store bonus excluded. \$2554.18 EI correct. No evidence found 10/20/21 wage provided. Agency entered income on ASPEN 10/20/21 of \$847.47 from check 10/6/21 \$847.47 as wages stubs/earnings. HUMADs in CR shows requested check stubs and no evidence found agency requesting wages. QC determined agency used wages not verified. No evidence found 10/20/21 wages were requested or verified. Agency used unverified income at denial action to determine this review is invalid.

106	Notice	QC determined agency was correct to deny the HOH on failing residency requirements, however denial notice sent to HH had conflicted information and did not reflect the correct denial reasoning for the remaining HHM resulting in an invalid notice. QC finds due to inaccurate coding of the 6 members, the notice provides conflicting information as to their reason for denial and does not correspond with case record documentation that they were not eligible due to residing outside the state of NM. QC finds HH members were denied on the reasoning stating their HOH moved out of state and to reapply if they wanted to continue to receive benefits. QC finds HHMs should have been denied on failing residency requirements as HOH attested his household resided out of state.
108	Policy & Notice	QC found the denial reason was accurate, however it was determined agencies action to process application submitted 10/13/21 was untimely. The 30th day was 11/12/21 however action was not taken until 11/30/21. QC determined although agency issued a delay notice on 11/12/21, the notice did not contain required information informing for the HH reasons application placed in pending status and what action was required to complete the application process. QC reviewed history of correspondence and ECF. QC finds that written statement provided on 10/22/21 that was uploaded as a "Proof of Medical Expense" was not a medical expense. The statement indicated client was given \$250 for a cord of wood was not verified or addressed by the agency for contributions HH reported at interview. Agency caused delay invalid negative.
132	Policy	ASPEN Medical expense details shows Medicare part B premium incurred date 1/1/2017 \$126- paid by a third party and ASPEN shows medical expense details Medicare part B premium incurred date 11/1/2016 \$134- not paid by a third party. \$134-35=\$99 allowable medical deduction. QC viewed ASPEN Medicaid MSP eligibility summary shows MSP MC-QI-1 denied 11/18/2021 for both household members. QC pulled SOLQ query showing both individuals Medicare part B premium \$148.50 each with no state buy in. QC found no third party is paying for the Medicare part b premium. QC determined Medicare part B premium 148.50-35=\$113.5 and Medicare part B premium 148.50-35=\$113.5. \$113.5*2=\$227 allowable medical deductions. QC determined action and notice incorrect.
145	Policy & Notice	Per NMAC policy 8.139.120.8 (G) (5) Pending verification: A household member that has reapplied timely, attended an interview, and is required to provide verification, will be given 10 days to provide the verification, or until the certification period expires, whichever is longer. QC determined the agency extended the HH certification period to 2/28/22. Per policy 8.139.120.9 (H) (2) ISD shall not act on changes that would result in a decrease in the household's benefits unless ISD has information about the household's circumstances considered verified upon receipt. The HH reported the Disability Benefits (Other than Social Security) \$150 monthly, however verification was not submitted, and the certification period was extended to 2/28/22. \$150 other Disability Benefits would not take the HH over the gross FPL and CR shows HH exempt from gross test due to elderly status. QC determined action incorrect.
146	Policy	ECF contained School document showing financial aid term for 2021-2022 award package 2021-2022 \$0 estimated family contribution. Per ISD IPP 21-02 COVID Relief Act – Expanding Student SNAP Eligibility: In addition to SNAP Student Eligibility outlined in 8.139.400.11 NMAC, the expansion of SNAP student eligibility will also include students enrolled at least half-time in an institution of higher education who meet one of the following criteria: Students who have an expected family contribution (EFC) of \$0 in the current academic year. This is identified in the Financial Aid package that the student receives. QC determined HH is an eligible student per ISD IPP 21-02 the financial aid term for 2021-2022 award package 2021-2022 does show \$0 estimated family contribution. QC determined action and notice incorrect.

# FFY 2022 CAPER Error Rates

## Regional and County Breakdowns

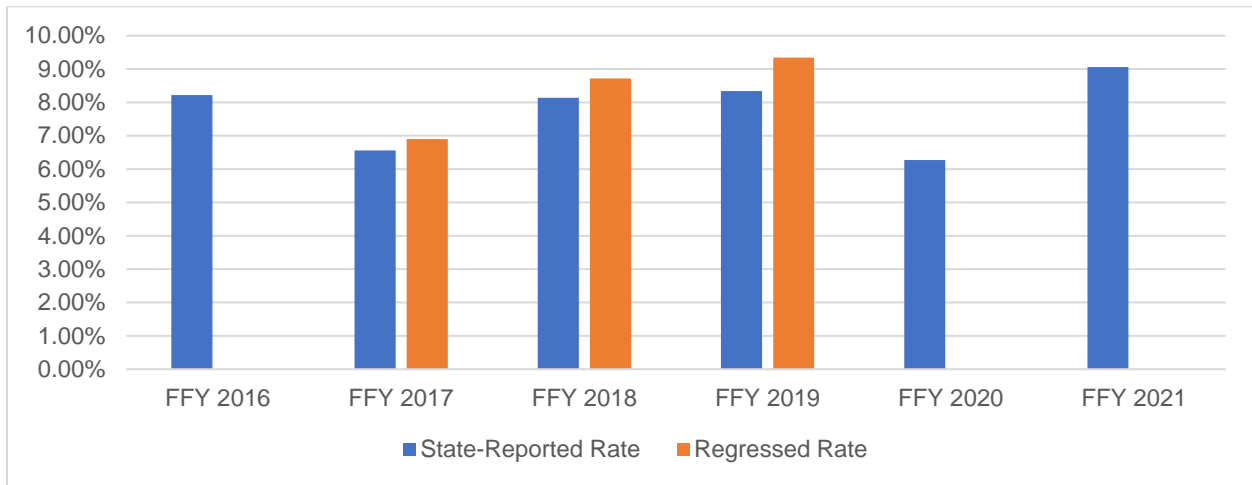
		OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	TOTAL AVG.
Region 1 Northwest Region	Cibola	50.00%	0.00%											0.00%
	McKinley	0.00%	0.00%											33.33%
	San Juan	50.00%	0.00%											20.00%
	Sierra	0.00%	0.00%											0.00%
	Socorro	0.00%	0.00%											0.00%
	N. Valencia	0.00%	50.00%											50.00%
	S. Valencia	0.00%	0.00%											0.00%
	<b>Region 1 Totals</b>	<b>40.00%</b>	<b>16.67%</b>											
Region 2 Northeast Region	Colfax	0.00%	0.00%											0.00%
	Guadalupe	0.00%	0.00%											0.00%
	Quay	0.00%	0.00%											0.00%
	Rio Arriba	0.00%	50.00%											50.00%
	San Miguel	100.0%	100.0%											100.0%
	Sandoval	16.67%	0.00%											12.50%
	Santa Fe	100.0%	0.00%											25.00%
	Taos	0.00%	33.33%											25.00%
<b>Region 2 Totals</b>	<b>30.00%</b>	<b>33.33%</b>												<b>32.00%</b>
Region 3 Central Region	NE Bernalillo	0.00%	12.50%											6.25%
	NW Bernalillo	14.29%	16.67%											15.38%
	SE Bernalillo	0.00%	0.00%											0.00%
	SW Bernalillo	25.00%	15.38%											20.00%
	Torrance	0.00%	0.00%											0.00%
	<b>Region 3 Totals</b>	<b>13.79%</b>	<b>14.81%</b>											
Region 4 Southeast Region	Chaves	0.00%	0.00%											0.00%
	Curry	75.00%	0.00%											60.00%
	Artesia	0.00%	0.00%											0.00%
	Carlsbad	100.0%	0.00%											100.0%
	Lea	50.00%	0.00%											20.00%
	Lincoln	0.00%	0.00%											0.00%
	Roosevelt	0.00%	0.00%											0.00%
<b>Region 4 Totals</b>	<b>50.00%</b>	<b>0.00%</b>												<b>26.32%</b>
Region 5 Southwest Region	E. Dona Ana	20.00%	0.00%											14.29%
	Grant	100.0%	0.00%											100.0%
	Luna	33.33%	50.00%											40.00%
	Otero	100.0%	0.00%											100.0%
	S. Dona Ana	0.00%	33.33%											16.67%
	W. Dona Ana	0.00%	0.00%											0.00%
<b>Region 5 Totals</b>	<b>28.57%</b>	<b>25.00%</b>												<b>27.27%</b>
<b>State Totals</b>	<b>27.40%</b>	<b>18.31%</b>												<b>22.92%</b>

# FFY 2022 Regression Rates

Regression rates are calculated by FNS and depend on such variables as FNS reviews of QC-reviewed cases and the State’s caseload size. The following charts give the State-reported error rates and the regression rates for Payment Accuracy and CAPER. **Please note that regression rates were not issued for FFY 2016 and FFY 2020. A CAPER regression rate for FFY 2019 and FFY 2020 was not issued. FFY 2021 has not been issued at the time of this report.**

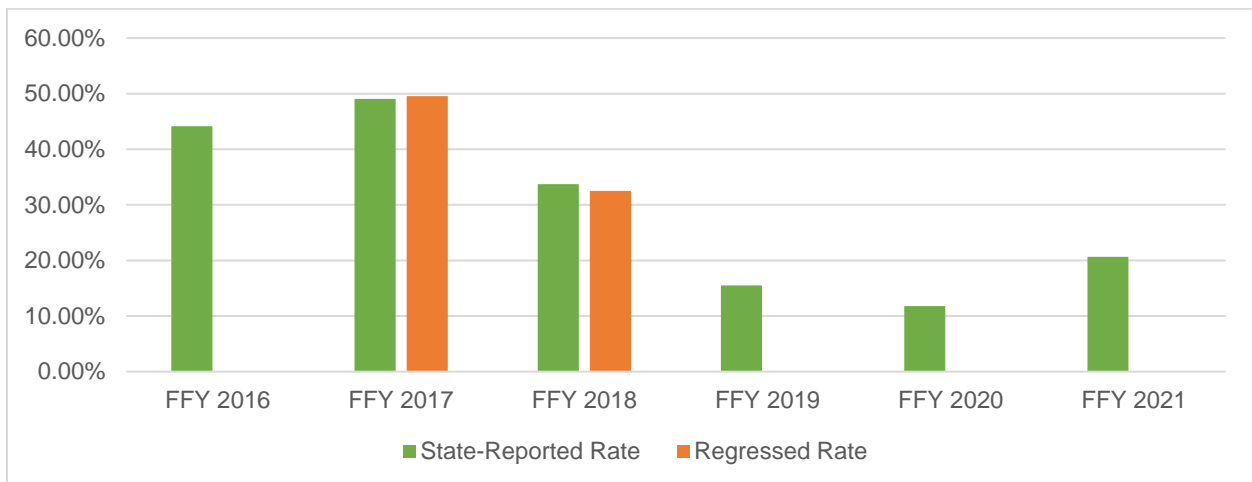
## Payment Error Rate

*Current Fiscal Year and Previous Fiscal Years*



## CAPER Error Rate

*Current Fiscal Year and Previous Fiscal Years*



# FFY 2022 SNAP Timeliness

Included in the SNAP Performance Report is the following QC Recertification Timeliness. SNAP Application Timeliness for FFY 2022 and previous fiscal years is tracked through the Monthly Statistical Reports (MSRs) found at: <http://www.hsd.state.nm.us/monthly-statistical-reports.aspx>

The MSR lists the following timeliness areas:

- Application Processing Timeliness
- Expedite Application Processing Timeliness
- Non-Expedite Application Processing Timeliness

## QC Recertification Timeliness

		OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP
Region 1 Northwest	Cibola	100.0%											
	McKinley	100.0%											
	San Juan	100.0%											
	Sierra												
	Socorro	100.0%											
	N. Valencia	100.0%											
	S. Valencia	100.0%											
<b>Region 1 Totals</b>		100.0%											
Region 2 Northeast	Colfax												
	Guadalupe												
	Quay												
	Rio Arriba	100.0%											
	San Miguel	100.0%											
	Sandoval	100.0%											
	Santa Fe	100.0%											
Taos	100.0%												
<b>Region 2 Totals</b>		100.0%											
Region 3 Central	NE Bernalillo	100.0%											
	NW Bernalillo	100.0%											
	SE Bernalillo	100.0%											
	SW Bernalillo	100.0%	100.0%										
	Torrance												
<b>Region 3 Totals</b>		100.0%	100.0%										
N Region 4 Southeast	Chaves	100.0%	100.0%										
	Curry	100.0%											
	Artesia												
	Carlsbad	100.0%											
	Lea												
	Lincoln	100.0%											
	Roosevelt												
<b>Region 4 Totals</b>		100.0%	100.0%										
Region 5 Southwest	E. Dona Ana	100.0%											
	Grant	100.0%											
	Luna	100.0%											
	Otero	100.0%	100.0%										
	S. Dona Ana	100.0%											
	W. Dona Ana	100.0%											
<b>Region 5 Totals</b>		100.0%	100.0%										
<b>Statewide Totals</b>		100.0%	100.0%										