

Welcome to Tuesday Talks! Today we are going to cover some important aspects of the Household Size Income Statement that have been identified by DPI as areas that need more training. We will not be covering all requirements of the HSIS. At the end of the presentation there are slides where you can find additional information and resources that your program can access later.

Since this webinar focuses on HSIS, it is only applicable to group child care centers, outside of school hours care sites and adult care centers that participate on the CACFP. Adult care centers have a slightly different income statement than the child care component, which we will point out on the pertinent slides, but the main concepts we cover today are the same for all programs.

Throughout this presentation, you will see website links on some slides. You can access links on the pdf version of the presentation posted on the Tuesday Talks webpage and also included in the Q&As on the right.

Webinar Takeaways



1. Use current HSIS
2. HSIS must be on file for Free/Reduced participants
3. HSIS must be complete and valid

2

Ok, so let's get started.

Today, we want you to walk away with knowing these important points about the Household Size Income Statement (or HSIS – which you will see on the slides).

1. Agencies must use the most current version of the HSIS
2. You may only claim a participant as free or reduced when you have an HSIS on file
3. HSIS must be complete and valid for any participant claimed as free or reduced

Now, let's go through these points in more detail.

Current Forms

- Distribute current version
- Updated each year in July

www.dpi.nc.gov **Guidance Memorandum #1**

CHILD AND ADULT CARE FOOD PROGRAM (CACFP) For Group Child Care Outside of School Hours Centers
 HOUSEHOLD LETTER (Non-Working Program) **July 2023, Rev. 6/20**

Dear Parent or Guardian: ... **July 2023, Rev. 6/20**

FOUR CENTER USE ONLY Complete all 3 sections and the **FOUR CENTER USE ONLY** section of this form.

Section 1: Determining Eligibility (A or B)

Section 2: Eligibility Determination

Section 3: Determining Eligibility (A or B)

Section 4: Household Member Signature and Last Four Digits of Social Security Number (SSN)

Section 5: Effective Month of Determination

Section 6: Signature

Let's start with the requirement to use the most current forms when you distribute the HSIS and Household Letter to families. These forms are updated every year – usually in July – to reflect updated income eligibility guidelines and any other revisions DPI makes to the forms.

A revision date is listed at the top of each form (shown in the red boxes on the slide) so you will always know if you are using the most current version. When the revised forms are available, DPI includes the links in the CACFP Bulletin (which is emailed to all agencies), and also posts them on the DPI Guidance Memorandum website, under GM #1. It is your responsibility to use the most current form. Remember to discard any blank older versions of the forms you have on hand so they are not accidentally used in the future.

HSIS on File for F/R Participants

Only claim as
Free / Reduced
when
HSIS on file

No HSIS → **Non-Needy**

4

The next important takeaway is that you may only claim a participant as free or reduced if there is an HSIS on file for them. Even if you think the family may qualify as free or reduced based on information you may know about the family, if there is no HSIS on file, you cannot count the participant as free or reduced.

If there is no HSIS is on file, you must count the participant as **Non-Needy**. Only after an HSIS is obtained, can you count a participant as free or reduced (if they qualify) which we'll talk about next.

Complete and Valid HSIS

Households must complete HSIS

Record missing information

- Who provided info
- Date
- Your initials

**NON-NEEDY
until complete**

1) List full names of all household members below	Age	Check if Foster Child	Gross income from work	Weekly	Every 2 Weeks	Twice per Month	Monthly	Annually
Sally Smith		<input type="checkbox"/>	\$600	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jim Smith		<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Joan Smith		<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Per Sally 10/23/XX MAP

The next takeaway is that you must have a complete and valid HSIS on file for participants claimed as free or reduced.

It is important to keep in mind that the adult household member must complete Parts 1, 2, and 3 of the HSIS. Agency staff cannot complete this for the household.

However, we know that many times HSIS are turned in and are missing information. When that happens, you must obtain the missing information if you want to count the participant as free or reduced. With the exception of the adult member signature and date, it is acceptable to obtain information over the phone. You must record the missing information on the HSIS and include who provided the information, the date the information was received and your initials.

Again, in these situations with missing or incomplete information, an income statement must be determined as **non-needy** until the information is obtained and documented on the HSIS.

Part 1: Benefits

PART 1: BENEFITS
If no one receives these benefits, skip to PART 2.

If any member of your household currently receives benefits from:	Check the box for the benefit received AND provide the case number:	
FoodShare Wisconsin (10 digit #) <input type="checkbox"/>	-----	<ul style="list-style-type: none">• DO NOT list a 16 digit Quest Card number (starts with 5077) for FoodShare• Wisconsin Child Care Subsidy <u>is NOT</u> Wisconsin Works Cash Assistance. It does not qualify a participant as free for CACFP.
Wisconsin Works Cash Assistance (10 digit #) <input type="checkbox"/>	-----	
FDPIR (9 digit #) <input type="checkbox"/>	-----	

Missing or invalid case number → **Non-Needy**

6

So, let's go through each section of the HSIS to discuss what is a complete HSIS and cover some important areas that seem to provide some confusion.

Part 1: Benefits. If a household checks the box for one of the assistance programs and includes their case number, the participant is automatically free. For child care, these programs are: FoodShare Wisconsin, Wisconsin Works or W2 Cash Assistance and FDPIR, which is the Food Distribution Program on Indian Reservations. For the Adult Care Component, the programs are different, but we won't discuss those today. Those are listed on the ADC income statement.

But we want you to remember two things:

1. Wisconsin **Child Care** Subsidy is **not W2 Cash Assistance**. (This is also stated on the HSIS in the red box to the right of the case numbers as a reminder to you and the households).
 - That means that staff cannot assume that a household that receives W2 child care assistance also receives FoodShare or W2 Cash Assistance and cannot write their child care assistance number on the HSIS.
2. Another important point to remember is that **Quest card numbers** (which are 16-digits and start with 5077) are **not valid** to include on the HSIS. (This is also on the HSIS in the blue box).
 - If a Quest card number is listed, you must request the 10-digit case number from the household member in order to claim the participant as Free.

Please remember, the participant(s) must be counted as **Non-Needy** if the HSIS has a missing or invalid case number.

Part 2: Total Household Size and Income

Households that do not complete Part 1 must complete Part 2

PART 2: TOTAL HOUSEHOLD SIZE AND INCOME (Complete a, b, and c)
 If you completed PART 1, you do not need to list household and income information below.

a) List full names of all household members below, including yourself and all children.
Household Member: anyone who is living with you and shares income and expenses, even if not related.

b) List all income on the same line as the person who receives it.
 • Record each income source only once.
 • Check the box for how often each income source is received.

Household Members	Age	Check if Foster Child	Check if No Income	Gross wages, Net income (self-employed), Commission, Tips, Cash bonuses, Military pay & allowances for off-site housing/food/clothing, Work comp, strike ben, Unemployment	Weekly	Every 2 Weeks	Monthly	Annually	Pensions, Retirement Social Security, VA benefits, SSI, Disability, Child support, Adoption assistance, Alimony	Weekly	Every 2 Weeks	Monthly	Annually	Private pensions, Trusts/estates, Annuities, Investments, Interest, Net rental income, Savings withdrawals, Any other income	Weekly	Every 2 Weeks	Monthly	Annually
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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		<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

c) Record total # of household members: _____

Households that do not receive benefits, and did not complete Part 1, must complete Part 2. The household must report all people living in the household, all income received by each person, and indicate how often the income is received (pay frequency) by checking a box next to the amount. Checking the pay frequency box is very important because it is required in order to calculate total household income.

Pay Frequencies

HOUSEHOLD SIZE—INCOME STATEMENT
 (For Group Child Care & Outside of School Hours Centers) **IFY 2021, Rev. 6/20**
 (Child and Adult Care Fee Program)

PART 2: TOTAL HOUSEHOLD SIZE AND INCOME (Complete a, b, and c)
 a. List all income on the same line as the person who receives it.
 b. Use all income on the same line as the person who receives it.
 c. Use all income on the same line as the person who receives it.

Pay Frequency	Multiplier
Weekly	x 52
Twice a month	x 24
Every 2 weeks	x 26
Monthly	x 12

Multiple Pay Frequencies – convert to **annual** amount and add to get one total amount

Do not round values

Same Pay Frequency – add all income to get one total amount for that frequency

*Convert to yearly income only when multiple pay frequencies are reported, using only these multipliers:

Weekly x 52	Twice a month x 24
Every 2 weeks x 26	Monthly x 12

When households report more than one source or amount of income, you must add up all reported income.

When reported income is in **multiple** pay frequencies (for example, one income is monthly and one is every two weeks), convert each income to an **annual** amount (not a monthly amount). The conversion factors are listed at the bottom of each income statement (shown here). When doing the calculations, do not round values. Always add up the unrounded values to get one total annual amount. Then compare that amount to the annual column on the Income Scale to determine if the participant is free, reduced or non-needed.

If all reported income is in the **same** pay frequency (for example, one income is listed as \$700 weekly and another is \$500 weekly), add all reported income to get one total amount for that frequency (in this case –\$1200/weekly). Do not convert to annual or monthly income. Then compare the total income to the Income Scale for that pay frequency (in this case, weekly). There are different columns for each pay frequency.

Part 3: All Households

PART 3: ALL HOUSEHOLDS		
ETHNICITY AND RACE DATA COLLECTION – Completion is optional This center is required by Federal law to ask the following two questions concerning ethnicity and race. Your answers are strictly for statistical reporting and will have no effect on determination of eligibility for benefits. Please answer both questions.		
IS YOUR CHILD(REN) HISPANIC OR LATINO? <input type="checkbox"/> Yes, Hispanic or Latino <input checked="" type="checkbox"/> No, neither Hispanic nor Latino		
SELECT ONE OR MORE OF THE FOLLOWING CATEGORIES THAT APPLY TO YOUR CHILD(REN): <input type="checkbox"/> American Indian or Alaska Native <input checked="" type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander		
ADULT HOUSEHOLD MEMBER SIGNATURE AND LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER (SS#) If Part 2 is completed, the adult signing the form must list the last four digits of his/her SS# or check "None" if you do not have a SS#.		
I CERTIFY that all of the above information is true and correct and that all income is reported. I understand that this information is being given for the receipt of federal funds; that agency officials may verify the information on the application; and that deliberate misrepresentation of the information may subject me to prosecution under applicable state and federal laws.		
Signature of Adult Household Member <i>Karen Smith</i>	Signature Date Mo./Day/Yr. <i>5/21/20XX</i>	Last 4 digits of SS# (or check "None" if you do not have a SS#) ***-**- <i>1234</i> <input type="checkbox"/> None

**Signature
Required**

**Date
Required**

**Social Security Number
Required
when completing Part 2**

The last section (Part 3) is for all households to complete.

The adult household member must sign and date the form.

In addition, when the household completes Part 2 of the form (income section), the adult must also provide the last four digits of their social security number, or indicate that they do not have one.

A HSIS is incomplete if the household completed part 2 but did not provide the last four digits of their social security number or if the household member did not sign or date the form.

Incomplete HSIS

FOR CENTER USE ONLY – Complete all 3 sections and the <i>Effective Month of Determination</i>			
Section 1: Basis of Determining Eligibility (A or B)		Section 2: Eligibility Determination	Section 3: Determining Official's Initials & Approval Date
A. Household Size & Income Total Household Size _____ *Total Income \$ _____ / _____ <small>(\$ Amount) (Time Period)</small>	B. Benefits/Foster <input type="checkbox"/> FoodShare WI <input type="checkbox"/> WI Works Cash Assistance <input type="checkbox"/> FDPIR <input type="checkbox"/> Foster Child(ren)	<input type="checkbox"/> Free <input type="checkbox"/> Reduced <input checked="" type="checkbox"/> Non-Needy	_____ ** Effective Month of Determination _____ Month/Year

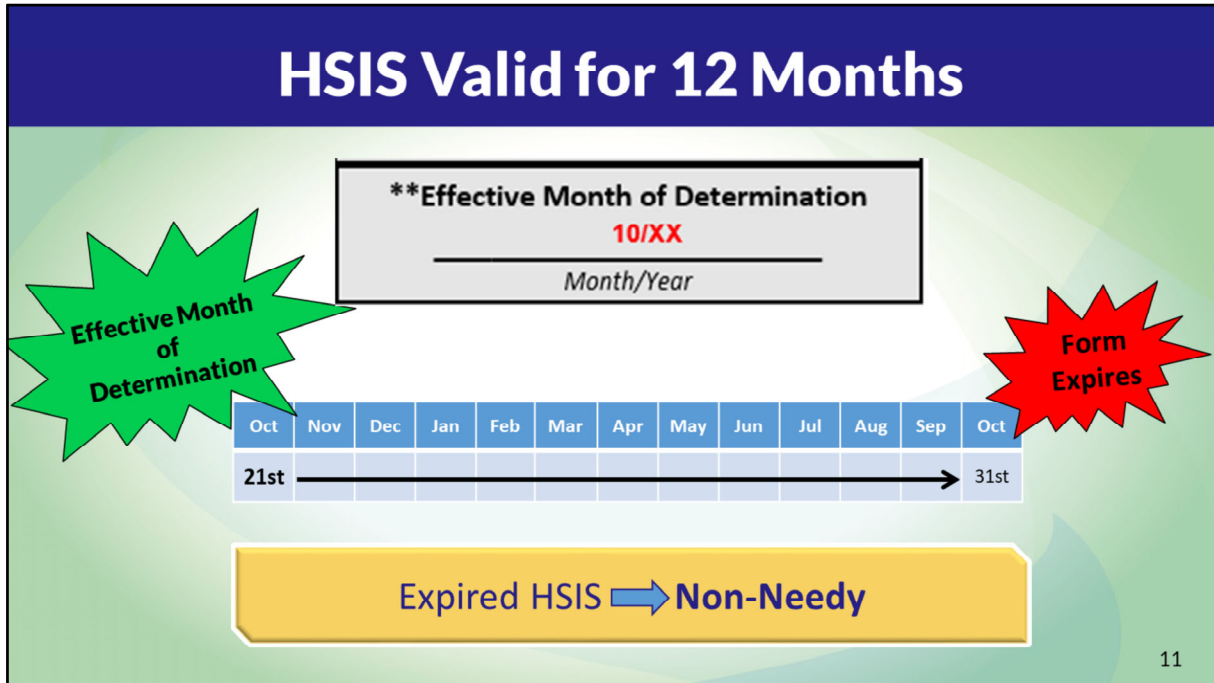
Missing Information → Non-Needy

10

If any required information is missing from Parts 1, 2 or 3 (as mentioned previously), the HSIS must be determined as **Non-Needy** until the information is obtained. As discussed earlier, you must record the missing information on the HSIS and include who provided the information, the date the information was received and your initials.

Remember you cannot count a participant as free or reduced until the HSIS is complete.

HSIS Valid for 12 Months



The last point we want you to take away today is that income statements are valid for 12 months from the Effective Month of Determination. For example, if the Effective Month of Determination is October, the statement is valid through October 31st of the following year. At that time the form expires.

When an income statement expires, the free or reduced eligibility expires and you can no longer claim that participant as free or reduced. You must collect a new income statement from the household.

If you do not obtain a current HSIS and the one on file is expired, you must count that participant as **Non-needy** until a new HSIS is on file.

Collect New HSIS Annually

- Collect new statements from all households
- Same time each year
- Prevent reporting as Free / Reduced with expired HSIS



Because HSIS are only valid for one year, you must collect a new income statement from all households once a year, and never use expired forms.

You are encouraged to collect new HSIS at the same time each year, even from households that are new and may have recently completed a form. The DPI suggests doing this in September or October each year, to coincide with the new federal fiscal year.

Having all households complete a new income statement at the same time each year reduces the chance that a participant will have a form expire and be claimed as Free or Reduced without a valid statement on file.

Summary

1. Use current HSIS
2. HSIS on file for Free/Reduced participants
3. HSIS must be complete and valid

Non-Needy:

- ✓ No HSIS on file
- ✓ Missing information or incomplete HSIS
- ✓ Incorrect information (Quest card #)
- ✓ Expired HSIS

13

We covered some very important information in a short amount of time, so let's review the takeaways again.

1. You must always use the most current version of the HSIS
2. An HSIS must be on file when claiming a participant as Free or Reduced
3. The HSIS must be complete and valid to claim a participant as free or reduced

With that, a participant must be counted as NON-NEEDY when:

- ✓ No HSIS on file
- ✓ The HSIS is missing information or incomplete
- ✓ The HSIS has incorrect information listed (Quest card # in place of a case number)
- ✓ Expired HSIS (older than one year)

Having a complete and valid HSIS on file is important because participants who are claimed as free or reduced without a valid HSIS on file can result in your agency needing to pay funds back to DPI. So, take the time to correctly determine HSIS to reduce the chance of errors.

HSIS Resources

1: Household Size-Income Statements and Determining Eligibility

- [Household Letter](#)
- [Household Size-Income Statement](#)
- [Instructions for Determining Income Statements](#)
- [How to Use the Household Member Signature Date](#)
- [Household Size-Income Scale, July 1, 2020 - June 30, 2021](#)
- [Household Size-Income Record](#)
- [Household Size-Income Record](#)
- [Household Size Income Record Reminders](#)
- [Monthly HSIS/HSIR Checklists](#)

Instructions for Determining Household Size Income Statements: A Step-by-Step Guide (Child Care Component)

Contents

FIRST AND LAST NAME(S) OF ENROLLED PARTICIPANT(S):	1
PART 1: BENEFITS	2
PART 2: TOTAL HOUSEHOLD SIZE AND INCOME	3
FOSTER CHILDREN	4
PART 3: ALL HOUSEHOLDS	5
FOR CENTER USE ONLY SECTION (HSIS approval section)	6
Effective Month of Determination	7

All participants claimed as **Free** or **Reduced** must have a current, complete, and approved Household Size-Income Statement (HSIS) on file.

Before copying the HSIS, write the name of your program at the top. Copy the HSIS and Household Letter for the current Fiscal Year.

Programs may write the name(s) of participant(s) on the HSIS prior to giving to each household.

All collected HSIS, including those for participants who are no longer enrolled, must be retained on file for three years plus the current Federal Fiscal Year (October 1 to September 30).

HSIS must be kept confidential

[www](#) **Guidance Memorandum #1**

14

Since we did not cover all requirements of the HSIS, we have other resources available to help you when determining HSIS.

On the GM webpage, under GM #1, are the required forms (HSIS, Household Letter, Household Size Income Record, and Income Scale), as well as other helpful resources, such as the *Instructions for Determining HSIS*. This is a step-by-step guide that goes through each section of the HSIS and provides specific details on how to correctly determine the HSIS. We highly recommend printing and going through this guide if you haven't done so already. (The Instructions shown on this slide are for the child care component, however, there is a similar guide for ADC).

E-Learning Course: HSIS Lesson

The image shows two screenshots from the CACFP Training website. The left screenshot displays the 'CACFP Training' page with two main sections: 'CACFP Tuesday Talks' and 'CACFP E-Learning Courses'. The 'CACFP E-Learning Courses' section lists three program types: 'Child Care Centers, Outside of School Hours, Emergency Shelters, and Head Starts', 'Adult Day Centers', and 'At-Risk Afterschool Centers'. A blue arrow points from the first program type to the right screenshot. The right screenshot shows the 'Child and Adult Care Food Program (CACFP)' course page, which includes a 'START COURSE' button and a list of course topics: 'Instructions for Using this E-Learning Course', 'New Agency Eligibility', 'New Agency Application Process', 'CACFP Overview', and 'Household Size Income Statements (HSIS)'. A blue arrow points to the 'Household Size Income Statements (HSIS)' topic.

www CACFP E-Learning Course

15

For a full training on the HSIS, we also have the HSIS lesson in the CACFP E-Learning Course. The link on the slide goes to the Training webpage. Under the CACFP E-Learning Courses Section, click on your type of program to go to the specific lessons. This is a great tool when training new staff on how to correctly determine HSIS.

Questions?

**Consultants by
County**

Click on your county to find your agency's consultant.



[www Consultants by County](http://www.Consultants by County)

16

If you have questions about these resources or the CACFP, please reach out to your assigned consultant. You can find your agency's consultant at the *Consultants by County* link on this slide.

The live webinar included time for questions and to complete a survey. These slides were omitted from this handout.

Next CACFP Tuesday Talks



Special Dietary Needs

February 23rd

2 – 2:30 p.m.

19

Our next Tuesday Talk is scheduled for February 23rd and will be on Special Dietary Needs.

Non-Discrimination Statement (NDS)

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Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ascr.usda.gov/complaint_filing_cust.html), (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) Mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) Fax: (202) 690-7442; or
- (3) Email: program.intake@usda.gov

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20

Thank you for attending today's CACFP Tuesday Talks on Household Size Income statements. The webinar was recorded and the link will be posted on the Tuesday Talks webpage, along with a handout of the slides and notes.

Thank you and have a great day!