

Welcome!

Electronic Direct Certification
in the School Nutrition Programs

Electronic Direct Certification

Nutrition Department

Speaker: Roxanne Ramage, MS, RDN, SNS

rramage@isbe.net

Commonly Used Acronyms

- **HEA** – Household Eligibility Application
- **IWAS** - ISBE Web Application Security
- **LEA** – Local Educational Agency
- **NSLP** – National School Lunch Program
- **POS** – Point of Service
- **SNAP** - Supplemental Nutrition Assistance Program
- **SIS** – Student Information System
- **TANF** - Temporary Assistance to Needy Families
- **WINS** – Web-based Illinois Nutrition System

Carryover of Previous Year's Eligibility

- Schools are required to carryover eligibility from the previous year for 30 operating days into the subsequent school year or until a new determination has been made, whichever comes first.
- Although schools are NOT required to notify households that carryover period has ended, we have a sample form and recommend that you do.
- Household is responsible for any meal charges incurred until new application is received and approved. Refer to your Local school policy on charging meals.

Full-Year Eligibility

- Once Eligibility is determined, whether direct certification or via HEA, that eligibility remains in effect for the rest of that school year and for carryover into the subsequent school year.
- Households are NOT required to report changes in income, household size, receipt of benefits, or homeless/migrant status.
- Exceptions to full-year eligibility occur when:
 - The initial eligibility determination was incorrect, maybe due to a confirmation review or audit/review.
 - Verification of household eligibility does not support the level of benefits for which the household was approved.



How Are Meal Benefits Determined?

- **Direct Certification**

- Certification of SNAP/TANF/Income-eligible Medicaid(Free and Reduced Price)/Foster Child AND Homeless/Migrant/Head Start benefits via *Electronic Direct Certification System*

OR

- **Categorical Eligibility**

- Homeless, migrant, runaway, foster child or Head Start listing

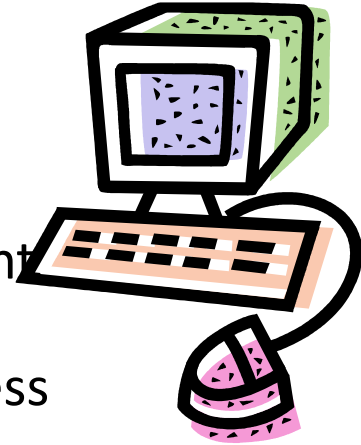
OR

- **Household Eligibility Application (HEA)**

- SNAP/TANF application
- Income application
- Foster child application



Overview of the Electronic Direct Certification System



- The *Electronic Direct Certification System* contains confidential data.
- You must have a login name and password to *IWAS* to access *WINS*.
- Access is ONLY provided to schools/districts participating in the National School Lunch/School Breakfast Program.
- The *Electronic Direct Certification System* is available from the main dashboard in *WINS*.
- Please ensure that you locally maintain all source documentation from any DC matches. This includes annual, monthly and single child match reports.
- All rules and regulations regarding the use of this data including confidentiality and disclosure must be followed.

Sponsor Tasks

Sponsor Applications & Participation

Site Applications

Claims & Monitoring

Sponsor Info

Administrative Tasks

Sponsor Tasks	Site Application Tasks
<div>Batch Daily Meal Counts</div> <div>Batch Participation Detail</div> <div>Add/Remove Detail Dates</div> <div>Batch Site Questionnaire</div> <div>Batch Site Participation</div> <div>FFVP Application</div> <div>Is Community Eligibility Provision (CEP) for you?</div> <div>CEP Group Information</div> <div>Add New Site</div> <div>Deactivate/Re-activate Site(s)</div> <div>Deactivate Sponsor</div> <div>Review Citation Responses</div> <div>Waivers</div> <div>Local Foods for Schools (LFS) Agreement - Accepted</div> <div>Local Food for Schools (LFS) Farm Search</div>	<div>Enroll Site In New Program</div> <div>Edit Site Questionnaire</div> <div>Edit Program Participation</div> <div>Edit Participation Detail</div>

Reports	Budget
<div>Applications Not Received</div> <div>Direct Certification</div> <div>Deleted Sites</div> <div>Claim Data Report</div> <div>Summary Reports - Applications Submitted for Sponsor</div> <div>Summary Reports - Applications Submitted for Sites</div> <div>Summary Reports - List of Sites and Applications Submitted</div>	<div>No WINS Budgets required.</div>

Have questions or need help? Contact our Call Center (217)558-3600 between 8:00am - 5:00pm CST, Monday - Friday or Click here to Contact Us

Copyright © 2024, Illinois State Board of Education

WINS MAIN DASHBOARD

Direct Certification in Illinois

Direct Certification is conducted through a partnership between the ISBE and the following:

- Illinois Department of Human Services (IDHS) for **SNAP and TANF records**,
- Illinois Department of Healthcare and Family Services (HFS) for **income-eligible Medicaid records** and
- Illinois Department of Children and Family Services (DCFS) for **foster children records**.

What is Direct Certification?

- Direct Certification is the process when LEAs certify children who are members of households receiving assistance under the SNAP, TANF, income eligible Medicaid (free and reduced-price) or Foster Children as eligible for free or reduced-price school meals/milk based on agency records. Added Homeless, Migrant, and Head Start reports via SIS for Public Schools Only after September 1 annually.
- Households in which students are directly certified are NOT required to complete the Household Eligibility Application to receive free or reduced-price meal/milk benefits.
- Via extension of meal benefits, if any member of the household is eligible for SNAP/TANF/Income Eligible Medicaid (free and reduced-price) benefits, all students in that household are eligible for free or reduced-price meal/milk benefits.
 - Extension of benefits is NOT allowed for Foster Child, Homeless, Migrant or Head Start status.
- Students directly certified for free or reduced-price school meal/milk benefits are eligible for the entire school year and are not subject to verification requirements.

Frequency of Direct Certification

- Direct Certification is a requirement for LEAs participating in NSLP and must be conducted at least three times annually per USDA as follows:
 1. at or around the beginning of the school year,
 2. three months after the initial effort, and
 3. six months after the initial effort.
- ISBE recommends that all sponsors (Public and Non-public) access the *Electronic Direct Certification System* monthly to maximize direct certification and lessen administrative paperwork!

Eligibility Process

- **Step One:**

- Begin July 1 Annually
- Maximize Direct Certification
 - Access and process the July Annual File or complete Upload of Enrollment File
 - Could also include August File, depending on start date of school and preference
 - Extend benefits if SNAP, TANF or Income Eligible Medicaid (free and reduced-price eligible)
- Keep notes/records on matches from prior SY, and use to ensure accurate matches for the new school year.



- **Step Two:**

- Notify households directly certified for free or reduced-price meals benefits.

- **Step Three:**

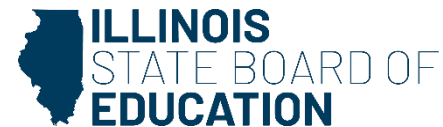
- Distribute a HEA (Letter to Household, Application and Instructions) to all household not directly certified for meal benefits. If DC reduced, HEA is also required.

Eligibility Process

- **Step Four:**
 - Process HEA according to USDA requirements within 10 days of receipt
 - Continue to document directly certified students, if possible
- **Step Five:**
 - **Notify all households who submitted HEA if approved or denied.**
- **Step Six:**
 - Throughout the school year, access direct certification reports and process all submitted HEAs.

Direct Certification with Medicaid – Expansion to Reduced Price Eligibility

- Direct Certification matches now include students eligible for both **FREE** and **REDUCED-PRICE** meal benefits based on their participation in Medicaid at the appropriate income levels.
- Guidance posted at <https://www.isbe.net/Documents/DC-Medicaid-Reduced.pdf>
 - This will be incorporated into the Administrative Handbook, in the near future.
- **REDUCED-PRICE** matches will be on a separate downloadable export and print report via the Electronic Direct Certification system in WINS for NSLP/SBP schools.



Effective Date of Eligibility

- In WINS, Click on *Sponsor Application & Participation, then Questionnaire, then Effective Date of Eligibility.*

SNP Sponsor Questionnaire

Sponsor Information
Determining And Hearing Official Designation
Civil Rights
Effective Date of Eligibility
Policy Statement
Permanent Agreement
Summary

Effective Date of Eligibility


1. Each SFA now has a choice regarding the effective date of eligibility for both traditional household eligibility applications and direct certification. Please select one.
 - ☒ **Application Approval Date or Direct Certification Access Dates** - A student's meal benefits are effective the date the Determining Official reviews and approves the household eligibility application. Benefits provided through direct certification are effective the access date of the file in WINS.
 - ☐ **Application Submission Date or Direct Certification Effective Date** - A student's meal benefits are effective the date the SFA receives the household eligibility application from the household. If choosing this option, the SFA will need to have a method in which to indicate the "received Date". Benefits provided through direct certification are effective the first day of the month regardless of when the file is accessed. Refunds of meal payments may be required.
 - ☐ **Not Applicable** - Eligibility Determinations are not made. (This may be due to Community Eligibility Provision (CEP) participation or Special Milk (paid option).)

[Previous](#)[Next](#)

Using Medicaid in Direct Certification

- This is ONLY available to NSLP/SBP participating sponsors.
- A Medicaid case number CANNOT be entered on a HEA and approved for meal benefits.
- Medicaid is ONLY used for USDA meal benefit approval IF found in the ISBE Direct Certification System.
 - If multiple benefit levels are listed (for example, Free Medicaid for one student in the household and Reduced Medicaid for another student in the same household), the highest level of benefits is provided. An extension of benefits form is needed.
- Not all students that receive Medicaid will be eligible for DC for school meal benefits.
- If a DC Medicaid Reduced Price match, ensure you provide the appropriate letter with HEA. That HEA may be processed based on income only.

Electronic Direct Certification Home

**Illinois State
Board of Education**

[Home](#)
[Direct Certification](#)
 [SNAP/TANF/Free Medicaid](#)
 [Reduced Medicaid](#)
 [Homeless/Migrant/Headstart](#)
 [File Upload Match](#)
 [Single Child Match](#)
[Direct Verification](#)
[Contact Us](#)
[Change RCDT](#)

Illinois State Board of Education
User Id: rramage RCDT: 51-084-1860-25 - Springfield Sch Dist 186

Welcome to the Illinois State Board of Education's Electronic Direct Certification System.

This system is used to certify a child to receive meal benefits for the USDA Child Nutrition Programs, based on information exchanged between other assistance programs without a household eligibility application completed by the household. LEAs participating in the National School Lunch Program are required to directly certify children for free meal benefits found in this system. If a child is directly certified for meal benefits, verification is not required. The local educational agency (LEA) agrees to follow all rules and regulations regarding the use of this data including confidentiality and disclosure as detailed in the School-Based Child Nutrition Programs Permanent Agreement.

Data sources currently being used for direct certification in Illinois includes:

- Supplemental Nutrition Assistance Program (SNAP),
- Temporary Assistance for Needy Families (TANF),
- Foster status,
- Income-Eligible Medicaid,
- Homeless,
- Migrant, and
- Head Start.

Direct Certification Home | ISBE HOME | LOGOUT
SESSION
TIMEOUT 18:11

Please refer to the Electronic Direct Certification section of the [Administrative Handbook](#) for complete

Have questions or need help? Contact our Call Center (217)558-3600 between 7:00am - 5:00pm CST, Monday - Friday or Click here to Contact Us
Copyright © 2009-2017, Illinois State Board of Education

Electronic Direct Certification

Annual/Monthly Match

(Public School Districts ONLY)

Sponsor File Upload Match

(ALL LEAs)

Single Child Lookup

(ALL LEAs)

Annual/Monthly Match

(Public School Districts ONLY)

- File available July 1st annually and each month thereafter
- File Type: *Annual/Monthly*
- The *Annual* file will identify the students that were enrolled in SIS (June Records) for your district that are receiving SNAP/TANF/Foster or Income Eligible Medicaid benefits.
- Each Public School District will have **ONE** *Annual* File each school year.

Annual/Monthly Match

(Public School Districts ONLY)

- The *Monthly* file will identify any new students that are enrolled in SIS (Current Month Records) that did NOT appear on the *Annual* file for your district that are receiving SNAP/TANF/income eligible Medicaid/Foster child benefits.
- *Monthly* files will identify the number of matches found via this match. In some cases, this will be zero.
- Students on this report/file, currently enrolled in your district, are automatically eligible for free or reduced price meals/milk, **regardless of the case ID number and the address listed on the file.**
- It is unlikely that ALL students on the file will be directly certified. For example, some students may NOT re-enroll in your district or may transfer schools. Some matches are close matches, and not an enrolled student.
- Public schools should access the *Monthly* file as close to the 1st of the month as possible.



[Home](#)

[Direct Certification](#)

[SNAP/TANF/Free Medicaid](#)

[Reduced Medicaid](#)

[Homeless/Migrant/Headstart](#)

[File Upload Match](#)







[Single Child Match](#)

[Direct Verification](#)

[Contact Us](#)

[Change RCDT](#)

SNAP/TANF/Free Medicaid Monthly/Annual Match Files

File Type	Approximate Number of Records	Match Date	Access Date	Download	Print
Monthly	92	08/01/2024			
Sponsor File	29	07/17/2024			
Annual	8,279	07/01/2024	07/02/2024		



Home

Direct Certification

SNAP/TANF/Free Medicaid

Reduced Medicaid

Homeless/Migrant/Headstart

File Upload Match







Single Child Match

Direct Verification

Contact Us


Change RCDT

Reduced Medicaid Monthly/Annual Match Files

File Type	Approximate Number of Records	Match Date	Access Date	Download	Print
Monthly	11	08/01/2024			
Sponsor File	2	07/17/2024			
Annual	754	07/01/2024	07/02/2024		

Homeless, Migrant, Head Start

Only Available September 1 – June 30

**Illinois State
Board of Education**

Illinois State Board of Education

User Id: rramage RCDT: 51-084-1860-25 - Springfield Sch Dist 186



[Home](#)
[Direct Certification](#)
[SNAP/TANF/MEDICAID](#)
[Homeless/Migrant/Headstart](#)
[File Upload Match](#)
[Single Child Match](#)
[CEP Validation File Match](#)
[Contact Us](#)
[Change RCDT](#)

Download File

As this feature utilizes data found in the Student Information System, this function is only available for PUBLIC SCHOOLS.

Each public school district LEA may access a current direct certification report for students categorized as homeless, migrant or Head Start within the Student Information System. This report must be printed and maintained as documentation of such statuses. Students found in this manner are directly certified for free meal benefits. There is no extension of benefits for Homeless, Migrant or Head Start eligibility status.

Homeless Migrant HeadStart

File Type	Approximate Number of Records	Description	Download	Print
HMHS	34	Homeless, Migrant, Headstart Students		

Have questions or need help? Contact our Call Center (217)558-3600 between 7:00am - 5:00pm CST, Monday - Friday or Click [here to Contact Us](#)

Copyright © 2009-2017, Illinois State Board of Education

Annual/Monthly Match (Public School Districts ONLY)

- Select PRINT – An Annual/Monthly Match Report is displayed.
- This Report **MUST** be printed and maintained to document eligibility status. Document may be **SAVED** electronically.
- The Eligibility of a student begins either the first day of the match month or the access date, depending on the district's selections for HEA effective dates.
- File also available for Download. See Admin Handbook for detailed instructions if needed for POS.

Sponsor Match (ALL LEAs)

- Any LEA may upload a comma delimited file at any time.
- Each file must contain the following fields:
 - First Name,
 - Last Name,
 - Gender, (F-Female, M-Male)
 - Birth date (month/day/year, 01/17/20XX)
- An optional 5th and 6th column of data may be added.
 - Such fields will be returned unchanged in the sponsor match file.
 - May be helpful to include SIS ID number, name of school, etc. for ease of matching to overall student file.
- Results will be displayed as File Type: *Sponsor File*

Sponsor Match (ALL LEAs)

- Results will identify the students included on the upload file that are receiving SNAP/TANF/income eligible Medicaid/Foster Child benefits.
- Students on this report/file may be directly certified for free or reduced-price meals/milk if the LEA determines that the students are enrolled in the school/school district.

Illinois State Board of Education

User Id: rramage RCDT: 47-071-8010-60 - Ogle Co Education Cooperative

File Upload Match

An LEA may upload student information to the Electronic Direct Certification System. The system compares student information with SNAP, TANF, income-eligible MEDICAID, and FOSTER data.

Matched student information will be available in a report or downloadable file on the Download Files page. A report created by the LEA with an uploaded student file is named Sponsor File with the appropriate date. There is no limit to the number of file uploads by an LEA. Once the system has completed the match, you will be automatically transferred to the Download Files page. The most current file will be the bottom file.

The file format for this upload file match must be a comma delimited file with the following fields:

- First name
- Last name
- Gender (F or M)
- Date of Birth (MM/DD/YYYY)

Refer
com

Upload matches found

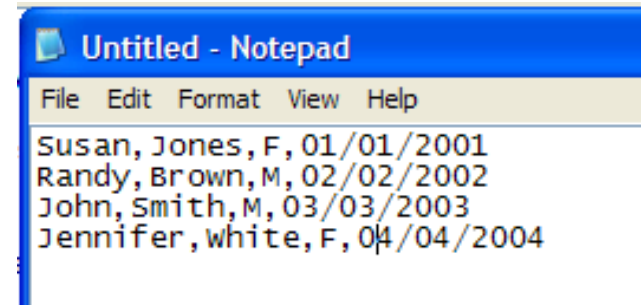
SNAP/TANF/Free Medicaid
<u>Reduced Medicaid</u>

Close

or complete information on creating a

What is a comma delimited file ?

- A file format that is used for uploading data to the *Electronic Direct Certification System*.
- A comma delimited file uses a [comma](#) to separate values.
 - Example: Susan,Jones,F,01/01/2007
- See sample in Notepad below.
- More detailed information about comma delimited files and how to create one in both Notepad and Microsoft Excel are included in the *Guidance Document*.



Duplicate Matches for Same Student

- In some instances, a student might be found in one program file one month, and another program file another month. This is a duplicate student match.
- If this occurs, please use the following as the hierarchy of direct certification status:

1. SNAP
2. TANF
3. Foster
4. Income Eligible Medicaid FREE
5. Income Eligible Medicaid REDUCED-PRICE

Pink highlighted to highlight availability of extension of benefits to other household members.

Single Child Lookup (ALL LEAs)

- LEA may search for a single student who may be receiving SNAP/TANF/Income Eligible Medicaid/Foster Child benefits.
- An LEA may search First name, Last name, and City.
- A *Single Child Lookup Report* is available.
 - Please limit each report to 8 students!
 - There is no limit to the number of Single Child Reports that may be created.
- The option to download a file is NOT available for a Single Child Lookup.

Single Child Match

Name and Address Search

[Home](#)
[Direct Certification](#)
 [SNAP/TANF/MEDICAID](#)
 [Homeless/Migrant/Headstart](#)
 [File My Child Match](#)
 [Single Child Match](#)
[CEP Validation File Match](#)
[Contact Us](#)
[Change RCDT](#)

User Id: rramage RCDT:

Single Child Match

An LEA may look up a single student with the following search criteria:

1. first name, last name, and city.

When you look up a single child by Name and Address, the first and last name are required fields. The city is an optional field.

Lists with child(ren) that match exactly or that are close will appear. Each LEA must select the child(ren) that is (are) enrolled in their school by selecting Add to Report. When the LEA completes their search, select Edit Report to review the children names or Print Report to print the report for your records.

Search Criteria

First Name *

Last Name *

City

* required field

Search

Type of Search

☒ Name and Address

☐ Case Number

Search Criteria

First Name *

Last Name *

City

* required field

Search

Exact Matches

Name	Address	Birth Date	Sex	Case Number/Identifier	Assistance Source		
					Free Medicaid	Add To Report	EXACT
					SNAP	Add To Report	EXACT
					SNAP	Add To Report	EXACT
					Reduced Medicaid	Add To Report	EXACT
Total Exact Matches: 4							

Illinois State Board of Education

Direct Certification Sponsor Report Based on Program Participation in April 2023

Agreement Number: 47-071-8010-60

100 North First Street Springfield, Illinois 62777-0001

Dr. Steven Isoye

Chair of the Board

An Equal Opportunity/Affirmative Action Employer

Dr. Tony Sanders

State Superintendent of Education

User First Printed On

EXACT Matches									
First Name	Last Name	Birth Date	Sex	Assistance Source	Agency Identifier	Street Address	City	State	Zip
				Reduced Medicaid					
				Reduced Medicaid					
				Reduced Medicaid					
				Reduced Medicaid					

Total Number of EXACT Matches: 4

Grand Total: 4

Illinois State Board of Education

Direct Certification Sponsor Report Based on Program Participation in February 2023

Agreement Number: 47-071-8010-60

100 North First Street Springfield, Illinois 62777-0001

Dr. Steven Isoye

Chair of the Board

An Equal Opportunity/Affirmative Action Employer

Dr. Tony Sanders

State Superintendent of Education

User First Printed On 2/23/2023 12:02:29 PM

EXACT Matches

First Name	Last Name	Birth Date	Sex	Assistance Source	Agency Identifier	Street Address	City	State	Zip
				SNAP					
				Foster					
				SNAP					
				SNAP					
				Free Medicaid					
				SNAP					
				SNAP					
				SNAP					
				SNAP					

Exact Match and Close Match

- **Exact Match** – All fields match.
- **Close Match** – One or more fields may be close matches or could “sound-like” the requested search.
- With **ALL** matches, the LEA makes a determination if the MATCH is the student enrolled in their school.
- If the LEA determines that the match is an enrolled student, free or reduced-price meal/milk benefits **MUST** be provided.
- If the LEA determines that the match is **NOT** an enrolled student, please indicate on the documentation. No further action is needed by the LEA.

USDA Policy- Extending SNAP/TANF/Income Eligible Medicaid Eligibility for Free or Reduced-Price Meal Benefits

- Extending eligibility means that ALL children or adults in the household who are participating in a Child Nutrition Program are categorically eligible for free or reduced-price meal/milk benefits if any household member (child or adult) is receiving SNAP/TANF/Income Eligible Medicaid benefits.
- **NOTE:** The *Electronic Direct Certification System* contains only children aged 23 years old and younger.
- **NOTE:** Foster Child, Homeless, Migrant, and Head Start status is NOT extended to other students within the same household.

Required Notification to Households - FREE Eligibility

- The LEA must notify the household of the following:
 - The student(s) is eligible for free meal/milk benefits;
 - If student(s) residing in the same household are NOT included on the notice, they should contact the school to request an extension of free or reduced-price meal benefits to all students;
 - No further action is required. The household **DOES NOT** have to complete a Household Eligibility Application; and
 - If the household does not want free or reduced-price benefits for a directly certified student, how to notify the LEA.

Use your "Mouse" or "Tab" key to move through the fields and check boxes. After completing last field, save document to hard drive to make future updates or click Print button.

SAMPLE NOTIFICATION LETTER - DIRECT CERTIFICATION

Date: _____

Dear Parent/Guardian:

Each student identified below is automatically approved for free school meals for the current school year based on your eligibility for Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance to Needy Families (TANF), Income Eligible Medicaid or Foster Child status.

Name of Student	Grade	Assistance Source	School Name

Please **do not** fill out a Household Eligibility Application for free or reduced price meals for the students listed above. This student(s) will receive free meals unless you notify us that you do not want to receive these benefits. If you do not want your child to receive free meal benefits please completely fill out the information in the box below and return to the school office no later than _____. (insert Date)

If you have student(s) in your household who are not listed above, please contact this office at the telephone number provided below at your earliest convenience. A Household Eligibility Application is NOT needed; free meal benefits will be extended to all children residing in the same household except foster child status is for the foster child only.

☐ I DO NOT want my child(ren), as listed above, to receive free meal benefits.

Date Signature of Parent or Guardian

If any of the information listed above is incorrect, or you have any questions, please contact this office at (____) _____.

Name Title

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted 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; or
2. fax:
(833) 256-1665 or (202) 690-7442; or
3. email:
program.intake@usda.gov

This institution is an equal opportunity provider.


ISBE 69-15 (6/22)

Print Reset Form

Sample Notification Letter: Direct Certification Medicaid Reduced Price Eligible

- ISBE Form 68-48
- Form posted in English and Spanish
- <https://www.isbe.net/Documents/DC-Medicaid-Reduced-Eligible-Letter-68-48.pdf>
- Include blank HEA with notice

Use your "Mouse" or "Tab" key to move through the fields and check boxes. After completing last field, save document to hard drive to make future updates or click Print button.

 **Illinois State Board of Education**
100 North First Street
Springfield, Illinois 62777-0001

SAMPLE NOTIFICATION LETTER - DIRECT CERTIFICATION MEDICAID REDUCED PRICE ELIGIBLE

NUTRITION DEPARTMENT

Date: _____

Dear Parent/Guardian:

Each student identified below is automatically approved for REDUCED-PRICE school meals for the current school year based on your eligibility for Income Eligible Medicaid.

Name of Student	Grade	Assistance Source	School Name

No further action is needed to receive reduced-price eligible meals at school for the enrolled students. If however, your household may qualify for free meals based on household size and income, please complete the Household Eligibility Application for free or reduced price meals enclosed. Once submitted, you will receive additional notification if the student(s) qualifies for greater benefits. **If you do not want your child to receive reduced-price meal benefits please completely fill out the information in the box below and return to the school office no later than _____ (insert Date)**

If you have student(s) in your household who are not listed above, please contact this office at the telephone number provided below at your earliest convenience. A Household Eligibility Application is NOT needed; reduced-price meal benefits will be extended to all children residing in the same household.

☐ I DO NOT want my child(ren), as listed above, to receive reduced-price meal benefits.

Date _____ Signature of Parent or Guardian _____

If any of the information listed above is incorrect, or you have any questions, please contact this office at (_____) _____

Name _____ Title _____

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-0950 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-CR-2015-001-Complaint-Form-AD-3027-2016-11-28-172x11.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to: USDA, The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted 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; or
2. fax: (833) 256-1666 or (202) 690-7442; or
3. email: program.intake@usda.gov

This institution is an equal opportunity provider.

Print **Reset Form**

ISBE 68-48 (8/22)

Maximizing the Direct Certification Numbers

- Access the system on a MONTHLY basis or more frequently.
- Review prior school year records to identified case numbers to assist with matching.
- If a HEA with a SNAP/TANF number or a foster child application is submitted, the LEA should check the *Electronic Direct Certification System* for the student.
 - If found, direct certify the student (and any additional household members for SNAP/TANF/Income Eligible Medicaid).
 - If not found, however, process the HEA at face value.

Important Note: HEA with Medicaid Case ID Numbers CANNOT be accepted under any circumstances.

How Are Meal Benefits Determined?

- **Direct Certification**

- Certification of SNAP/TANF/Income-eligible Medicaid(Free and Reduced Price)/Foster Child AND Homeless/Migrant/Head Start benefits via *Electronic Direct Certification System*

OR

- **Categorical Eligibility**

- Homeless, migrant, runaway, foster child or Head Start listing

OR

- **Household Eligibility Application (HEA)**

- SNAP/TANF application
 - Income application
 - Foster child application



Categorical Eligibility—Head Start, Foster Child, Homeless, Migrant, and Runaway Children

- Dated list with each child's name and signed by appropriate person
 - Head Start director
 - Foster Care Agency Director
 - Homeless education liaison
 - Shelter director
 - Migrant education coordinator
 - Runaway and homeless youth service provider
- OR
- Application with child's name and signature of appropriate person



ALL Documents are UPDATED for SY24-25!

HOUSEHOLD ELIGIBILITY RESOURCES

HOUSEHOLD ELIGIBILITY APPLICATIONS (HEA)

Local Educational Agencies (LEAs) are required to use the Electronic Direct Certification system in order to determine households that receive SNAP/TANF/income eligible Medicaid benefits or whom might be foster children, as such are automatically eligible for free meals. By determining households that are eligible for free meals through the Electronic Direct Certification System, an LEA would only provide household eligibility application packets to those households not found in that system. Please access the Electronic Direct Certification system webpage for more information. Per USDA regulations, each year, at the beginning of the school year, informational letters must be distributed to the households of children attending the school. Such informational letters cannot be sent home at the end of the school year for the next year, nor can the LEA accept and process applications before the Federally defined school year of July 1 - June 30.

LEAs must distribute a Household Eligibility Application, instructions, and appropriate letter to all households that have not been directly certified. Application, instructions and letter cannot be distributed any earlier than July 1.

SY 2024-25 DOCUMENTS

- NSLP/SBP Letter to Households, Application, and Instructions (68-06) 
 - Spanish Version 
- NSLP/SBP Letter to Households ONLY (68-06) - Editable Word Version 
 - Spanish Version 
- Special Milk/IL Free Letter to Households, Application, and Instructions (68-13) 
 - Spanish Version 
- Special Milk/IL Free Letter to Households ONLY - Editable Word Version 
 - Spanish Version 

INCOME ELIGIBILITY GUIDELINES

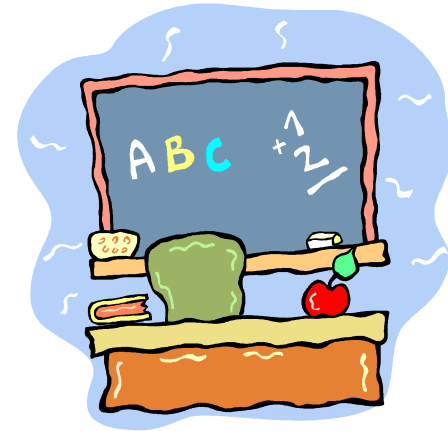
- FY 2025 

ADDITIONAL FORMS

- Denial/Approval Notification Letter (68-02) 
 - Word Version 
 - Spanish PDF Version 
 - Spanish Word Version 
- Disclosure Form 
 - Spanish Version 
- Direct Certification Sample Letter (69-15) 
 - Word Version 
 - Spanish Word Version 
- Extension of SNAP/TANF Eligibility to Household (54-45) 
- Homeless, Runaway, Migrant, Head Start, and Foster Child Certification Form (50-73) 
- 30-Day Carryover Period Ending (68-11) 
 - Word Version 
- Public Announcement - Federal and State Meal Programs (68-04) 
- Sample Notification Letter - Direct Certification Medicaid Reduced Price Eligible 
 - Editable Word Version 
 - Spanish Version 



Contact Us



Nutrition Department
Illinois State Board of Education

Telephone: 800/545-7892 in Illinois only
217/782-2491

Fax: 217/524-6124

Email: cnp@isbe.net

Website: www.isbe.net/nutrition

Related School Nutrition Programs Upcoming Webinars



- **Webinar: Certification of Household Eligibility Applications (HEA)**
 - July 30, 2024 from 1:30pm – 3:00pm
 - <https://register.gotowebinar.com/register/2648342421399044447>
- **Webinar: Verification**
 - September 17, 2024 from 1:00pm – 2:30pm
 - <https://register.gotowebinar.com/register/6826933008881079387>