

EBT Security Plan

Office Address:

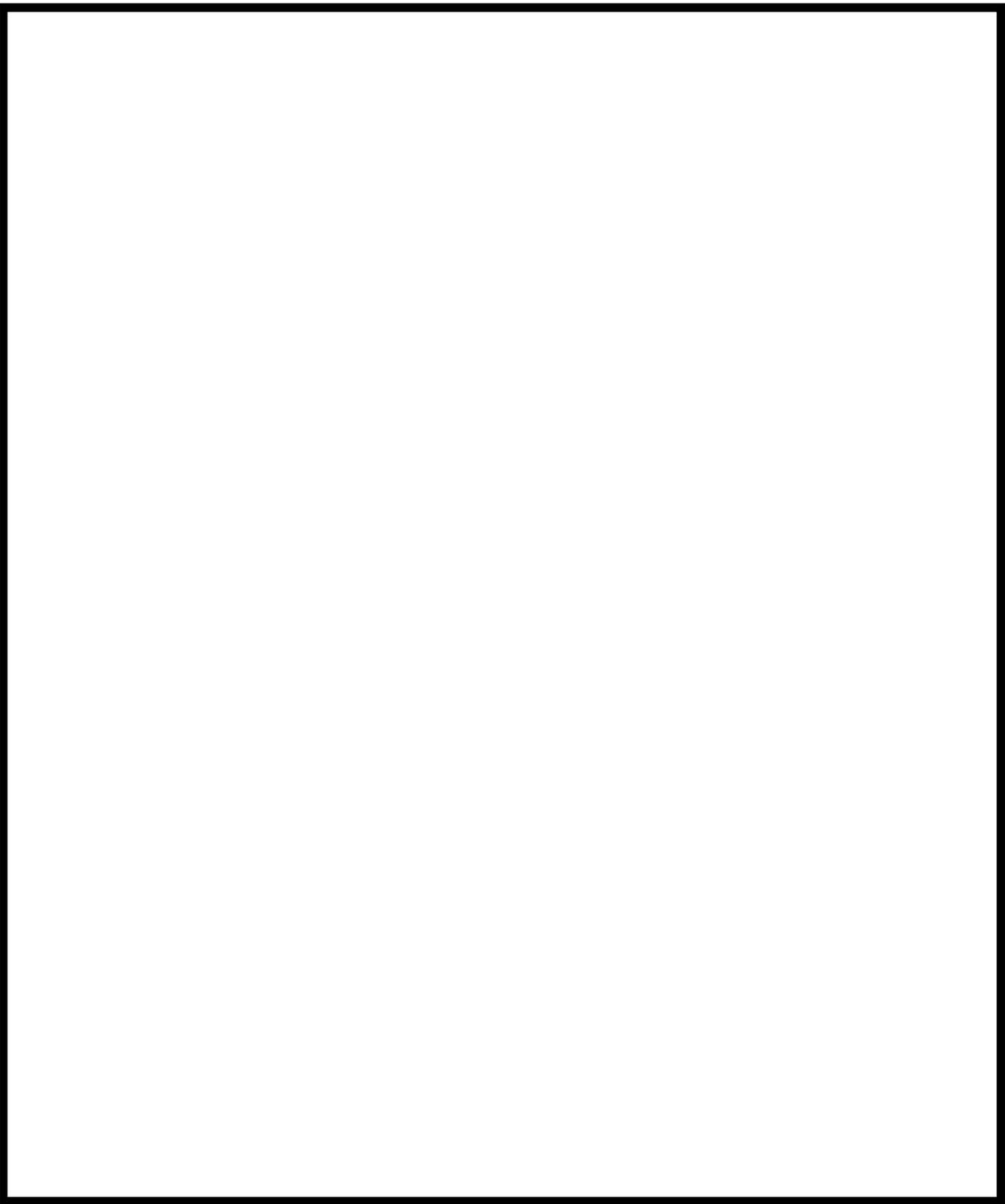
County/Region:

Mail Code:

Telephone No.:

Revised 06/2016

Function	Administrative Terminal (AT) Permissions	Supply of Secured Documents
<p>EBT Supervisor of Designee:</p> <p>Responsible for ordering, receiving and accounting for Lone Star Cards from vendor.</p> <p>Responsible for completing Form H1174, Inventory of EBT Cards and physical count of cards each month.</p> <p>Responsible for daily reconciliation of EBT report.</p> <p>EBT Disposition Worker:</p> <p>Performs EBT functions in absence of EBT supervisor or designee.</p> <p>EBT Clerk:</p> <p>Responsible for accurately completing Form H1173, EBT Card Issuance and PIN Self-Selection/Issuance Log.</p> <p>Backup EBT Clerk:</p> <p>Performs EBT clerk functions in absence of EBT clerk.</p> <p>Are all listed positions in compliance with Section 3000 of the <i>Security and Accountability Handbook</i>? Yes_____ No If no, complete the exception information.</p>	<p>Inquiry, Merge and Issuance</p> <p>Split/Merge, Inquiry</p> <p>No Issuance</p>	<p>Storage Limits in Bulk Supply</p> <p>Maximum: Lone Star Cards</p> <p>Minimum*: Lone Star Cards</p> <p>Storage Limits in Daily Supply</p> <p>Maximum: Lone Star Cards</p> <p>Minimum*: Lone Star Cards</p> <p>*Reorder when supply is this amount.</p>



TEXAS

ELECTRONIC BENEFIT TRANSFER (EBT) REGIONAL SECURITY PROCEDURES

Regional Security Procedures

Appendix III

Security Procedures Format

Regional Contact Sheet

Regional Roles and Responsibilities

Title	Name	Phone	Fax	Mail Code
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Regional Director:

Regional EBT Coordinator:

Appendix III

Security Procedures Format

Local Office Security Procedures Format

Exceptions:

How exceptions will be monitored:

Contingency Procedures:

Special Procedures (any procedures unique to this office):

Approved by ERC:

Date

Appendix III

Security Procedures Format

Region No.:	Date:	Implemented Date:
Procedure No: 01	Approved:	
Submitted By:	Handbook Reference: 4000	

1. **Title of Procedure:** Ordering of Secured and Non-Secured Supplies

2. **Description of Procedure**

Secured Items

Ordering and maintaining adequate supplies of Lone Star Cards is the responsibility of the HHSC benefit office EBT supervisor or designated staff. The supervisor or designated staff will route all order forms (Request for Lone Star Materials) directly to the EBT regional coordinator for approval and forwarding to Vendor. Disapproved orders will be returned to the HHSC benefit office supervisor or designated staff with appropriate annotations.

Note: Designated staff must be identified in plan.

Non-Secured Items

The HHSC benefit office EBT supervisor or designated staff will submit Vendor materials order form to request supplies of non-secured EBT materials to the EBT regional coordinator. The EBT regional coordinator approves the order and submits it to Vendor.

3. **Documentation Required by this Procedure**

None

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Appendix III

Security Procedures Format

Region No.:	Date:	Implemented Date:
Procedure No: 03	Approved:	
Submitted By:	Handbook Reference: 5200	

1. **Title of Procedure:** Issuing Benefits via the EBT system.

2. **Description of Procedure**

In order to use the EBT system to issue benefits, certain situations must be present. These situations are:

1. TIERS system is unavailable with no estimated up time and an EBT system issuance is necessary to meet expedited deadlines on applications.
2. The HHSC benefit office supervisor must contact the EBT regional coordinator to request permission to issue benefits via the EBT system.
3. The HHSC benefit office supervisor and the EBT regional coordinator will perform inquiry in TIERS to ensure that the benefits are recorded in three days.

3. **Documentation Required by this Procedure**

Note: Complete Form H1855, Affidavit for Non receipt or Destroyed Food Stamps, before issuing benefits via the EBT system. The HHSC benefit office supervisor must keep Form H1175, Authorization for Administrative Terminal Action, on file in the office to the appropriate retention period set for in the *Security and Accountability Handbook*.

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Region No.:	Date:	Implemented Date:
Procedure No: 04	Approved:	
Submitted By:	Handbook Reference: 3100	

1. **Title of Procedure:** Completion of Form H1174, Inventory of EBT Cards

2. **Description of Procedure**

The HHSC benefit office supervisor or designated staff will complete Form H1174 by the 10th calendar day of the month, including a physical count, to account for receipt and usage of Lone Star Cards.

The supervisor must keep copies of Form H1174 on file.

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**Appendix III
Procedures Format****Security**

Region No.: Procedure No: 05 Submitted By:	Date: Approved: Handbook Reference: 3100	Implemented Date:
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1. **Title of Procedure:** Working Supply of Cards

2. **Description of Procedure**

Form H1173, EBT Card Issuance and PIN Self-Selection/Issuance Log, should have the PAN entered on the forms via Marco as issued to the clerk in groups of 20 to ensure accuracy and security as they are issued to clients. Clerks can only be issued a group of 20 cards when they have 10 or less in their working daily supply.

Note: Document any exceptions.

3. **Documentation Required by this Procedure**

None. Form H1177, Transmittal and Receipt for Controlled EBT Documents, will reflect this.

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