

## DETAILED MODEL PLAN (LIHEAP)

**Program Name:** Low Income Home Energy Assistance

**Grantee Name:** NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES

**Report Name:** DETAILED MODEL PLAN (LIHEAP) Revision # 1

**Report Period:** 10/01/2024 to 09/30/2025

**Report Status:** Submission Accepted by CO (Revision #1)

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## Mandatory Grant Application SF-424

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

<b>* 1.a. Type of Submission:</b> <input checked="" type="radio"/> Plan	<b>* 1.b. Frequency:</b> <input checked="" type="radio"/> Annual	<b>* 1.c. Consolidated Application/ Plan/Funding Request?</b>  <b>Explanation:</b>	<b>* 1.d. Version:</b> <input checked="" type="radio"/> Initial <input type="radio"/> Resubmission <input type="radio"/> Revision <input type="radio"/> Update
		<b>2. Date Received:</b>	<b>State Use Only:</b>
		<b>3. Applicant Identifier:</b>	
		<b>4a. Unique Entity Identifier (UEI)</b> GSKXYGKGX6A4	<b>5. Date Received By State:</b>
		<b>4b. Federal Award Identifier:</b>	<b>6. State Application Identifier:</b>

**7. APPLICANT INFORMATION**

**\* a. Legal Name:** State of North Dakota

**\* b. Address:**

<b>* Street 1:</b>	600 EAST BOULEVARD AVENUE	<b>Street 2:</b>	DEPARTMENT 325
<b>* City:</b>	BISMARCK	<b>County:</b>	BURLEIGH
<b>* State:</b>	ND	<b>Province:</b>	
<b>* Country:</b>	United States	<b>* Zip / Postal Code:</b>	58505 - 0250

**c. Organizational Unit:**

<b>Department Name:</b> DEPARTMENT OF HUMAN SERVICES	<b>Division Name:</b> ECONOMIC ASSISTANCE POLICY DIVISION
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**d. Name and contact information of person to be contacted on matters involving this application: (person will be listed on Notice of Funding Awards and on the U.S. Department of Health and Human Services' LIHEAP contact list webpage)**

<b>* First Name:</b> Rachel	<b>* Last Name:</b> Schafer
<b>Title:</b> Director of Program Administration	<b>Organizational Affiliation:</b> LIHEAP ADMINISTRATOR
<b>* Telephone Number:</b> 7013285016	<b>Fax Number:</b>
<b>* Email:</b> raischafer@ND.gov	

**\* 8. TYPE OF APPLICANT:**

A: State Government

**\* a. Is the applicant a Tribal Consortium:**  Yes  No

**\* b. If yes please attach at least one the following documentation:**

	<b>Catalog of Federal Domestic Assistance Number:</b>	<b>CFDA Title:</b>
<b>9. CFDA Numbers and Titles</b>	93.568	Low-Income Home Energy Assistance Program

**10. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:**

Low Income Home Energy Assistance Program

**11. AREAS AFFECTED BY FUNDING:**

State of North Dakota

**12. CONGRESSIONAL DISTRICTS OF APPLICANT:**


Statewide

**13. FUNDING PERIOD:**

<b>a. Start Date:</b> 10/01/2024	<b>b. End Date:</b> 09/30/2025
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**\* 14. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?**

a. This submission was made available to the State under Executive Order 12372

<b>Process for review on:</b>	
b. Program is subject to E.O. 12372 but has not been selected by State for review.	
c. Program is not covered by E.O. 12372.	
<b>*15. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?</b>	
<input type="radio"/> YES <input checked="" type="radio"/> NO	
If Yes, explain:	
<b>16. By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)</b> <b>**I Agree</b> <input checked="" type="checkbox"/>	
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.	
<b>17a. Typed or Printed Name and Title of Authorized Certifying Official</b> Rachel Schafer	<b>17c. Telephone (area code, number and extension)</b>
	<b>17d. Email Address</b> raischafer@ND.gov
<b>17b. Signature of Authorized Certifying Official</b> 	<b>17e. Date Report Submitted (Month, Day, Year)</b> 09/30/2024

## Section 1 - Program Components

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN Section 1 - Program Components

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) Use of this model plan is optional. However, the information requested is required in order to receive a Low Income Home Energy Assistance Program (LIHEAP) grant. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

## Section 1 Program Components

Program Components, 2605(a), 2605(b)(1) - Assurance 1, 2605(c)(1)(C)

1.1 Check which components you will operate under the LIHEAP program. (Note: You must provide information for each component designated here as requested elsewhere in this plan.)	Dates of Operation	
	Start Date	End Date
<input checked="" type="checkbox"/> Heating assistance	10/01/2024	05/31/2025
<input checked="" type="checkbox"/> Cooling assistance	10/01/2024	09/30/2025
<input type="checkbox"/> Summer crisis assistance		
<input type="checkbox"/> Winter crisis assistance		
<input checked="" type="checkbox"/> Year-round crisis assistance	10/01/2024	09/30/2025
<input checked="" type="checkbox"/> Weatherization assistance	10/01/2024	09/30/2025

Provide further explanation for the dates of operation, if necessary

North Dakota's regular heating season program runs from October 1 through May 31 each year. Applications for North Dakota's emergency (year-round crisis) program are accepted from October 1 through September 30 of each fiscal year.

The North Dakota State LIHEAP reserves the option to implement a cooling program contingent upon available funding, or in the event of unusual cooling needs due to weather aberrations, or an emergency disaster.

See Section C (Scope of the Program) and Section X (Cooling Assistance Program) of the ND State Plan Attachments document for details.

Estimated Funding Allocation, 2604(C), 2605(k)(1), 2605(b)(9), 2605(b)(16) - Assurances 9 and 16

1.2 Estimate what amount of available LIHEAP funds will be used for each component that you will operate: The total of all percentages must add up to 100%.	Percentage ( % )	Prior year totals
Heating assistance	58.00%	58.00%
Cooling assistance	17.00%	17.00%
Summer crisis assistance	0.00%	10.00%
Winter crisis assistance	0.00%	0.00%
Year-round crisis assistance	10.00%	0.00%
Weatherization assistance	5.00%	5.00%
Carryover to the following federal fiscal year	0.00%	0.00%
Administrative and planning costs	10.00%	10.00%

Services to reduce home energy needs including needs assessment (Assurance 16)	0.00%	0.00%
Used to develop and implement leveraging activities	0.00%	0.00%
<b>TOTAL</b>	<b>100.00%</b>	<b>100.00%</b>

Tribal grant recipients: direct-grant tribes, tribal organizations, or territories with allotments of \$20,000 or less may use for planning and administration up to 20% of the funds payable. Grant recipients that are direct grant tribes, tribal organizations, or territories with allotments over \$20,000 may use for planning and administration purposes up to 20% of the first \$20,000 (or \$4,000) plus 10% of the funds payable that exceeds \$20,000. Any administrative costs in excess of these limits must be paid from non-federal sources.

**1.3 The funds reserved for winter crisis assistance that have not been expended by March 15 will be reprogrammed to:**

<input checked="" type="checkbox"/>	Heating assistance	<input checked="" type="checkbox"/>	Cooling assistance
<input checked="" type="checkbox"/>	Weatherization assistance	<input checked="" type="checkbox"/>	<b>Other (specify):</b> Year-round crisis assistance end date extends beyond the federal winter crisis; crisis percentage includes funds for Furnace Repair and Replacement Program

**Categorical Eligibility, 2605(b)(2)(A) - Assurance 2, 2605(c)(1)(A), 2605(b)(8A) - Assurance 8**

**1.4 Do you consider households categorically eligible if at least one household member receives at least one of the following categories of benefits in the left column below?**  Yes  No

**If you answered "Yes" to question 1.4, you must complete the table below and answer questions 1.5 and 1.6.**

	Heating	Cooling	Crisis	Weatherization
TANF	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
SSI	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
SNAP	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Means-tested Veterans Programs	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

**1.4a. - Provide your definition of categorical eligibility.**

**1.5 Do you automatically enroll households without a direct annual application?**  Yes  No

**If Yes, explain:**

**1.6 How do you ensure there is no difference in the treatment of categorically eligible households from those not receiving other public assistance when determining eligibility and benefit amounts?**

**SNAP Nominal Payments**

**1.7a Do you allocate LIHEAP funds toward a nominal payment for SNAP households?**  Yes  No

**If you answered "Yes" to question 1.7a, you must provide a response to questions 1.7b, 1.7c, and 1.7d.**

**1.7b Amount of Nominal Assistance:** \$0.00

**1.7c Frequency of Assistance**

<input type="checkbox"/>	Once Per Year
<input type="checkbox"/>	Once every five years
<input type="checkbox"/>	Other - Describe: N/A

**1.7d How do you confirm that the household receiving a nominal payment has an energy cost or need?**

N/A

**Determination of Eligibility - Countable Income**

**1.8. In determining a household's income eligibility for LIHEAP, do you use gross income or net income?**

<input checked="" type="checkbox"/>	Gross Income
<input type="checkbox"/>	Net Income
<input type="checkbox"/>	Other - Describe N/A

**1.9. Select all the applicable forms of countable income used to determine a household's income eligibility for LIHEAP**

<input checked="" type="checkbox"/>	Wages
<input type="checkbox"/>	Self - Employment Income

<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	Contract Income
<input checked="" type="checkbox"/>	Payments from mortgage or Sales Contracts
<input checked="" type="checkbox"/>	Unemployment insurance
<input checked="" type="checkbox"/>	Strike Pay
<input checked="" type="checkbox"/>	Social Security Administration (SSA ) benefits
<input type="checkbox"/>	<input type="checkbox"/> Including MediCare deduction
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Excluding MediCare deduction
<input checked="" type="checkbox"/>	Supplemental Security Income (SSI )
<input checked="" type="checkbox"/>	Retirement / pension benefits
<input checked="" type="checkbox"/>	General Assistance benefits
<input checked="" type="checkbox"/>	Temporary Assistance for Needy Families (TANF) benefits
<input type="checkbox"/>	Loans that need to be repaid
<input type="checkbox"/>	Cash gifts
<input type="checkbox"/>	Savings account balance
<input type="checkbox"/>	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.
<input checked="" type="checkbox"/>	Jury duty compensation
<input checked="" type="checkbox"/>	Rental income
<input checked="" type="checkbox"/>	Income from employment through Workforce Investment Act (WIA)
<input type="checkbox"/>	Income from work study programs
<input checked="" type="checkbox"/>	Alimony
<input checked="" type="checkbox"/>	Child support
<input checked="" type="checkbox"/>	Interest, dividends, or royalties
<input checked="" type="checkbox"/>	Commissions
<input checked="" type="checkbox"/>	Legal settlements
<input checked="" type="checkbox"/>	Insurance payments made directly to the insured
<input type="checkbox"/>	Insurance payments made specifically for the repayment of a bill, debt, or estimate
<input checked="" type="checkbox"/>	Veterans Administration (VA) benefits
<input type="checkbox"/>	Earned income of a child under the age of 18
<input type="checkbox"/>	Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.
<input type="checkbox"/>	Income tax refunds

<input type="checkbox"/>	Stipends from senior companion programs, such as VISTA
<input type="checkbox"/>	Funds received by household for the care of a foster child
<input type="checkbox"/>	Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
<input type="checkbox"/>	Reimbursements (for mileage, gas, lodging, meals, etc.)
<input checked="" type="checkbox"/>	<p><b>Other</b></p> <p>In determining a household income eligibility for LIHEAP, an adjusted gross income is used. (Gross income minus allowable deductions).</p> <p>Some of the above categories of income may or may not be counted. For example, Interest on savings and CDs is not counted, however, dividends and interest on investments and trusts are counted when included as part of monthly or regular payment from annuity, pension fund or other retirement plan. One-time inheritance and insurance settlements are excluded as income if they are non-recurring lump-sum payment. Annual payments are considered recurring payments.</p> <p>See:</p> <ol style="list-style-type: none"> <li>1) Section H.1. (Income Eligibility Criteria for Heating Assistance) of the attached ND State Plan Attachments document for list of income inclusions, exclusions, and allowable deductions.</li> <li>2) Section C (Scope of the Program) of the attached ND State Plan Attachments document.</li> <li>3) Countable income, Income Exclusions and Deductions from income lists are attached.</li> </ol>
<b>If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.</b>	
1.10 Do you have an online application process? <input checked="" type="radio"/> Yes <input type="radio"/> No	
1.10a If yes, describe the type of online application (Select all boxes that apply)	
<input checked="" type="checkbox"/>	A PDF version of the application is available online and can be downloaded, filled out and mailed in for processing.
<input checked="" type="checkbox"/>	A state-wide online application that allows a customer to complete data entry and submit an application electronically for processing.
<input type="checkbox"/>	One or more locally available online applications that allows a customer to complete data entry and submit an application electronically for processing.
<input checked="" type="checkbox"/>	Online application that is also mobile friendly
<input type="checkbox"/>	Other, please describe N/A
Please include a link(s) to a statewide application, if available:  <a href="https://dhsbenefits.dhs.nd.gov/SSPPortal/public/?userType=client">https://dhsbenefits.dhs.nd.gov/SSPPortal/public/?userType=client</a>	
1.10b Can all program components be applied for online? <input type="radio"/> Yes <input checked="" type="radio"/> No	
If no, explain which components can and cannot be applied for online.  At this time Emergency/Crisis LIHEAP must be applied for via paper application. However, the intent of the State of North Dakota's LIHEAP program is to add the Emergency/Crisis application to the online portal.	
1.11 Do you have a process for conducting and completing applications by phone? <input type="radio"/> Yes <input checked="" type="radio"/> No	
1.12 Do you or any of your subrecipients require in person appointments in order to apply? <input type="radio"/> Yes <input checked="" type="radio"/> No	
If yes, please provide more information regarding why in-person appointments are required and in what circumstances they are required.  N/A	
1.13 How can applicants submit documentation for verification? Select all that apply:	
<input checked="" type="checkbox"/>	In-person
<input checked="" type="checkbox"/>	Mail
<input checked="" type="checkbox"/>	Email
	Portal application

<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<p><b>Other, please describe</b></p> <p>Documents can be sent through outreach partners such as Community Options who is contracted to support clients who need assistance with completing their application and to provide outreach services for LIHEAP to rural areas.</p>

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**Hidden for Section 1**

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## Section 2 - HEATING ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN Section 2 - Heating Assistance

#### Section 2 - Heating Assistance

**Eligibility, 2605(b)(2) - Assurance 2**

**2.1 Designate the income eligibility threshold used for the heating component:**

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	State Median Income	60.00%

**2.2 Do you have additional eligibility requirements for Heating Assistance?**  Yes  No

**2.3 Check the appropriate boxes below and describe the policies for each.**

**Do you require an Assets test?**  Yes  No

If yes, describe:

N/A

**Do you have additional/differing eligibility policies for:**

**Renters?**  Yes  No

If yes, describe:

N/A

**Renters Living in subsidized housing?**  Yes  No

If yes, describe:

Subsidized Housing: Households that pay rent in a government-subsidized housing project or program and are not directly responsible for home energy costs are considered to be fully protected from the rising cost of heating fuel and are not eligible for LIHEAP. The rental costs for these households are based on a fixed percentage of the household's income and/or other factors and does not increase or decrease when fuel costs increase or decrease. (See Section H (2) of the attached ND State Plan Attachments document for details)

Link to LIHEAP Policy Manual: <http://www.nd.gov/dhs/policymanuals/415/415.htm>

**Renters with utilities included in the rent?**  Yes  No

If yes, describe:

N/A

**Do you give priority in eligibility to:**

**Older Adults (60 years or older)?**  Yes  No

If yes, describe:

Preference is given to high-risk households that are identified when the heating assistance application is received, or a utility or other fuel supplier may refer a household when a serious payment problem is first discovered.

Link to LIHEAP Policy Manual: <http://www.nd.gov/dhs/policymanuals/415/415.htm>

**Individuals with a disability?**  Yes  No

If yes, describe:

Preference is given to high-risk households that are identified when the heating assistance application is received, or a utility or other fuel supplier may refer a household when a serious payment problem is first discovered.

Link to LIHEAP Policy Manual: <http://www.nd.gov/dhs/policymanuals/415/415.htm>

**Young children?**  Yes  No

<b>If yes, describe:</b> <p style="text-align: center;">N/A</p>	
<b>Households with high energy burdens?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>If yes, describe:</b> <p style="text-align: center;">N/A</p>	
<b>Other? N/A</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>If yes, describe:</b> <p style="text-align: center;">N/A</p>	
<b>Explanations of policies for each "yes" checked above:</b> <p style="text-align: center;">N/A</p>	
<b>Determination of Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)</b>	
<b>2.4 Describe how you prioritize the provision of heating assistance to vulnerable populations, e.g., benefit amounts, early application periods, etc.</b> <p>Generally, household are served on a first come-first served basis, however, applications from fixed income households are accepted prior to the official start of the heating season. A mass mailing of applications to fixed income households is completed in September.</p> <p>Early identification and crisis prevention is considered essential for "high risk" households, particularly those with vulnerable members (Elderly, Disabled, Young children). These households may be identified when the heating assistance application is received; or a utility or other fuel supplier may establish appropriate procedures to refer households with a vulnerable member for assistance or when a serious payment problem is first discovered.</p> <p>In addition, outreach activities emphasize reaching those households that include at least one elderly person or person with a disability. Each of the Human Service Zones is also responsible to administer TANF, SNAP, Medicaid, and Title XX and other service programs. Therefore, the Human Service Zones can assure that these programs and energy programs are fully coordinated and are able to refer households with vulnerable members.</p>	
<b>2.5 Check the variables you use to determine your benefit levels. (Check all that apply):</b>	
<input checked="" type="checkbox"/> <b>Income</b>	
<input checked="" type="checkbox"/> <b>Family (household) size</b>	
<input checked="" type="checkbox"/> <b>Home energy cost or need:</b>	
<input checked="" type="checkbox"/> <b>Fuel type</b>	
<input type="checkbox"/> <b>Climate/region</b>	
<input checked="" type="checkbox"/> <b>Individual bill</b>	
<input checked="" type="checkbox"/> <b>Dwelling type</b>	
<input checked="" type="checkbox"/> <b>Energy burden (% of income spent on home energy)</b>	
<input type="checkbox"/> <b>Energy need</b>	
<input checked="" type="checkbox"/> <b>Other - Describe:</b>	
<p style="text-align: center;"><b>LIHEAP Benefit Calculation Explanation</b></p> <p><b>Maximum and Minimum Benefit Share:</b></p> <p>The LIHEAP program in North Dakota is designed to ensure that no eligible household will pay more than 6% of their total income towards heating costs. The LIHEAP Share (LS) will be calculated based on the household's income, size, and the selected primary fuel source. The state will cover the remaining portion of the heating costs. The maximum LIHEAP benefit percentage is 95%, and the minimum LIHEAP Share is 0%.</p> <p><b>Non-Residential Heating Costs:</b></p> <p>For households whose primary heating source is also used for non-residential purposes, a non-residential cap will be calculated. This cap will limit the maximum amount payable by the state towards the heating costs to ensure that payments do not exceed the Estimated Cost of Heat (ECH) multiplied by the household's LIHEAP Share Percentage.</p> <p><b>Monthly Cap and Excess Payment Responsibility:</b></p> <p>If the household's heating costs exceed the calculated LIHEAP share percentage, the excess amount will be covered by the state, ensuring that the household does not pay more than their designated Family Share. The system will track payments monthly, and once the household reaches their cap, the state will assume full responsibility for any additional heating costs incurred for that month.</p> <p><b>Heating Cost Data Collection and Benefit Cap Calculation to Prevent Fraud:</b></p> <p>LIHEAP in North Dakota uses a statewide cost/consumption table to determine a household's estimated heating costs and establish heating assistance benefit percentages. This table is based on actual cost and consumption data reported by fuel suppliers for LIHEAP recipients.</p> <p>To accurately determine the cost of heating a dwelling that includes <b>nonresidential</b> heat the billing data is collected directly from fuel</p>	

suppliers, either electronically or via paper statements. This data accounts for several factors, including fuel consumption, cost of fuel, temperature/heating degree day data, and the efficiency of various fuels and heating systems.

Using billing data from the five most recent federal fiscal years, a distribution of total heating costs is generated, and median values are identified. These values are adjusted based on historical data to estimate heating costs for different building types and sizes.

By establishing benefit caps based on this detailed and historical billing data, LIHEAP ensures that the assistance provided is consistent with actual heating costs, helping to prevent fraud and overpayment.

**Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)**

**2.6 Describe estimated benefit levels for the fiscal year for which this plan applies. Please note: the maximum and minimum benefits must be shown in the payment matrix.**

<b>Minimum Benefit</b>	\$6	<b>Maximum Benefit</b>	\$1,100
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**2.7 Do you provide in-kind (e.g., blankets, space heaters) and/or other forms of benefits?**  Yes  No

**If yes, describe.**

Temporary heating devices and/or other consumer type goods may be provided under the emergency component and through outreach efforts in order to protect household members from a severe loss or lack of home energy and provide awareness about the LIHEAP program.

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**

## Section 3 - COOLING ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN Section 3 - Cooling Assistance

### Section 3 - Cooling Assistance

Eligibility, 2605(c)(1)(A), 2605 (b)(2) - Assurance 2

**3.1 Designate The income eligibility threshold used for the Cooling component:**

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	State Median Income	60.00%

**3.2 Do you have additional eligibility requirements for Cooling assistance?**  Yes  No

**3.3 Check the appropriate boxes below and describe the policies for each.**

**Do you require an Assets test?**  Yes  No

**If yes, describe:**

The North Dakota State LIHEAP reserves the option to implement a cooling program contingent upon available funding, or in the event of unusual cooling needs due to weather aberrations or an emergency disaster.

This component may implement any or all of the following cooling components, depending upon the nature of the cooling need or the amount of funding available.

- 1) Direct payments to LIHEAP households or vendors for cooling costs incurred throughout the year.
- 2) Purchase and installation of approved cooling devices for households with income eligibility for LIHEAP.

Cooling Device Component

The cooling device component will allow for the purchase and installation of approved cooling devices or the repair of existing cooling devices for households with income eligibility for LIHEAP.

Households who have not been approved for LIHEAP during the regular heating season (October -May) will need to complete a regular heating assistance application to establish that the income of the household is within the guidelines allowed under the Heating Assistance component, as described in Section H, 1 of the ND State Plan Attachments Document. An emergency application is NOT required for the cooling device component.

Since the assistance is for cooling devices, the applicant does not need to have responsibility to pay a heating or cooling bill. Therefore, households who are not eligible under the Heating Assistance component, as described in Section H, 2, of the state plan may be eligible for purchase of cooling devices under this cooling component.

**Do you have additional/differing eligibility policies for:**

**Renters?**  Yes  No

**If yes, describe:**

N/A

**Renters Living in subsidized housing?**  Yes  No

**If yes, describe:**

N/A

**Renters with utilities included in the rent?**  Yes  No

**If yes, describe:**

N/A	
<b>Do you give priority in eligibility to:</b>	
<b>Older Adults (60 years or older)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>If yes, describe:</b>	
<p>Preference is given to high-risk households that are identified when the cooling assistance application is received, or a utility or other fuel supplier may refer a household when a serious payment problem is first discovered.</p> <p>Link to LIHEAP Policy Manual: <a href="http://www.nd.gov/dhs/policymanuals/415/415.htm">http://www.nd.gov/dhs/policymanuals/415/415.htm</a></p>	
<b>Individuals with a disability?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>If yes, describe:</b>	
<p>Preference is given to high-risk households that are identified when the cooling assistance application is received, or a utility or other fuel supplier may refer a household when a serious payment problem is first discovered.</p> <p>Link to LIHEAP Policy Manual: <a href="http://www.nd.gov/dhs/policymanuals/415/415.htm">http://www.nd.gov/dhs/policymanuals/415/415.htm</a></p>	
<b>Young children?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>If yes, describe:</b>	
N/A	
<b>Households with high energy burdens?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>If yes, describe:</b>	
N/A	
<b>Other? N/A</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>If yes, describe:</b>	
N/A	
<b>Explanations of policies for each "yes" checked above:</b>	
N/A	
<b>3.4 Describe how you prioritize the provision of cooling assistance to vulnerable populations, e.g., benefit amounts, early application periods, etc.</b>	
<p>Income eligibility is the only requirement for the cooling device component, therefore all households approved for heating assistance qualify for the cooling device component and priority is based on household's request/need for the services.</p> <p>If direct payments are issued as part of this component, all established LIHEAP households who are responsible for their electric utility costs and who were on heating through May will automatically qualify for the assistance if their electric utility vendor information can be verified.</p> <p>Direct payments on behalf of households who were not on LIHEAP during the regular heating season, would require an approved LIHEAP application.</p>	
<b>Determination of Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)</b>	
<b>3.5 Check the variables you use to determine your benefit levels. (Check all that apply):</b>	
<input checked="" type="checkbox"/> Income	
<input checked="" type="checkbox"/> Family (household) size	
<input checked="" type="checkbox"/> Home energy cost or need:	
<input checked="" type="checkbox"/> Fuel type	
<input type="checkbox"/> Climate/region	
<input type="checkbox"/> Individual bill	
<input checked="" type="checkbox"/> Dwelling type	
<input checked="" type="checkbox"/> Energy burden (% of income spent on home energy)	
<input type="checkbox"/> Energy need	
<input checked="" type="checkbox"/> Other - Describe:	

The income of the household must be within the guidelines allowed under the Heating Assistance component, as described in Section H, 1 of the ND State Plan Attachments Document. (Also see Section X of the ND State Plan Attachments document for details).

North Dakota does not have a cooling benefit matrix. We do not issue benefits based on a flat benefit amount from a matrix. The cooling device program is part of the furnace repair/replacement contract with the Department of Commerce who, in turn, subcontracts with the Community Action Agencies to perform the services. The cooling device component of the cooling program is comprised entirely of AC installations, repairs/replacement of existing unit/system, or for the purchase of fans and NOT for payment of electric bills.

If supplemental direct payments are issued, the amount and frequency of the payment(s) will be based on the LIHEAP share that was established for heating, solicited from the vendor, or obtained from available electricity cost reports.

**Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)**

**3.6 Describe estimated benefit levels for the fiscal year for which this plan applies. Please note: the maximum and minimum benefits must be shown in the payment matrix.**

<b>Minimum Benefit</b>	\$1	<b>Maximum Benefit</b>	\$1,000
------------------------	-----	------------------------	---------

**3.7 Do you provide in-kind (e.g., fans, air conditioners) and/or other forms of benefits?**  Yes  No

**If yes, describe.**

The cooling device component of the cooling program does not pay a household's cooling costs. Instead, a LIHEAP-eligible household may qualify for a cooling device (an air conditioner or a fan, as the need dictates) or repair on an existing cooling device. The household need not be responsible for paying heating costs so tenants in subsidized housing may qualify.

The income of the household must be within the guidelines allowed under the Heating Assistance component, as described in Section H, 1 of the ND State Plan Attachments Document.

NOTE re MAXIMUM BENEFIT: There is no maximum amount that can be spent on an air conditioner except in the case of installing a central air unit where there was not one previously existing (\$1,000.00). However, this requirement can be waived under special circumstances with State Office approval.

See DOC Residential Cooling Program FY2023 document attached.

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**

## Section 4 - CRISIS ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN Section 4 - Crisis Assistance

#### Section 4: CRISIS ASSISTANCE

**Eligibility - 2604(c), 2605(c)(1)(A)**

**4.1 Designate the income eligibility threshold used for the crisis component**

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	State Median Income	60.00%

**4.2 Provide your LIHEAP program's definition for determining a crisis.**

**If you administer multiple crisis assistance programs (winter, summer, and/or year-round), Include all program definitions.**

See Section E of the ND State Plan Attachments document for details:

Energy Crisis: This term means weather-related and supply shortage emergencies and other household energy-related emergencies

**4.3 What constitutes a life-threatening crisis?**

See Section E of the ND State Plan Attachments document for details:

Life-Threatening Energy Crisis: This term refers to an energy-related crisis that poses a serious threat to the health and safety of one or more members of the household.

**Crisis Requirement, 2604(c)**

**4.4 Within how many hours do you provide an intervention that will resolve the energy crisis for eligible households? 48Hours**

**4.5 Within how many hours do you provide an intervention that will resolve the energy crisis for eligible households in life-threatening situations? 18Hours**

**Crisis Eligibility, 2605(c)(1)(A)**

	Winter Crisis	Summer Crisis	Year-Round Crisis
<b>4.6 Do you have additional eligibility requirements for Crisis Assistance?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**4.7 Check the appropriate boxes below to indicate type(s) of assistance provided**

0

	Winter Crisis	Summer Crisis	Year-Round Crisis
<b>Do you require an Assets test?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Do you give priority in eligibility to:</b>			
Older Adults (60 years or older)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Individuals with a disability?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Young Children?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Households with high energy burdens?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Specify): N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**In Order to receive crisis assistance:**

Must the household have received a shut-off notice or have a near empty tank?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Must the household have been shut off or have an empty tank?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Must the household have exhausted their regular heating benefit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Must renters with heating costs included in their rent have received an eviction notice?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Must heating/cooling be medically necessary?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Must the household have non-working heating or cooling equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Specify): Any of the circumstances listed above.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Do you have additional/differing eligibility policies for:</b>			
Renters?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Renters living in subsidized housing?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Renters with utilities included in the rent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Explanations of policies for each "yes" checked above:</b>			
Renters living in subsidized housing and are not responsible for paying their heat do not qualify for emergency assistance.			
<b>Determination of Benefits</b>			
<b>4.8 How do you handle crisis situations?</b>			
<input checked="" type="checkbox"/>	Separate component		
<input type="checkbox"/>	Benefit Fast Track, no separate amount of crisis funds is issued. Rather benefits are issued to crisis customers within crisis response time frames.		
<input type="checkbox"/>	Other - Describe: N/A		
<b>4.9 If you have a separate component, how do you determine crisis assistance benefits?</b>			
<input checked="" type="checkbox"/>	Amount to resolve the crisis. \$0		
<input type="checkbox"/>	Other - Describe: N/A		
<b>Crisis Requirements, 2604(c)</b>			
<b>4.10 Do you accept applications for energy crisis assistance at sites that are geographically accessible to all households in the area to be served?</b>			
<input checked="" type="radio"/> Yes <input type="radio"/> No Explain.			
<p>Applications are available at all Zone offices. Emergency procedures include home visits when necessary, counseling, referrals, communication with suppliers, or other services and a 24-hour telephone number for requesting aid or reporting a crisis. Outreach activities assure that potentially eligible households are informed of the heating assistance and emergency assistance components of the program and have the opportunity to submit an application. Aging service area coordinators and the North Dakota Council of Community Action Agency Directors, representing the seven (7) regional community action agencies, have agreed to continue to provide outreach and intake function for LIHEAP heating assistance and crisis situations. Additionally, customers in crisis can reach out to local sheriff's offices for immediate and urgent support.</p> <p>In addition, the Department contracted with Community Options to provide outreach services which includes information to potential clients or current clients, providing applications, assist completing applications and obtaining required verifications.</p>			
<b>4.11 Do you provide individuals who are individuals with a disability the means to:</b>			
<b>Submit applications for crisis benefits without leaving their homes?</b>			
<input checked="" type="radio"/> Yes <input type="radio"/> No			
If No, explain.			
N/A			
<b>Travel to the sites at which applications for crisis assistance are accepted?</b>			
<input checked="" type="radio"/> Yes <input type="radio"/> No			
If No, explain.			
N/A			
If you answered "No" to both options in question 4.11, please explain alternative means of intake to those who are homebound or physically disabled?			
N/A			
<b>Benefit Levels, 2605(c)(1)(B)</b>			
<b>4.12 Indicate the maximum benefit for each type of crisis assistance offered.</b>			
Winter Crisis	\$0.00 maximum benefit		



<b>Summer Crisis</b>	\$0.00 maximum benefit	
<b>Year-round Crisis</b>	\$500.00 maximum benefit	

**4.13 Do you provide in-kind (e.g. blankets, space heaters, fans) and/or other forms of benefits?**

Yes  No **If yes, Describe**

Emergency assistance can provide assistance for the following:

1. Supplemental heating assistance, including unavoidable mandatory finance and other incidental charges, for households that are financially unable to pay all of the family share of a heat bill. The emergency assistance component may be used to justify re-computing the basic heating assistance benefit level if the financial shortage is expected to be long-term, or it may be used to pay the amount needed to resolve the current crisis, or a combination of both options. An eligible household may receive up to \$500.00 per season for heating costs (including re-connection charges). SEE EMERGENCY DISASTER RESPONSE BELOW FOR EXCEPTION. if the household is financially unable to contribute all or part of their co-payment percentage to the purchase of the fuel. Amounts in excess of the seasonal maximum must be approved by the state office. (See policy sections below)
  
1. Repair or replacement, whichever is appropriate and cost effective, of a defective, inoperable, unsafe, or inefficient heating system or water heater for an eligible homeowner or an eligible renter with verifiable responsibility for such costs may be provided, depending on the availability of funds, weatherization or other resources, expected payback, and other related factors. The heating system includes chimney, air ducts, burners, tanks, pipes and all other components necessary to produce heat safely and efficiently. (No maximum for this portion of crisis assistance and includes the cost of equipment and replacement of heating system or parts.)
  
1. Minor home repairs or replacement components (excludes additions) to prevent the loss of home energy in the living unit of an eligible homeowner or a renter with verifiable responsibility for such costs. (up to \$400/season)
  
1. Temporary shelter, temporary heating or cooling devices and/or other consumer type goods that may be needed to protect household members from a severe loss or lack of home energy. (Up to \$100.00/season).
  
1. The state may delegate some or all of the responsibility for delivering the services described in 2, 3 and 4 above by administrative agreement with the Division of Community Services.
  
1. The costs necessary to prevent the loss of or to restore electrical service for an eligible household. (See Section N of the ND State Plan attachments document)

Supporting policy for #1:

Supplemental Fuel 415-50-05-05

An eligible household may receive up to \$500.00 per season for heating costs (including re-connection charges) if the household is financially unable to contribute all or part of their co-payment percentage to the purchase of the fuel. (For exceptions, see 415-50-15)

Exception to Limitation for Emergency Services 415-50-15

-

Whenever an eligible household has an emergency fuel assistance need that exceeds the county maximum, the state approval should be requested. Very few requests for exceptions are expected inasmuch as community negotiations and individual households plans should usually restrict emergency assistance to the specified limits.

**Emergency Disaster Responses**

Additional enhancements to the LIHEAP emergency program may be implemented in the event of state or federal disaster declarations or other emergencies as determined by the department.

To streamline the emergency process and ensure an effective and timely response to disaster-type emergencies, any or all of the following changes may be implemented as part of an emergency disaster response:

1. Telephonic emergency applications with a verbal signature will be allowed. Worker must indicate applicant's name and notate "Verbal Signature" in the applicant signature line of the emergency application.
2. Client statement will be allowed as an acceptable source of verification of income and expenses on the emergency application if currently acceptable sources of verification are not readily available. Worker must be sure to document the verification source used.
3. The seasonal maximum amount for supplemental fuel may be increased to accommodate the emergency. State office approval should be obtained for amounts that exceed the maximum amount.
4. If additional funding is available to the program, a temporary disaster assistance program may be considered. The temporary program may include but is not limited to:
  - 1) Extension of the heating season,
  - 2) Additional assistance with heating costs,
  - 3) Assistance with non-heating electric utility costs, or
  - 4) A combination of the above options

**4.14 Do you provide for equipment repair or replacement using crisis funds?**

Yes  No

If you answered "Yes" to question 4.14, you must complete question 4.15.

**4.15 Check appropriate boxes below to indicate type(s) of assistance provided.**

	Winter Crisis	Summer Crisis	Year-round Crisis
Heating system repair	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Heating system replacement	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Cooling system repair	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Cooling system replacement	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Wood stove purchase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pellet stove purchase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solar panel(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utility poles / gas line hook-ups	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other (Specify): N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**4.16 Do any of the utility vendors you work with enforce a moratorium on shut offs?**

Yes  No

If you responded "Yes" to question 4.16, you must respond to question 4.17.

**4.17 Describe the terms of the moratorium and any special dispensation received by LIHEAP clients during or after the moratorium period.**

Investor-owned utilities (there are four in the state) must follow the attached Public Service Commission disconnect rules.

**4.18 If you experience a natural disaster, do you intend to utilize LIHEAP crisis funds to address disaster related crisis situations?**  Yes  No

If yes, describe

Emergency Disaster Responses

Additional enhancements to the LIHEAP emergency program may be implemented in the event of state or federal disaster declarations or other emergencies as determined by the department.

To streamline the emergency process and ensure an effective and timely response to disaster-type emergencies, any or all of the following changes may be implemented as part of an emergency disaster response:

1. Telephonic emergency applications with a verbal signature will be allowed. Worker must indicate applicant's name and notate

“Verbal Signature” in the applicant signature line of the emergency application.

2. Client statement will be allowed as an acceptable source of verification of income and expenses on the emergency application if currently acceptable sources of verification are not readily available. Worker must be sure to document the verification source used.

3. The seasonal maximum amount for supplemental fuel may be increased to accommodate the emergency. State office approval should be obtained for amounts that exceed the maximum amount.

4. If additional funding is available to the program, a temporary disaster assistance program may be considered. The temporary program may include but is not limited to:

- 1) Extension of the heating season,
- 2) Additional assistance with heating costs,
- 3) Assistance with non-heating electric utility costs, or
- 4) A combination of the above options

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**

## Section 5 - WEATHERIZATION ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN Section 5 - Weatherization Assistance

#### Section 5: WEATHERIZATION ASSISTANCE

Eligibility, 2605(c)(1)(A), 2605(b)(2) - Assurance 2

5.1 Designate the income eligibility threshold used for the Weatherization component

Add	Household Size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	State Median Income	60.00%

5.2 Do you enter into an interagency agreement to have another government agency administer a WEATHERIZATION component?  Yes  No

5.3 If yes, name the agency and attach a copy of the Internal Agreement or Contract. North Dakota Department of Commerce

5.4 Is there a separate monitoring protocol for weatherization?  Yes  No

#### WEATHERIZATION - Types of Rules

5.5 Under what rules do you administer LIHEAP weatherization? (Check only one.)

- Entirely under LIHEAP (not DOE) rules
- Entirely under DOE WAP (not LIHEAP) rules
- Mostly under LIHEAP rules with the following DOE WAP rule(s) where LIHEAP and WAP rules differ (Check all that apply):
  - Income Threshold
  - Weatherization of entire multi-family housing structure is permitted if at least 66% of units (50% in 2- & 4-unit buildings) are eligible units or will become eligible within 180 days
  - Weatherize shelters temporarily housing primarily low income persons (excluding nursing homes, prisons, and similar institutional care facilities).
  - Other - Describe:
- Mostly under DOE WAP rules, with the following LIHEAP rule(s) where LIHEAP and WAP rules differ (Check all that apply.)
  - Income Threshold
  - Weatherization not subject to DOE WAP maximum statewide average cost per dwelling unit.
  - Weatherization measures are not subject to DOE Savings to Investment Ratio (SIR ) standards.
  - Other - Describe:

Income eligibility for LIHEAP is a pre-requisite for weatherization services.

DOC weatherization does not require ASHRAE 62.2 compliance.

DOC weatherization does not require Quality Control Certified Inspections.

DOC weatherization does not follow the 15-year requirement for re-weatherization.

DOC weatherization does not replace refrigerators in rental properties

We allow omission of some measures if there are documented reasons for NOT doing them, such as a health and safety issue.

Average Cost Per Unit is \$10,000.00 and Health and Safety Limit is 20%.

Beginning in FY2020, a combination of Department of Energy (DOE) funds and LIHEAP funds may be used on an LIHEAP-eligible household's home in order to maintain average cost (per funding source) at a consistent, acceptable level. Federal reporting will count only those LIHEAP households for which LIHEAP funds were expended and, likewise, will only report LIHEAP dollars spent. DOE funds expended will not be included in LIHEAP reporting.

DOE rules will be followed if a combination of funds are used to weatherize a LIHEAP household

**Eligibility, 2605(b)(5) - Assurance 5**

<b>5.6 Do you require an assets test?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>5.7 Do you have additional/differing eligibility policies for :</b>	
<b>Renters</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>Renters living in subsidized housing?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>Renters with utilities included in the rent?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>5.8 Do you give priority in eligibility to:</b>	
<b>Older Adults?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Individuals with a disability?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Young Children?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>House holds with high energy burdens?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Other?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No

If you selected "Yes" for any of the options in questions 5.6, 5.7, or 5.8, you must provide further explanation of these policies in the text field below.

Income eligibility for LIHEAP is a pre-requisite for weatherization services.

All heating assistance households will automatically be referred for energy conservation (weatherization) services. The Department of Commerce/Community Action Agencies receive a monthly referral list of LIHEAP approved applicants so they can verify LIHEAP eligibility for households who inquire about weatherization services or so they may contact households who are eligible for weatherization services.

Discussion with applicants who live in poor quality housing, that have high-energy usage, or who are demonstrating a pattern of reliance on Energy Assistance should focus on the benefits of conservation services.

1. Energy conservation will stretch LIHEAP dollars.
2. The amount of money required for heating from the applicant's own pocket is reduced.
3. The conservation and weatherization services will continue to reduce energy costs, so even if the applicant is not eligible for LIHEAP, the out-of-pocket costs will be lower.
4. Their home will be more comfortable with fewer drafts and cold spots.

The long-term advantage of taking the extra time to encourage participation in conservation services now is that program expenditures will be reduced, allowing more people to be served and reducing the chances that benefit levels will have to be decreased.

North Dakota contracts with the Department of Commerce for weatherization services who in turn contracts with Community Action agencies. The Community Action agencies receive written approval from a landlord for weatherization work before any work is started for eligibility LIHEAP households who reside in subsidized housing. The following further defines subsidized housing:

- Renters of units in some governmental subsidized housing (including HAP renter/heat paid clients) are not directly responsible for heating costs. The rental costs for these households are based on a fixed percentage of the household's income and other factors. Their rental costs do not increase when heating costs increase; therefore, these households are not eligible for heating assistance from LIHEAP.
- Those renters in governmental subsidized housing who are responsible for part or all of their heating costs may be eligible for LIHEAP benefits. Their eligibility and benefit level is determined in the same manner as other LIHEAP households.

See Section M (3) and Section O of the ND State Plan attachments document.

In rental situations, permission is obtained from the property owner in the form of an agreement that is signed by the landlord. See Department of Commerce Weatherization Policy and Procedures, Section 700 covering rentals. Specific section is 700.22

**Benefit Levels**

5.9 Do you have a maximum LIHEAP weatherization benefit/expenditure per household?  Yes  No

5.9a If yes, what is the maximum? \$0

5.10 Do you use an Average Cost per Unit (ACPU).  Yes  No

5.10a If so, what is the ACPU amount? \$0

**Types of Assistance, 2605(c)(1), (B) & (D)**

5.11 What LIHEAP weatherization measures do you provide ? (Check all categories that apply.)

<input checked="" type="checkbox"/> Weatherization needs assessments/audits	<input checked="" type="checkbox"/> Energy related roof repair
<input checked="" type="checkbox"/> Caulking and insulation	<input type="checkbox"/> Major appliance repairs
<input checked="" type="checkbox"/> Storm windows	<input checked="" type="checkbox"/> Major appliance replacement
<input checked="" type="checkbox"/> Furnace/heating system modifications/repairs	<input checked="" type="checkbox"/> Windows/sliding glass doors
<input checked="" type="checkbox"/> Furnace replacement	<input checked="" type="checkbox"/> Doors
<input checked="" type="checkbox"/> Cooling system modifications/repairs	<input checked="" type="checkbox"/> Water Heater
<input type="checkbox"/> Water conservation measures	<input checked="" type="checkbox"/> Cooling system replacement
<input type="checkbox"/> Roof top solar	<input type="checkbox"/> Community solar projects
<input type="checkbox"/> Compact florescent light bulbs	<input checked="" type="checkbox"/> <b>Other - Describe:</b> If weatherization expenditures are above \$8,000 per household, state approval must be obtained. LED Bulbs are used instead of compact florescent light bulbs

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**

**Section 6 - Outreach, 2605(b)(3) - Assurance 3, 2605(c)(3)(A)**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
MODEL PLAN  
Section 6 - Outreach**

**Section 6: Outreach, 2605(b)(3) - Assurance 3, 2605(c)(3)(A)**

6.1 Select all outreach activities that you conduct that are designed to assure that eligible households are made aware of all LIHEAP assistance available:

Place posters/flyers in local and county social service offices, offices of aging, Social Security offices, VA, etc.

Publish articles in local newspapers or broadcast media announcements.

Include inserts in energy vendor billings to inform individuals of the availability of all types of LIHEAP assistance.

Mass mailing(s) to prior-year LIHEAP recipients.

Inform low income applicants of the availability of all types of LIHEAP assistance at application intake for other low-income programs.

Execute interagency agreements with other low-income program offices to perform outreach to target groups.

Web Posting

Email

Texting

Events

Social Media

Other (specify):

The state issues press releases regarding LIHEAP.

Human service zone offices and alternate outreach organizations distribute heating assistance application forms to all individuals upon request, and provide such application forms to fuel suppliers, Community Action Agencies, senior citizen centers or any other individuals or organizations that are willing to distribute the form to potentially eligible households.

Community Options Outreach

The Department contracts with Community Options to provide outreach services with a focus on elderly and people with disabilities.

Community Options Specialists participates in local events at Senior Centers, businesses and organizations to give marketing presentations for LIHEAP and provide information and education about the program by placing flyers/door hangers in local communities statewide. They also attend various conferences around the state and conduct outreach activities via booth presentations.

In addition, they provide applications to interested clients, assist clients with completing applications and obtaining the required verifications, assist counties in obtaining necessary verifications for eligibility, and conduct home visits to home-bound individuals to assist with the application process.

All activities are coordinated with Human Service Zone office and the community action agencies to ensure that there is no duplication of services.

LIHEAP applications are also sent to all fixed income households from the prior year via mass-mailing in September.

In FY2023 (through 6/30/2023) LIHEAP Outreach Specialists from across the state turned in 607 LIHEAP applications:

- 385 Approved for LIHEAP
- 134 Denied
- Withdrawn
- 1 Closed ineligible
- 0 Pending
- 85 N/A - Not found in system

Total 607

Marketing

The state will implement a marketing campaign via a third-party vendor. The marketing efforts will focus on promoting the LIHEAP program to our target populations (individuals with young children, older adults, and individuals with disabilities).

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**



**Section 7 - Coordination, 2605(b)(4) - Assurance 4**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
MODEL PLAN  
Section 7 - Coordination**

**Section 7: Coordination, 2605(b)(4) - Assurance 4**

7.1 Describe how you will ensure that the LIHEAP program is coordinated with other programs available to low-income households (TANF, SSI, WAP, etc).

<input checked="" type="checkbox"/>	Joint application for multiple programs (indicate programs included) TANF, SNAP, CCAP, HHC, Title XX
<input checked="" type="checkbox"/>	Intake referrals to/from other programs (indicate programs included) TANF, SNAP, CCAP, HHC, Title XX
<input checked="" type="checkbox"/>	One - stop intake centers
<input checked="" type="checkbox"/>	Other - Describe:

Each of the human service zone offices are responsible for administering TANF, SNAP, Medicaid, Child Care Assistance Program and Title XX and other service programs. Therefore, the human service zone offices can assure that these programs and energy programs are fully coordinated.

See Section M of the ND State Plan attachments document.

LIHEAP is part of an integrated eligibility system called SPACES that determines eligibility for LIHEAP, Child Care Assistance (CCAP), Medicaid, SNAP, and TANF. SPACES allows applicants to jointly apply for all programs that are part of SPACES.

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**

**Section 8 - Agency Designation,, 2605(b)(6) - Assurance 6**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
MODEL PLAN  
Section 8 - Agency Designation**

**Section 8: Agency Designation, 2605(b)(6) - Assurance 6 (Required for state Grant recipients and the Commonwealth of Puerto Rico)**

**8.1 How would you categorize the primary responsibility of your State agency?**

<input checked="" type="checkbox"/>	Administration Agency
<input type="checkbox"/>	Commerce Agency
<input type="checkbox"/>	Community Services Agency
<input type="checkbox"/>	Energy/Environment Agency
<input type="checkbox"/>	Housing Agency
<input type="checkbox"/>	State Department of Welfare (administers TANF, SNAP, and/or Medicaid)
<input type="checkbox"/>	Economic Development Agency
<input type="checkbox"/>	Other - Describe:

**Include current list of subrecipient name, main office address (do not list P.O. Box), phone number, county(s) served, Congressional District, and UEI number. Used for Near hotline and OCS Service Provider Tool and clearinghouse.**

**Alternate Outreach and Intake, 2605(b)(15) - Assurance 15**

**If you selected "State Department of Welfare (administers TANF, SNAP, and/or Medicaid)" in question 8.1, you must complete questions 8.2, 8.3, and 8.4, as applicable.**

**8.2 How do you provide alternate outreach and intake for heating assistance?**

The North Dakota Council of Community Action Agency Directors, representing the seven (7) regional community action agencies, have a continue to provide outreach and intake function for LIHEAP heating assistance and crisis situations. In addition, the Department has contracted with Options to conduct statewide outreach services.

The North Dakota Department of Health and Human Services, Aging Services Division, as the statewide agency for Aging Services employ managers that work in communities across North Dakota. The HCBS case managers will continue to provide outreach and intake functions for LIHEAP assistance and crisis situations.

The North Dakota LIHEAP has agreed to provide appropriate staff training, administrative forms and printed information to the regional community action agencies and the state HCBS case managers.

The outreach function and the intake function assigned to these alternate sites are defined in Section E of the ND State Plan attachments do

Intake Function: Intake is defined as the beginning formal contact(s) with a potential applicant to provide program information and explain the application process. The department provides the application form with instructions for completion and submission.

Outreach Function: This term is similar to the general outreach activities and processes described in Section G except that special service activities are not included. To assure that all households are aware of the program and the application process, the outreach function takes advantage of all available opportunities to publicize the LIHEAP through a variety of publicity methods including, but not limited to, the public media, meetings and presentations, and brochures.

The Department also contracts with Community Options Inc. to provide outreach services with a focus on elderly and disabled people.

**Outreach – Marketing**

-

The state will use LIHEAP funds to implement a marketing campaign via a third-party vendor. The marketing efforts will focus on promoting the program and the emergency furnace repair and replacement and cooling efforts.

See Section B (2) of State Plan of Operations attached.

**8.3 How do you provide alternate outreach and intake for cooling assistance?>**

See Section B (2) of the ND State Plan attachments document: See 8.2 above.

**8.4 How do you provide alternate outreach and intake for crisis assistance?**

See Section B (2) of the ND State Plan attachments document: See 8.2 above.

<b>8.5 LIHEAP Component Administration.</b>	<b>Heating</b>	<b>Cooling</b>	<b>Crisis</b>	<b>Weatherization</b>
<b>8.5a Who determines client eligibility?</b>	Local County Government	Local County Government Community Action Agencies	Local County Government	Local County Government
<b>8.5b Who processes benefit payments to gas and electric vendors?</b>	Local County Government Other	Non-Applicable	Local County Government	
<b>8.5c who processes benefit payments to bulk fuel vendors?</b>	Local County Government Other	Non-Applicable	Local County Government	
<b>8.5d Who performs installation of weatherization measures?</b>				Community Action Agencies

**Include a current list of subrecipient(s) name, main office address (do not list P.O. Box), phone number, county(s) served, Congressional District, and UEI number.**

**If any of your LIHEAP components are not centrally-administered by a state agency, you must complete questions 8.6, 8.7, 8.8, and, if applicable, 8.9.**

**8.6 What is your process for selecting local administering agencies?**

53 Counties (51 county offices) organized into 19 Human Service Zones

By North Dakota Century Code, North Dakota is a state supervised, county administered program.

Section Powers and duties of the department - 8. states, "To act as the official agency of the state in the administration of the home energy assistance program; to direct and supervise human service zone administration of that program; and to take such actions, give such directions, and adopt such rules as may be necessary or desirable to carry out this subsection. For purposes of the administration of the energy assistance program, funds are obligated at the earlier of the time a written commitment is made to pay a vendor or contractor for services or supplies delivered, or at the time payment is made to a vendor or contractor for services or supplies delivered or to be delivered. The provisions of this subsection concerning obligation of funds apply to payments and commitments made on or after July 1, 1991. The department with the consent of the legislative assembly may terminate the program if the rate of federal financial participation in administrative costs decreased or limited to less than fifty percent of total administrative costs, or if the state or counties become financially responsible for all or a portion of energy assistance program benefits. Any request considered by the budget section must comply with section 54-35-02.9"

CAAs (7):

The Department of Commerce utilizes the following process in accordance with 10 CFR 440:

§440.15 Subgrantees.

(a) The grantee shall ensure that:

(1) Each subgrantee is a CAA or other public or nonprofit entity;

(2) Each subgrantee is selected on the basis of public comment received during a public hearing conducted pursuant to §440.14(a) and other findings regarding:

(i) The subgrantee's experience and performance in weatherization or housing renovation activities;

(ii) The subgrantee's experience in assisting low-income persons in the area to be served; and

(iii) The subgrantee's capacity to undertake a timely and effective weatherization program.

(3) In selecting a subgrantee, preference is given to any CAA or other public or nonprofit entity which has, or is currently administering, an program under this part or under title II of the Economic Opportunity Act of 1964, with program effectiveness evaluated by consideration of factors not necessarily limited to, the following:

(i) The extent to which the past or current program achieved or is achieving weatherization goals in a timely fashion;

(ii) The quality of work performed by the subgrantee;

(iii) The number, qualifications, and experience of the staff members of the subgrantee; and

(iv) The ability of the subgrantee to secure volunteers, training participants, public service employment workers, and other Federal or State programs.

(b) The grantee shall ensure that the funds received under this part will be allocated to the entities selected in accordance with paragraph (a) section, such that funds will be allocated to areas on the basis of the relative need for a weatherization project by low-income persons.

(c) If DOE finds that a subgrantee selected to undertake weatherization activities under this part has failed to comply substantially with the Act or this part and should be replaced, such finding shall be treated as a finding under §440.30(i) for purposes of §440.30.

(d) Any new or additional subgrantee shall be selected at a hearing in accordance with §440.14(a) and upon the basis of the criteria in paragraph section.

(e) A State may terminate financial assistance under a subgrant agreement for a grant period only in accordance with established State procedure provide to the subgrantee appropriate notice of the State's reasons for termination and afford the subgrantee an adequate opportunity to be heard.

8.7 How many local administering agencies do you use? 19

8.8 Have you changed any local administering agencies in the last year?

- Yes  
 No

8.9 If so, why?

<input type="checkbox"/>	Agency was in noncompliance with Grant recipient requirements for LIHEAP -
<input type="checkbox"/>	Agency is under criminal investigation
<input type="checkbox"/>	Added agency
<input type="checkbox"/>	Agency closed
<input type="checkbox"/>	Other - describe

8.10 If a subrecipient is no longer providing LIHEAP, are you aware of prior-year LIHEAP funds being mismanaged or misspent?  Yes  
 No

8.10a If yes, please explain.

8.10b If you are aware, were other federal programs impacted such as CSBG, SSBG, Head Start, TANF, and Department of Energy Weatherization funding, etc.  Yes  No

8.10c If yes, please explain.

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**



**Section 9 - Energy Suppliers,, 2605(b)(7) - Assurance 7**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
MODEL PLAN  
Section 9 - Energy Suppliers**

**Section 9: Energy Suppliers, 2605(b)(7) - Assurance 7**

**9.1 Do you make payments directly to home energy suppliers?**

Heating  Yes  No

Cooling  Yes  No

Crisis  Yes  No

Are there exceptions?  Yes  No

**If yes, Describe.**

Generally, payment is issued directly to the vendor for fuel costs incurred during a client's eligibility period. If, however, the fuel costs have been paid in full by the client, payment may be issued to the client.

Renters whose heating costs are included as an undesignated portion of their rent payment will receive LIHEAP payments directly.

In unusual circumstance, third party payments may be issued (Ex: landlord who refuses to have the tenant's name on the vendor's account).

See Section K (Supplier Agreements) of the ND State Plan attachments document.

**9.2 How do you notify the client of the amount of assistance paid?**

A notice detailing specific payments to be made is sent to the household (and supplier when appropriate) whenever miscellaneous, emergency, or premium payments are entered into the eligibility system by Human Service Zone or state office workers.

Human Service Zone eligibility workers have 45 days to process an application. Upon entry of the households' information into the eligibility system, notice is sent to the household informing them of benefit details.

See Section L (4) of the ND State Plan attachments document.

**9.3 How do you assure that the home energy supplier will charge the eligible household, in the normal billing process, the difference between the actual cost of the home energy and the amount of the payment?**

The fuel supplier will be required to sign a standard agreement statement that is included on the Heating Assistance billing form. Suppliers who use an electronic tape in lieu of the Heating Assistance billing form will sign a similar agreement (See attached Vendor Participation Agreement).

The standard agreement (on the Heating Assistance billing form) will commit the fuel supplier:

a. To charge the eligible household, in a normal billing process, the difference between the actual cost of the home energy and the amount of the payment to be made by the State. (The household's co-payment)

b. To give assurance that no household receiving assistance under this program will be treated adversely because of such assistance under the provisions of State Law or public regulatory requirements.

c. Not to discriminate, either in the cost of the goods supplied or the services provided, against the eligible household on whose behalf payments are made.

d. To cooperate in reviews or audits of LIHEAP payments, and to refund to the State any over-payments.

Violations of the agreements due to suspected fraud or other criminal action will be referred to the Human Service Zone attorney for action. Agreement violations may be cause to suspend the supplier from participating in LIHEAP or the program director may prescribe other appropriate action.

At the end of the regular heating season, all LIHEAP households receive a payment notice showing all payments made on behalf of the household during the heating season. The notice instructs the client to review the payments and contact the Customer Support Center or Human Service Zone with any questions. The notice provides a level of program integrity by allowing client to review/verify what has been paid on their behalf.

See Section K (Supplier Agreements) of the ND State Plan Attachments Document.

**9.4 How do you assure that no household receiving assistance under this title will be treated adversely because of their receipt of LIHEAP assistance?**

Per agreement signed with vendor (See Section K of the ND State Plan Attachments Document).

Households eligible for heating assistance and/or emergency assistance will receive an electronically produced "notice of action" at the time eligibility and benefits have been determined. This form will include co-payment percentages and duration of benefits, right to appeal, and all other explanations. It also conveys their right to file a written complaint if they believe they have been discriminated against because of race, color, religion, origin, age, gender, disability or status with respect to marriage or public assistance.

**9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households?**

Yes  No

**If so, describe the measures unregulated vendors may take.**

Payments that are contingent on vendor actions are typically reserved for emergency assistance. Good faith efforts of the household, and energy supplier, appropriate, to avoid or resolve crisis should be apparent. A budget payment plan or other formalized Action Plan to avoid future crises may be required as a condition of emergency payments.

The energy supplier's collection efforts and cooperation in extending credit and offering a reasonable payment plan is considered when a household requests emergency assistance.

**Attach a copy of the template statewide vendor agreement or a policy that indicates local agreements must adhere to statewide policies and assurances.**

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**

## Section 10 - Program, Fiscal Monitoring, and Audit, 2605(b)(10) - Assurance 10

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN Section 10 - Program, Fiscal Monitoring, and Audit

#### Section 10: Program, Fiscal Monitoring, and Audit, 2605(b)(10)

##### 10.1. How do you ensure good fiscal accounting and tracking of funds?

See the following sections of the ND State Plan attachments document: P (Distribution of Grant Funds by Priority) Q (Benefits Excluded as Income) R (Administrative/Service Costs) S (Control of Fraud, Waste and Abuse) T (Fiscal Controls, Fund Accounting and Annual Audit) U (Reporting and Investigations)

##### 10.1a Provide your definitions of the following:

###### Obligation

In the North Dakota Century Code (NDCC) "50-06-05.1. Powers and duties of the department"; item #18, states that/or the energy assistance program:

"For purposes of the administration of the energy assistance program, funds are obligated at the earlier of the time a written commitment is made to a vendor or contractor for services or supplies delivered or to be delivered, or at the time payment is made to a vendor or contractor for services or supplies delivered or to be delivered."

###### Expenditures

ND follows the LIHEAP definition of expenditure:

"Expenditure means any amount of Federal LIHEAP or State MOE funds that a State expends, spends, pays out, or disburses consistent with the requirements of parts 260 through 265 of this chapter. It may include expenditures on the refundable portions of State or local tax credits, if they are consistent with the provisions at § 260.33. It does not include any amounts that merely represent avoided costs or foregone revenue. Avoided costs include such as contractor penalty payments for poor performance and purchase price discounts, rebates, and credits that a State receives. Foregone revenue includes provisions—such as waivers, deductions, exemptions, or nonrefundable tax credits—that reduce a State's tax revenue."

###### Expenditure timeframe

North Dakota State law allows the department to follow 31 USC § 1552(a) in determining the end date for expenditure of funds. 31 USC § 1552(a) states the following:

§ 1552. Procedure for appropriation accounts available for definite periods

a) On September 30th of the 5th fiscal year after the period of availability for obligation of a fixed appropriation account ends, the account and any remaining balance (whether obligated or unobligated) in the account shall be canceled and thereafter shall not be available for obligation or for any purpose.

###### Administrative costs

The North Dakota Department of Human Services (DHS) has adopted TANF rules in determining administrative costs.

45 CFR 263.0 (b) The term "administrative costs" means costs necessary for the proper administration of the TANF program or separate State program. (1) It excludes direct costs of providing program services. (i) For example, it excludes costs of providing diversion benefits and services, providing information to clients, screening and assessments, development of employability plans, work activities, post-employment services, work supports, and management. It also excludes costs for contracts devoted entirely to such activities. (ii) It excludes the salaries and benefits costs for staff providing program services and the direct administrative costs associated with providing the services, such as the costs for supplies, equipment, travel, postage, utilities, office space and maintenance of office space. (2) It includes costs for general administration and coordination of these programs, including contract support, indirect (or overhead) costs. Examples of administrative costs include: (i) Salaries and benefits of staff performing administrative and coordination activities related to eligibility determinations; (ii) Preparation of program plans, budgets, and schedules; (iii) Monitoring of programs and projects; (iv) Abuse units; (v) Procurement activities; (vi) Public relations; (vii) Services related to accounting, litigation, audits, management of property, payroll, and personnel; (ix) Costs for the goods and services required for administration of the program such as the costs for supplies, equipment, travel, postage



rental of office space and maintenance of office space, provided that such costs are not excluded as a direct administrative cost for providing programs under paragraph (b)(1) of this section;(x) Travel costs incurred for official business and not excluded as a direct administrative cost for providing program services under paragraph (b)(1) of this section;(xi) Management information systems not related to the tracking and monitoring of TANF requirements, personnel and payroll system for State staff); and(xii) Preparing reports and other documents.

**Audit Process**

**10.2. Is your LIHEAP program audited annually under the Single Audit Act and OMB Circular A - 133?**

Yes  No

**10.2a - if yes, describe your auditor selection process.**

The State Auditor's Office (SAO) is responsible for conducting the Single Audit under state law. The selection of auditors is determined by which assigns audit teams with the expertise to evaluate compliance and internal controls over federal programs, including LIHEAP. The audit is conducted in accordance with generally accepted auditing standards (GAAS) and Government Auditing Standards.

**10.3. Describe any audit findings of the grant recipient (i.e. State/Tribe/Territory) rising to the level of material weakness or reportable condition cited in the single audits, inspector general reviews, or other government agency reviews from the most recently audited fiscal year.**

No Findings

Finding	Type	Brief Summary	Resolved?	Action Taken
1	reporting	The Department of Human Services (DHS) incorrectly identified the ND Department of Commerce as a subrecipient for FFATA reporting purposes, resulting in inaccurate reporting of subawards and a net reporting error of \$109,999.	Yes	procedure/policy changes
2	monitoring	DHS did not prevent duplicate LIHEAP benefit payments, leading to identified and projected overpayments totaling approximately \$181,183.	Yes	procedure/policy changes
3	monitoring	17 out of 40 tested cases were processed without verification through the NDVerify system, potentially impacting eligibility determinations.	In Progress	procedure/policy changes
4	monitoring	An individual improperly received LIHEAP benefits while living rent-free without adequate documentation, leading to a projected overpayment of \$302,293.17.	Yes	procedure/policy changes

**10.4. Audits of Local Administering Agencies**

What types of annual audit requirements do you have in place for local administering agencies/district offices?  
Select all that apply.

- Local agencies/district offices are required to have an annual audit in compliance with Single Audit Act and OMB Circular A-133
- Local agencies/district offices are required to have an annual audit (other than A-133)
- Local agencies/district offices' A-133 or other independent audits are reviewed by Grant recipient as part of compliance process.
- Grant recipient conducts fiscal and program monitoring of local agencies/district offices
- Local agencies and district offices are required to have an annual audit in compliance with Single Audit Act and OMB Circular A-133

**Compliance Monitoring**

**10.5. Describe your monitoring process for compliance at each level below. Check all that apply.**

Grant recipients have a policy in place for appropriate separation of duties and internal controls.

- Internal program review
- Departmental oversight
- Secondary review of invoices and payments
- Other program review mechanisms are in place. Describe:

<b>Local Administering Agencies/District Offices:</b>
<input checked="" type="checkbox"/> On - site evaluation
<input type="checkbox"/> Annual program review
<input checked="" type="checkbox"/> Monitoring through central database
<input checked="" type="checkbox"/> Desk reviews
<input checked="" type="checkbox"/> Client File Testing/Sampling
<input checked="" type="checkbox"/> Other program review mechanisms are in place. Describe:
Weatherization Monitoring by Department of Commerce (See attached document).

**10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.**

The LIHEAP Program's organizational structure is designed to ensure rigorous oversight and implementation of internal controls that bolster integrity and accountability. The structure involves regular monthly meetings between the LIHEAP administrator, the Director of Program Administration, and the fiscal team. In these meetings, they review case counts, cost trends, application guidelines, and spend-down reports, addressing any significant caseloads or benefit amounts due to policy changes. On a weekly basis, the Director of Program Administration oversees benefit issuance, which the Specialist prepares. The specialist verifies the accuracy of benefits reports by cross-referencing outputs from the integrated eligibility system and client information. Once the Director signs off on these reports, they are stored in SharePoint and then forwarded to the fiscal department for a final check before payment disbursement. This layered review process ensures meticulous verification and accountability at each step.

The LIHEAP Program maintains policies and procedures on subrecipient monitoring for all grant contracts. Grant contract monitoring activities include risk assessment of the subrecipient, completion of a Program Checklist, completion of a Contract Closure Assessment, and periodic documentation review. Program administrators review requests for reimbursement and supporting documentation to ensure that contracted vendors are expending funds in accordance with the requirements.

To prepare and submit the required state and federal fiscal reports, the processes involve a thorough and coordinated effort by the fiscal department. The fiscal department carefully reviews and compiles expenditure data from the fiscal management system, ensuring accuracy through cross-referencing with reports and system case counts. After assembling the reports, an additional layer of security and verification is provided by the Director of Program Administration, who reviews and signs off on them before submission. This systematic approach ensures compliance with regulatory standards and the integrity of financial reporting.

Effective fiscal management practices involve regular monitoring, transparent accounting procedures, and adherence to federal and state guidelines to ensure proper allocation and use of LIHEAP funds. This includes detailed monthly meetings, rigorous expenditure tracking, and multiple controls supported by advanced fiscal projection tools.

The LIHEAP Program measures the effectiveness of fiscal management through performance indicators such as expenditure rates, compliance with budget allocations, and audit results. Tools like expenditure tracking systems and monthly financial reporting are utilized to monitor these indicators.

The results from tracking and measuring fiscal management practices are used to refine budget planning, improve allocation strategies, and strengthen oversight mechanisms. This continuous feedback loop ensures that fiscal practices directly support program objectives and compliance requirements.

Additionally, the LIHEAP Program employs technology-based solutions to automate financial reporting and uses predictive analytics to forecast financial scenarios, improving decision-making and fiscal responsiveness.

Each month, the Department's Quality Assurance Unit generates a random sample of LIHEAP cases for which a payment was made during the review month. A state-wide monthly random sample of fifteen (15) Low Income Home Energy Assistance Program (LIHEAP) cases are selected for review by the Quality Assurance Unit staff. The sample consists of one (1) case per region along with an additional two (2) random selections from the state. In addition, a state-wide monthly random sample of five (5) denied/closed cases are selected and reviewed.

The necessary outcome of this process is the assurance that clients are qualified, and that they receive the benefits for which they are eligible.

The results of the reviews are shared with the eligibility worker, Human Service Zone director, and program administrators. If overpayment is identified as a result of the review, overpayments are established regardless of whether it is due to an agency or recipient error. At the time an overpayment is established, the family is informed of the overpaid amount and their responsibility for repayment. Any corrections (over or underpayment) are the responsibility of the eligibility worker.

Error trends are used to identify areas of the program in need of training or possible policy revisions. LIHEAP eLearning courses are available 24 hours a day for eligibility workers to develop competency and skills in applying LIHEAP policy. Economic Assistance Training Team provides training to eligibility workers on new policy and revisions. In addition, they work one-on-one with eligibility workers as needed.

The LIHEAP Program sends all policy and procedure changes to other program staff for review before implementation. This allows for questions to be answered and reviewed before policy is finalized. Quality Control Unit staff notify the LIHEAP administrator and the policy and system support (PaSS) Training team of all errors or potential fraud found through case reviews, this includes but is not limited to improper payments. This allows the training team to build and implement trainings based on actual case errors. Eligibility workers also go through a strict training and integrity protocol on how to determine eligibility, cases worked by new workers in their first six months are reviewed by senior eligibility workers before approval is determined. The LIHEAP Program closely monitors application rates, denials, approvals, and application churn to identify any barriers to the program application process. The LIHEAP Program also has access to a data dashboard which shows case payments and can assist in identifying ongoing case trends. The fiscal team for the LIHEAP Program meets monthly to monitor expenditures and review any unusual trends.

Risk assessments are conducted with varying frequencies to ensure comprehensive oversight. Benefit issuance is cross-referenced daily to ensure accuracy. Overall expenditures are reviewed monthly in conjunction with fiscal and the LIHEAP team to track financial health. Additionally, the LIHEAP team tracks LIHEAP funds between programs is thoroughly evaluated on a quarterly basis. These assessments include additional checks as needed if any discrepancies or inconsistencies are noted during regular reviews. This tiered approach ensures continuous monitoring and timely resolution of potential issues.

The LIHEAP Program utilizes risk assessment results to inform program improvements by integrating financial projection tools that calculate expenditures based on policy changes. By comparing actual outcomes with projected results, discrepancies are identified and addressed. Additional program counts and trends are continuously monitored via dashboards, enabling the program to refine processes and address discrepancies in real-time. This review helps in enhancing program accuracy and efficiency.

The effectiveness of the risk assessment processes is confirmed through the alignment of financial projections with actual expenditures. When projections diverge from actual results, the program conducts detailed analyses using dashboards that track applications, benefit issuance, and case progress. This process is used to detect and investigate trends, including potential fraud, through correlation studies of overpayments and regional comparisons, demonstrating the reliability of the risk assessment processes.

The fiscal team creates comprehensive reports that are accessible to program administrators and the Director of Economic Assistance and the Director of the Commerce Department. These reports and the associated dashboards ensure transparency and facilitate ongoing monitoring, contributing to the integrity and improvement of the LIHEAP program.

Policy changes are sent to the Human Service Zones in the month prior to the changes becoming effective to give workers time to review and ask questions before the policy is implemented. Training guides are created and distributed statewide as areas of needed training are identified or when procedures are changed. The LIHEAP Program utilizes the policy and system support (PaSS) unit to deliver periodic program and policy training. Additionally, the program utilizes E-Learning courses that cover policies and case processing that are available statewide. New workers have all cases reviewed for six months during a probationary period to ensure understanding and correct procedures are consistently followed when determining eligibility.

The policy and system support (PaSS) unit monitors staff member trainings and takes feedback directly from participants.

The Quality Control unit reviews LIHEAP cases monthly, which provides the PaSS unit with common errors to help create needed training.

North Dakota is a state-supervised, county-administered program. DHHS has the responsibility of building and maintaining the computer system, determines eligibility and benefits state-wide. DHHS Fiscal Administration, LIHEAP Administrator and Economic Assistance Director monitor the program.

Local agency utilization of LIHEAP is monitored monthly through statistical reports that are generated for review of caseload and expenditures. These reports are shared within DHHS and each Human Service Zone for their review and information. If there are any discrepancies identified, they are reviewed by the LIHEAP Administrator.

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#### **Sub-Recipient Monitoring**

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The LIHEAP program conducts in-person visits to the physical locations of sub-grantees and local LIHEAP administering offices. The key components of our on-site monitoring plan are as follows:

- **Region-based On-Site Visits:** We will conduct regular on-site visits for each of the four regions at least once every biennium. This allows our monitoring team to be physically present at each region, enabling direct and in-depth observation of operations. Please see the attached example of the monitoring selection tool.
- **Sampling Strategy:** Our team will implement a systematic sampling strategy during on-site monitoring visits. This involves interviewing one worker and one supervisor at each location to gain insights into their roles, responsibilities, and adherence to LIHEAP policies.

- **Review of Cases and Applications:** As part of the on-site monitoring process, we will review 10 randomly selected cases and 10 applications for accuracy and compliance. This detailed review will enable us to identify and address potential discrepancies.

- **Priority based on Emergency LIHEAP Cases:** We recognize the urgency of addressing emergency cases promptly. Therefore, we will schedule on-site monitoring visits based on the number of emergency LIHEAP cases reported in each human service zone.

- **Collaboration with DOC:** Our commitment to effective monitoring extends to collaborating closely with the Department of Commerce. We will work together to ensure regular updates on their monitoring of weatherization sub-recipients. This collaborative approach will facilitate the resolution of issues promptly and comprehensively.

In implementing this on-site monitoring plan, our goal is to fully comply with federal policies and ensure that our sub-grantees provide value to low-income households across the state. We firmly believe that on-site monitoring strengthens our oversight capabilities and provides valuable feedback for improvement.

The North Dakota Department of Health and Human Services uses a variety of verification interfaces to obtain verification electronically.

The following interfaces/sources may be used:

- Birth/Death Records (ND Vital Records)
- Health Insurance (DEERS)
- ND Child Support
- ND Department of Corrections
- ND Motor Vehicle/Watercraft (Motor Vehicle/Game & Fish)
- ND State Directory of New Hire
- ND State Hospital Admission/Discharge
- ND Unemployment Insurance Benefits (Job Service)
- ND Wages (Job Service)
- Other Benefit Information (SSA)
- SNAP Intentional Program Violations
- WSI Medical Claims Status
- Request UPA
- Request 40 Quarters
- SAVE
- Equifax

In addition to these interfaces/sources, eligibility workers also have access to additional verifications received through other program interfaces, the Income and Eligibility Verification System (IEVS), Social Security Administration and Public Assistance Reporting Information System (PARIS).

For weatherization and emergency furnace services, monitoring is flagged in the Department's electronic contract system on a specified schedule throughout the life of the contract.

**10.7. Describe how you select local agencies for monitoring reviews. Attach a risk assessment if subrecipients are utilized.**

**Site Visits:**

**LIHEAP will** conduct in-person visits to the physical locations of sub-grantees and local LIHEAP administering offices. The key elements of the monitoring plan are as follows:

- **Region-based On-Site Visits:** We will conduct regular on-site visits for each of the four regions at least once every biennium. This approach will ensure the monitoring team to be physically present at each region, enabling direct and in-depth observation of operations. Please see the attachment for an on-site monitoring selection tool.
- **Sampling Strategy:** Our team will implement a systematic sampling strategy during on-site monitoring visits. This involves interviewing one or more staff supervisors at each location to gain insights into their roles, responsibilities, and adherence to LIHEAP policies.
- **Review of Cases and Applications:** As part of the on-site monitoring process, we will review 10 randomly selected cases and 10 approved applications for accuracy and compliance. This detailed review will enable us to identify and address potential discrepancies.
- **Priority based on Emergency LIHEAP Cases:** We recognize the urgency of addressing emergency cases promptly. Therefore, we will prioritize on-site monitoring visits based on the number of emergency LIHEAP cases reported in each human service zone.
- **Collaboration with DOC:** Our commitment to effective monitoring extends to collaborating closely with the Department of Commerce (DOC). We will work together to ensure regular updates on their monitoring of weatherization sub-recipients. This collaborative approach will facilitate the resolution of issues promptly and comprehensively.

**Desk Reviews:**

**The Quality Assurance Unit conducts monthly case file reviews. The human service zone office provides the case file or an electronic copy retrieved from FileNet for the review process. A standard form is used for the review process. The form includes LIHEAP policy and procedure for verification of income, household members, etc. The results of the case file reviews are shared with the eligibility worker and Human Services director. If overpayment exists as a result of the review, overpayments are established regardless if the overpayment is due to agency error or client error. At the time an overpayment is established, the family is informed of the overpaid amount and that they are responsible for repayment of the overpayment.**

**Weatherization Monitoring by DOC; see attached document.**

**10.8. How often is each local agency monitored? Please attach a monitoring schedule if one has been developed.**

Annually

**10.9. How many local agencies are currently on corrective action plans? 0**

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**

**Section 11 - Timely and Meaningful Public Participation, , 2605(b)(12) - Assurance 12, 2605(c)(2)**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES	August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01 OMB Clearance No.: 0970-013 Expiration Date: 02/28/2027
<p><b>LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)</b>  <b>MODEL PLAN</b>  <b>Section 11 - Timely and Meaningful Public Participation</b></p>	

**Section 11: Timely and Meaningful Public Participation, 2605(b)(12), 2605(C)(2)**

**11.1 How did you obtain input from the public in the development of your LIHEAP plan? Select all that apply.**  
*Note: Tribes do not need to hold a public hearing but must ensure participation through other means.*

- Tribal Council meeting(s)
- Public Hearing(s)
- Draft Plan posted to website and available for comment
- Hard copy of plan is available for public view and comment
- Comments from applicants are recorded
- Request for comments on draft Plan is advertised
- Stakeholder consultation meeting(s)
- Comments are solicited during outreach activities
- Other - Describe:

Comments are being solicited for the FY2025 Draft Plan prior to the public hearing in August through publications in the 8 major newspaper state, and the proposed plan is available on our website for public review and comment by stakeholders.

In addition, email communications are being sent to subgrantees, human service zone offices, North Dakota DHHS personnel, and various assistance organizations and partners, soliciting comments. A link to the Draft Plan and public notice is included in the communication.

A public hearing will be held from 2-3 PM CST on August 15, 2024, to solicit additional public participation.

See Section D (Public Participation, Review and Comments on State Plan) of the ND State Plan attachments document.

**Public Hearings, 2605(a)(2) - For States and the Commonwealth of Puerto Rico Only**

**11.2 List the date and location(s) that you held public hearing(s) on the proposed use and distribution of your LIHEAP funds?**

	Date	Event Description
1	08/15/2024	Public Hearing regarding ND LIHEAP for FY2025

**11.3. How many parties commented on your plan at the hearing(s)?** 0

**11.4 Summarize the comments you received at the hearing(s).**

N/A

**11.5 What changes did you make to your LIHEAP plan as a result of public participation and solicitation of input?**

N/A

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

**Section 12 - Fair Hearings,2605(b)(13) - Assurance 13**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
MODEL PLAN  
Section 12 - Fair Hearings**

**Section 12: Fair Hearings, 2605(b)(13) - Assurance 13**

**12.1 How many fair hearings did the Grant recipient have in the prior federal Fiscal Year? 3**

**12.2 How many of those fair hearings resulted in the initial decision being reversed? 2**

**12.3 Describe any policy and/or procedural changes made in the last federal Fiscal Year as a result of fair hearings?**

N/A

**12.4 Describe your fair hearing procedures for households whose applications are denied and/or not acted upon in a timely manner.**

If a client believes the decision made on their Heating Assistance or Emergency Assistance application may be wrong, or if they do not receive notice of the action taken on their Heating Assistance application within 45 days from the date their application is received, they should first contact the service zone office to be sure the eligibility worker has all the information they need to correctly determine your eligibility. If they still believe the decision is wrong for some reason, they can make a written request for a hearing before the North Dakota Department of Health and Human Services. They should contact the human service zone office for instructions on how to request a hearing. The written request for a hearing must be received within 30 days of the notice of action. The client can have an attorney, relative, friend or other person assist them at the hearing. If the hearing request is received in a timely manner, benefits will not be changed until a decision is reached. However, they will be required to pay back any excess benefits received if their appeal is not successful. A hearing officer will contact them to arrange a hearing time and place that is convenient for them. The client will receive a written decision from the North Dakota Department of Health and Human Services.

See attached DN 263 "Rights to a Hearing" notice

**12.5 When and how are applicants informed of these rights?**

Whenever a case is processed or changed, the client receives a notice of the action taken on the case. The "Rights to a Hearing" information is included with notices sent to clients.

Appeal rights are also included on the instruction page of the LIHEAP application.

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**

**Section 13 - Reduction of home energy needs,2605(b)(16) - Assurance 16**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
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Expiration Date: 02/28/2027

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
MODEL PLAN  
Section 13 - Reduction of Home Energy Needs**

**Section 13: Reduction of home energy needs, 2605(b)(16) - Assurance 16**

13.1 Describe how you use LIHEAP funds to provide services that encourage and enable households to reduce their home energy needs and thereby the need for energy assistance?

N/A

13.2 How do you ensure that you don't use more than 5% of your LIHEAP funds for these activities?

N/A

13.3 Describe the impact of such activities on the number of households served in the previous federal Fiscal Year.

N/A

13.4 Describe the level of direct benefits provided to those households in the previous federal Fiscal Year.

N/A

13.5 How many households received these services? N/A

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**



**Section 14 - Leveraging Incentive Program ,2607A**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
MODEL PLAN  
Section 14 - Leveraging Incentive Program**

**Section 14:Leveraging Incentive Program, 2607(A)**

14.1 Do you plan to submit an application for the leveraging incentive program?

Yes  No

14.2 Describe instructions to any third parties and/or local agencies for submitting LIHEAP leveraging resource information and retaining records.

N/A

14.3 For each type of resource and/or benefit to be leveraged in the upcoming year that will meet the requirements of 45 C.F.R. § 96.87(d)(2)(iii), describe the following:

Resource	What is the type of resource or benefit ?	What is the source(s) of the resource ?	How will the resource be integrated and coordinated with LIHEAP?
1	N/A	N/A	N/A

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**

## Section 15 - Training

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN Section 15 - Training

### Section 15: Training

15.1 Describe the training you provide for each of the following groups:

**a. Grant recipient Staff:**

Formal training provided virtually, on-site, and/or formal training conference

How often?

Annually

Biannually

As needed

Other, describe: Federal webinars, conferences, work groups

Employees are provided with policy manual

Other, describe:

There are various committees, groups, or taskforces that work to develop policy that is consistent among economic assistance programs and training, and clarification on existing policies and procedures. These various groups also provide an excellent opportunity to develop effective communication and build rapport with human service zone staff.

**b. Local Agencies:**

Formal training provided virtually, on-site, and/or formal training conference

How often?

Annually

Biannually

As needed

Other, describe: Policy and System Support (PaSS) provide monthly webinar policy and procedure training on all Economic Assistance Programs which includes LIHEAP.

On-site training

How often?

Annually

Biannually

As needed

Other, describe: Policy and System Support (PaSS) provide monthly webinar policy and procedure training on all Economic Assistance Programs which includes LIHEAP.

Employees are provided with policy manual

Other, describe:

PaSS provides the following: - Initial and ongoing education for policy and system - Maintenance of SPACES system online help - Publishes monthly newsletters for system and policy updates - Publishes monthly system release updates - Review and maintains LIHEAP eLearning courses for policy training LIHEAP eLearning courses are available online 24 hours a day to eligibility workers and sub-grantees. The courses provide an opportunity to become familiar with program operations and allows eligibility workers to develop competency and skills in applying LIHEAP policy.

**c. Vendors**

Formal training conference

How often?

<input type="checkbox"/>	Annually
<input type="checkbox"/>	Biannually
<input checked="" type="checkbox"/>	As needed
<input type="checkbox"/>	Other, describe:
<input checked="" type="checkbox"/>	Policies communicated through vendor agreements
<input checked="" type="checkbox"/>	Policies are outlined in a vendor manual
<input type="checkbox"/>	Other, describe:
<p>15.2 Does your training program address fraud reporting and prevention?</p> <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>	
<p><b>If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.</b></p>	

## Section 16 - Performance Goals and Measures, 2605(b)

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
Expiration Date: 02/28/2027

### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN Section 16 - Performance Goals and Measures

#### Section 16: Performance Goals and Measures, 2605(b) - Required for States Only

**16.1 Describe your progress toward meeting the data collection and reporting requirements of the four required LIHEAP (Benefit Targeting Index, Burden Reduction Targeting Index, Restoration of Home Energy Service, and Prevention of Loss of Home Energy Service). Include timeframes and plans for meeting these requirements and what you believe will be accomplished in the coming federal fiscal year.**

North Dakota meets all federal requirements (per directive in the OCS Action Transmittal) for reporting the data for the LIHEAP Performance report. For FY2024, the eligibility system (SPACES) will collect the data that is needed to report these measures as required.

Performance data is used in the following ways:

Monitoring and Management: Performance data serves as a robust tool for monitoring program efficacy, allowing for assessments regarding fulfillment and areas in need of adjustment.

- Goal Setting and Program Improvements: The collected data informs the setting of achievable goals and identifies potential enhancements make a significant impact on the energy needs of low-income households in North Dakota.

- Comparative Analysis Across States: Performance metrics from other states are reviewed to adapt and innovate best practices, contributing strategies for reaching vulnerable populations.

- Data-Driven Outreach: Comparative data supplies valuable insights for the creation of targeted outreach campaigns, designed to increase utilization among eligible households.

- Historical Context and Trend Analysis: Access to state and national historical data facilitates the tracking of long-term trends, which become comprehensive report generation and policy decision influence.

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**

**Section 17 - Program Integrity, 2605(b)(10)**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Clearance No.: 0970-013  
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**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
MODEL PLAN  
Section 17 - Program Integrity**

**Section 17: Program Integrity, 2605(b)(10)**

**17.1 Fraud Reporting Mechanisms**

**a. Describe all mechanisms available to the public for reporting cases of suspected waste, fraud, and abuse. Select all that apply.**



Online Fraud Reporting



Dedicated Fraud Reporting Hotline



Report directly to local agency/district office or Grant recipient office



Report to State Inspector General or Attorney General



Forms and procedures in place for local agencies/district offices and vendors to report fraud, waste, and abuse



Other - Describe:

The Department of Health and Human Services has a fraud toll free hot-line and a website for individuals to report suspect fraud. The suspect reports are logged and researched to determine appropriate action. In addition, intentional program violations determined for Child Care Assistance CHIP, Supplemental Nutrition Assistance and Temporary Assistance for Needy Families programs are reviewed to determine if there is a LIHEAP action needs to be taken on the LIHEAP case.

**b. Describe strategies in place for advertising the above-referenced resources. Select all that apply**



Printed outreach materials



Posted in local administering agencies offices.



Addressed on LIHEAP application



Website



Other - Describe:

As part of the DHHS delivery system in North Dakota, LIHEAP has a visible presence in all 53 of the state's counties (19 Human Service 2 addition, DHHS has a toll-free fraud hot-line and an e-mail address on the website by which cases of suspected fraud can be reported at any time (v dhs).

The Department has an active public information unit which publishes press releases which include the website address.

A fraud log is used to document all calls and emails regarding possible fraud that are received from interested parties. The log is maintained administrators and support staff. The log includes the issue complaint, the research and the finding which may or may not have been determined to be

**17.2. Identification Documentation Requirements**

**a. Indicate which of the following forms of identification are required or requested to be collected from LIHEAP applicants or their household members.**

Type of Identification Collected	Collected from Whom?		
	Applicant Only	All Adults in Household	All Household Members
Social Security Card is photocopied and retained	<input type="checkbox"/> Required	<input type="checkbox"/> Required	<input type="checkbox"/> Required
	<input type="checkbox"/> Requested	<input type="checkbox"/> Requested	<input type="checkbox"/> Requested
Social Security Number (Without actual Card)	<input type="checkbox"/> Required	<input type="checkbox"/> Required	<input type="checkbox"/> Required

	<input checked="" type="checkbox"/>	Requested	<input checked="" type="checkbox"/>	Requested	<input checked="" type="checkbox"/>	Requested
Government-issued identification card (i.e.: driver's license, state ID, Tribal ID, passport, etc.)	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required
	<input checked="" type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested

**17.3. Citizenship/Legal Residency Verification**

What are your procedures for ensuring LIHEAP recipients are U.S. citizens or qualified non-citizens who are eligible to receive LIHEAP benefits? Select all that apply.

- Clients sign an attestation of citizenship or U.S. Citizen or Qualified Non-Citizen
- Client's submission of certain Social Security Administration cards is accepted as proof of U.S. Citizen or Qualified Non-Citizen.
- Non-Citizens must provide documentation of immigration status
- Citizens must provide a copy of their birth certificate, naturalization papers, or passport
- Non-Citizens are verified through the SAVE system
- Tribal members are verified through Tribal enrollment records/Tribal ID card
- Other - Describe:  

DHHS' various interfaces are able to provide verification of citizenship, qualified noncitizens through SAVE as an interface and web service further information.

	Other	Applicant Only Required	Applicant Only Requested	All Adults in Household Required	All Adults in Household Requested	All Household Members Required	All Household Members Requested
1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**17.4. Income Verification**

What methods does your agency utilize to verify household income? Select all that apply.

- Require documentation of income for all adult household members
  - Pay stubs
  - Social Security award letters
  - Bank statements
  - Tax statements
  - Zero-income statements
  - Unemployment Insurance letters
  - Other - Describe:

In addition, LIHEAP eligibility workers have access to additional information received through other major programs such as Numident the Social Security verification system, IRS information on income and assets, and PARIS interface information. They may also access SAVE to determine alien status.

In FY2022, LIHEAP became part of SPACES (Self-Service Portal and Consolidated Eligibility System). Medicaid, Child Care Assistance, TANF are also included in SPACES.

All individuals entered into SPACES go through a file clearance process that checks if the individual is already known to the system. When is known to the system, all prior applications and information are associated with that individual. In addition to the file clearance process, SPACES with the Social Security Administration (SSA). Search results from this interface provide verification of an individual's social security number when available. Additional interfaces such as ND Vital Records, Job Services of ND, ND Motor Vehicle and ND Game and Fish can also be used to verify identity.

The following interfaces are included as part of SPACES to verify information needed to determine eligibility:

- Birth/Death records (ND Vital Records)
- Health Insurance
- ND Child Support
- ND Department of Corrections
- ND Motor Vehicle/Watercraft (ND Motor Vehicle/Game & Fish)
- ND State Director of New Hire
- ND State Hospital (Admission/Discharge)
- ND Unemployment Insurance Benefits (Job Service)
- Social Security Administration
- SNAP Intentional Program Violations
- WSI Medical Claims Status
- Request UPA
- Request 40 Quarters

Access to these interfaces is provided to workers based on their role (i.e., eligibility worker).

LIHEAP also allows for other means of verification, such as hard copy verification from applicants or third parties, to support eligibility de

**Computer data matches:**

**Income information matched against state computer system (e.g., SNAP, TANF)**

**Proof of unemployment benefits verified with state Department of Labor**

**Social Security income verified with SSA**

**Utilize state directory of new hires**

**Other - Describe:**

In addition, LIHEAP eligibility workers have access to additional information received through other major programs such as Numident the Social Security verification system, IRS information on income and assets, and PARIS interface information. They may also access SAVE to deter alien status.

In FY2022, LIHEAP became part of SPACES (Self-Service Portal and Consolidated Eligibility System). Medicaid, Child Care Assistance, TANF are also included in SPACES.

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Access to these interfaces is provided to workers based on their role (i.e., eligibility worker).

LIHEAP also allows for other means of verification, such as hard copy verification from applicants or third parties, to support eligibility de

**b. Describe any exceptions to the above policies.**

**17.5 Identification Verification**

**Describe what methods are used to verify the authenticity of identification documents provided by clients or household members. Select all that apply**

**Verify SSNs with Social Security Administration**

**Match SSNs with death records from Social Security Administration or state agency**

**Match SSNs with state eligibility/case management system (e.g., SNAP, TANF)**

**Match with state Department of Labor system**

**Match with state and/or federal corrections system**

**Match with state child support system**

**Verification using private software (e.g., The Work Number)**

**In-person certification by staff (for tribal Grant recipients only)**

**Match SSN/Tribal ID number with tribal database or enrollment records (for tribal Grant recipients only)**

**Other - Describe:**

In addition, LIHEAP eligibility workers have access to additional information received through other major programs such as Numident the Social Security verification system, IRS information on income and assets, and PARIS interface information. They may also access SAVE to deter alien status.

In FY2022, LIHEAP became part of SPACES (Self-Service Portal and Consolidated Eligibility System). Medicaid, Child Care Assistance, TANF are also included in SPACES.

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The following interfaces are included as part of SPACES to verify information needed to determine eligibility:

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- ND State Director of New Hire
- ND State Hospital (Admission/Discharge)
- ND Unemployment Insurance Benefits (Job Service)
- Social Security Administration
- SNAP Intentional Program Violations
- WSI Medical Claims Status
- Request UPA
- Request 40 Quarters

Access to these interfaces is provided to workers based on their role (i.e., eligibility worker).

LIHEAP also allows for other means of verification, such as hard copy verification from applicants or third parties, to support eligibility de

**17.6. Protection of Privacy and Confidentiality**

**Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.**

Policy in place prohibiting release of information without written consent

Grant recipient LIHEAP database includes privacy/confidentiality safeguards

Employee training on confidentiality for:

Grant recipient employees

Local agencies/district offices

Employees must sign confidentiality agreement

Grant recipient employees

Local agencies/district offices

Physical files are stored in a secure location

Electronic files are protected in a secure location.

Other - Describe:

DHHS took significant steps in safeguarding client's privacy in 2011 with its SSN suppression initiative. All written communications being identify the client with a system-assigned "billing number" rather than a Social Security Number. This will continue ongoing.

Economic Assistance Policy Division addresses safeguarding of client information in Administrative Procedural manual 448-01 which may North Dakota Department of Human Services website at

<https://www.nd.gov/dhs/policymanuals/44801/44801.htm>

The Economic Assistance Policy Division Administrative Procedural manual 448-01 is utilized to provide county eligibility workers with g policy and procedures of client information.

In addition, eligibility workers and Economic Assistance staff are required to take an online Safeguard training annually. The training inclu information must be safeguarded and penalties for improper disclosure.

**17.7. Verifying the Authenticity**

**What policies are in place for verifying vendor authenticity? Select all that apply.**

All vendors must register with the State/Tribe.

All vendors must supply a valid SSN or TIN/W-9 form

Vendors are verified through energy bills provided by the household

Grant recipient and/or local agencies/district offices perform physical monitoring of vendors

Other - Describe and note any exceptions to policies above:

North Dakota's status as a rural state lends a generous hand to vendor authenticity. A majority of the vendors in the state are small 'mom and businesses that have been established in the communities for many years and, in many cases, generations. Vendors of fuels other than the four prim



(natural gas, electricity, propane and fuel oil), serve less than one percent of our clients (Wood vendors, in particular, are rare because of the dearth state). When a client buys fuel from one of these vendors, it is common practice for the eligibility worker to check with local sources to determine of the vendor.

Eligibility workers have developed an excellent working relationship with vendors in their areas as most of the vendors and their employees rural community. Vendor reputations are generally very well known to county staff.

**17.8. Benefits Policy - Gas and Electric Utilities**

What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.

- Applicants required to submit proof of physical residency
- Applicants must submit current utility bill
- Data exchange with utilities that verifies:
  - Account ownership
  - Consumption
  - Balances
  - Payment history
  - Account is properly credited with benefit
  - Other - Describe:
- Centralized computer system/database tracks payments to all utilities
- Centralized computer system automatically generates benefit level
- Separation of duties between intake and payment approval
- Payments coordinated among other energy assistance programs to avoid duplication of payments
- Payments to utilities and invoices from utilities are reviewed for accuracy
- Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities
- Direct payment to households are made in limited cases only
- Procedures are in place to require prompt refunds from utilities in cases of account closure
- Vendor agreements specify requirements selected above, and provide enforcement mechanism
- Other - Describe:

Applicants are asked to include a copy of their current heating bill with their application. This serves to verify heating vendor's authenticity that the proper vendor is authorized to submit heating bills on behalf of the client.

LIHEAP benefits are based on a percentage co-payment between the client and LIHEAP. The percentage for which the client is responsible by the household's income, household size, type of fuel and type of dwelling. The vendor sends the household's bill directly to the DHHS central office. DHHS remits payment to the vendor for the LIHEAP share. With the bill coming directly to the central office, DHHS is able to review them for potential irregularities prior to any payment being made.

In addition, SPACES also includes substantial edits to spot irregularities and prevent duplicate payments.

**17.9. Benefits Policy - Bulk Fuel Vendors**

What procedures are in place for averting fraud and improper payments when dealing with bulk fuel suppliers of heating oil, propane, wood, and other bulk fuel vendors? Select all that apply.

- Vendors are checked against an approved vendors list
- Centralized computer system/database is used to track payments to all vendors
- Clients are relied on for reports of non-delivery or partial delivery
- Two-party checks are issued naming client and vendor
- Direct payment to households are made in limited cases only
- Vendors are only paid once they provide a delivery receipt signed by the client
- Conduct monitoring of bulk fuel vendors
- Bulk fuel vendors are required to submit reports to the grant recipient.
- Vendor agreements specify requirements selected above, and provide enforcement mechanism

<input checked="" type="checkbox"/> <b>Other - Describe:</b>
<p>Applicants are asked to include a copy of their current heating bill with their application. This serves to verify heating vendor's authenticity that the proper vendor is authorized to submit heating bills on behalf of the client.</p> <p>LIHEAP benefits are based on a percentage co-payment between the client and LIHEAP. The percentage for which the client is responsible by the household's income, household size, type of fuel and type of dwelling. The vendor sends the household's bill directly to the DHHS central office. DHHS remits payment to the vendor for the LIHEAP share. With the bill coming directly to the central office, DHS is able to review them for potential irregularities prior to any payment being made.</p> <p>Unregulated energy vendors, primarily of deliverable fuels, tend to be located in North Dakota's rural areas.</p> <p>In addition to the billing procedures described above, SPACES incorporates a substantial number of edits to spot irregularities and assure that payments are not issued. These edits apply to all vendors.</p>

**17.10. Investigations and Prosecutions**

**Describe the Grant recipients procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients, staff, or vendors found to have committed fraud. Select all that apply.**

<input type="checkbox"/> Refer to state Inspector General
<input checked="" type="checkbox"/> Refer to local prosecutor or state Attorney General
<input type="checkbox"/> Refer to US DHHS Inspector General (including referral to OIG hotline)
<input checked="" type="checkbox"/> Local agencies/district offices or Grant recipient conduct investigation of fraud complaints from public
<input checked="" type="checkbox"/> Grant recipient attempts collection of improper payments. If so, describe the recoupment process See Section J.4. (Erroneous Payments) of attached state plan of operation
<input type="checkbox"/> Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned?
<input type="checkbox"/> Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated
<input type="checkbox"/> Vendors found to have committed fraud may no longer participate in LIHEAP
<input type="checkbox"/> Other - Describe:

**If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.**

**Section 18: Certification Regarding Debarment, Suspension, and Other Responsibility Matters**

**Certification Regarding Debarment, Suspension, and Other Responsibility Matters--Primary Covered Transactions**

**Instructions for Certification**

1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.

2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

5. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.

6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.

7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or

voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

### **Certification Regarding Debarment, Suspension, and Other Responsibility Matters--Primary Covered Transactions**

(1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;

(b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

### **Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transactions**

#### **Instructions for Certification**

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.

2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later

determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal that, [[Page 33043]] should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

#### **Certification Regarding Debarment, Suspension, Ineligibility an Voluntary Exclusion--Lower Tier Covered Transactions**

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

**(2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.**

**By checking this box, the prospective primary participant is providing the certification set out above.**

## Section 19: Certification Regarding Drug-Free Workplace Requirements

### Section 19: Certification Regarding Drug-Free Workplace Requirements

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988: 45 CFR Part 76, Subpart, F. Sections 76.630(c) and (d)(2) and 76.645(a)(1) and (b) provide that a Federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For the Department of Health and Human Services, the central point is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, SW Washington, DC 20201.

#### Certification Regarding Drug-Free Workplace Requirements (Instructions for Certification)

1. By signing and/or submitting this application or grant agreement, the Grant recipient is providing the certification set out below.
2. The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the Grant recipient knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
3. For Grant recipients other than individuals, Alternate I applies.
4. For Grant recipients who are individuals, Alternate II applies.
5. Workplaces under grants, for Grant recipients other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the Grant recipient does not identify the workplaces at the time of application, or upon award, if there is no application, the Grant recipient must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the Grant recipients drug-free workplace requirements.
6. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).
7. If the workplace identified to the agency changes during the performance of the grant, the Grant recipient shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph five).
8. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grant recipients attention is called, in particular, to the following definitions from these rules:

***Controlled substance*** means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15);

***Conviction*** means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

***Criminal drug statute*** means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

***Employee*** means the employee of a Grant recipient directly engaged in the performance of work under a grant, including: (i) All direct charge employees; (ii) All indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) Temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the Grant recipients payroll. This definition does not include workers not on the payroll of the Grant recipient (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the Grant recipients payroll; or employees of subrecipients or subcontractors in covered workplaces).

#### **Certification Regarding Drug-Free Workplace Requirements**

##### **Alternate I. (Grant recipients Other Than Individuals)**

The Grant recipient certifies that it will or will continue to provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Grant recipients workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an ongoing drug-free awareness program to inform employees about --
  - (1) The dangers of drug abuse in the workplace;
  - (2) The Grant recipients policy of maintaining a drug-free workplace;
  - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
  - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will --
  - (1) Abide by the terms of the statement; and
  - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- (e) Notifying the agency in writing, within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a



central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted - (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

(B) The Grant recipient may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

**Place of Performance ( *That this must be physical address. No PO Boxes allowed.* )**

600 EAST BOULEVARD AVENUE <b>* Address Line 1</b>		
DEPARTMENT 325 Address Line 2		
Address Line 3		
BISMARCK <b>* City</b>	ND <b>* State</b>	58505-0250 <b>* Zip Code</b>

**Check if there are workplaces on file that are not identified here.**

**Alternate II. (Grant recipients Who Are Individuals)**

(a) The Grant recipient certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant;

(b) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.

[55 FR 21690, 21702, May 25, 1990]

**By checking this box, the prospective primary participant is providing the certification set out above.**

Section 20: Certification Regarding Lobbying

Section 20: Certification Regarding Lobbying

The submitter of this application certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

By checking this box, the prospective primary participant is providing the certification set out above.

## Assurances

### Assurances

**(1) use the funds available under this title to--**

**(A) conduct outreach activities and provide assistance to low income households in meeting their home energy costs, particularly those with the lowest incomes that pay a high proportion of household income for home energy, consistent with paragraph (5);**

**(B) intervene in energy crisis situations;**

**(C) provide low-cost residential weatherization and other cost-effective energy-related home repair;and**

**(D)plan, develop, and administer the State's program under this title including leveraging programs, and the State agrees not to use such funds for any purposes other than those specified in this title;**

**(2) make payments under this title only with respect to--**

**(A) households in which one or more individuals are receiving--**

**(i)assistance under the State program funded under part A of title IV of the Social Security Act;**

**(ii) supplemental security income payments under title XVI of the Social Security Act;**

**(iii) food stamps under the Food Stamp Act of 1977; or**

**(iv) payments under section 415, 521, 541, or 542 of title 38, United States Code, or under section 306 of the Veterans' and Survivors' Pension Improvement Act of 1978; or**

**(B) households with incomes which do not exceed the greater of -**

**(i) an amount equal to 150 percent of the poverty level for such State; or**

**(ii) an amount equal to 60 percent of the State median income;**

**(except that a State may not exclude a household from eligibility in a fiscal year solely on the basis of household income if such income is less than 110 percent of the poverty level for such State, but the State may give priority to those households with the highest home energy costs or needs in relation to household income.**

**(3) conduct outreach activities designed to assure that eligible households, especially households with elderly individuals or disabled individuals, or both, and households with high home energy burdens, are made aware of the assistance available under this title, and any similar energy-related assistance available under subtitle B of title VI (relating to community services block grant program) or under any other provision of law which carries out programs which were administered under the Economic Opportunity Act of 1964 before the date of the enactment of this Act;**

**(4) coordinate its activities under this title with similar and related programs administered by the Federal Government and such State, particularly low-income**

energy-related programs under subtitle B of title VI (relating to community services block grant program), under the supplemental security income program, under part A of title IV of the Social Security Act, under title XX of the Social Security Act, under the low-income weatherization assistance program under title IV of the Energy Conservation and Production Act, or under any other provision of law which carries out programs which were administered under the Economic Opportunity Act of 1964 before the date of the enactment of this Act;

(5) provide, in a timely manner, that the highest level of assistance will be furnished to those households which have the lowest incomes and the highest energy costs or needs in relation to income, taking into account family size, except that the State may not differentiate in implementing this section between the households described in clauses 2(A) and 2(B) of this subsection;

(6) to the extent it is necessary to designate local administrative agencies in order to carry out the purposes of this title, to give special consideration, in the designation of such agencies, to any local public or private nonprofit agency which was receiving Federal funds under any low-income energy assistance program or weatherization program under the Economic Opportunity Act of 1964 or any other provision of law on the day before the date of the enactment of this Act, except that -

(A) the State shall, before giving such special consideration, determine that the agency involved meets program and fiscal requirements established by the State; and

(B) if there is no such agency because of any change in the assistance furnished to programs for economically disadvantaged persons, then the State shall give special consideration in the designation of local administrative agencies to any successor agency which is operated in substantially the same manner as the predecessor agency which did receive funds for the fiscal year preceding the fiscal year for which the determination is made;

(7) if the State chooses to pay home energy suppliers directly, establish procedures to --

(A) notify each participating household of the amount of assistance paid on its behalf;

(B) assure that the home energy supplier will charge the eligible household, in the normal billing process, the difference between the actual cost of the home energy and the amount of the payment made by the State under this title;

(C) assure that the home energy supplier will provide assurances that any agreement entered into with a home energy supplier under this paragraph will contain provisions to assure that no household receiving assistance under this title will be treated adversely because of such assistance under applicable provisions of State law or public regulatory requirements; and

(D) ensure that the provision of vendor payments remains at the option of the State in consultation with local Grant recipients and may be contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households, including providing for agreements between suppliers and individuals eligible for benefits under this Act that seek to reduce home energy costs, minimize the risks of home energy crisis, and encourage regular payments by individuals receiving financial assistance for home energy costs;

**(8) provide assurances that,**

**(A) the State will not exclude households described in clause (2)(B) of this subsection from receiving home energy assistance benefits under clause (2), and**

**(B) the State will treat owners and renters equitably under the program assisted under this title;**

**(9) provide that--**

**(A) the State may use for planning and administering the use of funds under this title an amount not to exceed 10 percent of the funds payable to such State under this title for a fiscal year; and**

**(B) the State will pay from non-Federal sources the remaining costs of planning and administering the program assisted under this title and will not use Federal funds for such remaining cost (except for the costs of the activities described in paragraph (16));**

**(10) provide that such fiscal control and fund accounting procedures will be established as may be necessary to assure the proper disbursement of and accounting for Federal funds paid to the State under this title, including procedures for monitoring the assistance provided under this title, and provide that the State will comply with the provisions of chapter 75 of title 31, United States Code (commonly known as the "Single Audit Act");**

**(11) permit and cooperate with Federal investigations undertaken in accordance with section 2608;**

**(12) provide for timely and meaningful public participation in the development of the plan described in subsection (c);**

**(13) provide an opportunity for a fair administrative hearing to individuals whose claims for assistance under the plan described in subsection (c) are denied or are not acted upon with reasonable promptness; and**

**(14) cooperate with the Secretary with respect to data collecting and reporting under section 2610.**

**(15) \* beginning in fiscal year 1992, provide, in addition to such services as may be offered by State Departments of Public Welfare at the local level, outreach and intake functions for crisis situations and heating and cooling assistance that is administered by additional State and local governmental entities or community-based organizations (such as community action agencies, area agencies on aging and not-for-profit neighborhood-based organizations), and in States where such organizations do not administer functions as of September 30, 1991, preference in awarding grants or contracts for intake services shall be provided to those agencies that administer the low-income weatherization or energy crisis intervention programs.**

**\* This assurance is applicable only to States, and to territories whose annual regular LIHEAP allotments exceed \$200,000. Neither territories with annual allotments of \$200,000 or less nor Indian tribes/tribal organizations are subject to Assurance 15.**

**(16) use up to 5 percent of such funds, at its option, to provide services that encourage and enable households to reduce their home energy needs and**

**thereby the need for energy assistance, including needs assessments, counseling, and assistance with energy vendors, and report to the Secretary concerning the impact of such activities on the number of households served, the level of direct benefits provided to those households, and the number of households that remain unserved.**



By checking this box, the prospective primary participant is agreeing to the Assurances set out above.

## Plan Attachments

PLAN ATTACHMENTS
The following documents must be attached to this application
<ul style="list-style-type: none"><li>• Delegation Letter is required if someone other than the Governor or Chairman Certified this Report.</li></ul>
<ul style="list-style-type: none"><li>• Heating component benefit matrix, if applicable</li></ul>
<ul style="list-style-type: none"><li>• Cooling component benefit matrix, if applicable</li></ul>
<ul style="list-style-type: none"><li>• Minutes, notes, or transcripts of public hearing(s).</li></ul>
<ul style="list-style-type: none"><li>• Policy Manual.</li></ul>
<ul style="list-style-type: none"><li>• Subrecipient Contract.</li></ul>
<ul style="list-style-type: none"><li>• Model Plan Participation Notes for Tribes.</li></ul>