#### **DETAILED MODEL PLAN (LIHEAP)**

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

Grantee Name: Kentucky

**Report Name:** DETAILED MODEL PLAN (LIHEAP) Revision # 2

**Report Period:** 10/01/2019 to 09/30/2020

**Report Status:** Submission Accepted by CO (Revision #2)

### Report Sections

- 1. Mandatory Grant Application SF-424
- 2. Section 1 Program Components
- 3. Section 2 HEATING ASSISTANCE
- 4. Section 3 COOLING ASSISTANCE
- 5. Section 4 CRISIS ASSISTANCE
- 6. Section 5 WEATHERIZATION ASSISTANCE
- 7. Section 6 Outreach, 2605(b)(3) Assurance 3, 2605(c)(3)(A)
- 8. Section 7 Coordination, 2605(b)(4) Assurance 4
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- 10. Section 9 Energy Suppliers,, 2605(b)(7) Assurance 7
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- 20. Section 19: Certification Regarding Drug-Free Workplace Requirements
- 21. Section 20: Certification Regarding Lobbying
- 22. Assurances
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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.: 0970-0075

Expiration Date: 09/30/2020

* 1.a. Type of Submission:					* 1.c. Consolidated Application/Pl		* 1.d. Version:		
<b>⊙</b> Plan					an/Funding Request?			<b>⊙</b> Initial	
								C Resubmission	
					Explanation:			Revision	
								O Update	
					2. Date Received:			State Use Only:	
					3. Applicant Iden				
					4a. Federal Entity			5. Date Received By State:	
					4b. Federal Awar	d Identifie	::	6. State Application Identifier:	
7. APPLICAN	T INFO	ORMATION							
* a. Legal Naı	ne: Kei	ntucky							
* <b>b. Employer</b> 39	/Taxpa	yer Identificat	ion Number (EIN/TIN	(i): 16106004	* c. Organization	al DUNS:	927049	9767	
* d. Address:									
* Street 1:		275 East Mai	in Street, #5W-A		Street 2:				
* City:		FRANKFOR	Т		County:				
* State:		KY			Province:				
* Country:		United States			* Zip / Postal ( de:	stal Co 40601 - 2321			
e. Organizatio	nal Uni	t:			Л				
Department N		nunity Based Se	ervices		Division Name: DIvision of Family Support				
f. Name and c	ontact i	nformation of	person to be contacted	l on matters in	wolving this application	ation:			
Prefix:		Name:		Middle Name			* Last	Name:	
1101111	Vicki				Bowling				
Suffix:	Title:	a Assistanca Pr	ogram Specialis	Organization CHFS/DCBS	nal Affiliation:				
* Tolombono	Fax Nu		ogram Specians	* Email:	3				
* Telephone Number: 5025643440	rax INI	umber		Vickie.Bowl	ing@ky.gov				
* 8a. TYPE O A: State Gover		LICANT:		11					
b. Addition	al Desci	ription:							
* 9. Name of I	ederal	Agency:							
			<b>II</b>	g of Federal Dor sistance Number				CFDA Title:	
10. CFDA Num	bers and	l Titles	93568		Low	-Income Ho	me Ene	rgy Assistance	
11. Descriptiv	e Title o	of Applicant's	Project						
12. Areas Affe	cted hv	Funding:							
	~ ~ J	<b></b>							

13. CONGRESSIONAL DISTRICTS OF:	
* a. Applicant 6	b. Program/Project: Statewide
Attach an additional list of Program/Project Congressional Districts if n	eeded.
14. FUNDING PERIOD:	15. ESTIMATED FUNDING:
<b>a. Start Date:</b> 10/01/2019 <b>b. End Date:</b> 09/30/2020	* a. Federal (\$):
* 16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EX	KECUTIVE ORDER 12372 PROCESS?
a. This submission was made available to the State under the Executiv	ve Order 12372
Process for Review on :	
b. Program is subject to E.O. 12372 but has not been selected by State	e for review.
c. Program is not covered by E.O. 12372.	
* 17. Is The Applicant Delinquent On Any Federal Debt?  O YES  NO	
Explanation:	
i i	n the list of certifications** and (2) that the statements herein are true, c juired assurances** and agree to comply with any resulting terms if I acc ents or claims may subject me to criminal, civil, or administrative penalti
** The list of certifications and assurances, or an internet site where you c instructions.	may obtain this list, is contained in the announcement or agency specifi
18a. Typed or Printed Name and Title of Authorized Certifying Official	18c. Telephone (area code, number and extension)
Vickie Bowling	<b>18d. Email Address</b> Vickie.Bowling@ky.gov
18b. Signature of Authorized Certifying Official	18e. Date Report Submitted (Month, Day, Year) 09/24/2019

#### **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.: 0970-0075

Expiration Date: 09/30/2020

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

Department of Health and Human Services Administration for Children and Families Office of Community Services Washington, DC 20201

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01

OMB Approval No. 0970-0075 Expiration Date: 09/30/2020

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 in years in which the grantee is not permitted to file an abbreviated plan. 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)

(Not	Check which components you will operate under the LIHEAP program. e: You must provide information for each component designated here as requested elsewhere in plan.)	Dates of Operation		
		Start Date	End Date	
>	Heating assistance	11/04/2019	12/13/2019	
	Cooling assistance			
>	Crisis assistance	01/06/2020	03/31/2020	
>	Weatherization assistance	07/01/2019	06/30/2020	

#### Provide further explanation for the dates of operation, if necessary

\*Cooling assistance is offered only when the state receives emergency cooling funds or it is determined that weather climate dictates a cooling program is necessary for the health and safety of the citizens of the commonwealth.

\*\*Any LIHEAP funding used for Weatherization not exhausted by June 30th (the end of the fiscal year) is carried forward into the next ye ar's contract with Kentucky Housing Corporation and must be depleted between July 1 through September 30th.

#### 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 ( % )
Heating assistance	35.00%
Cooling assistance	0.00%
Crisis assistance	41.30%
Weatherization assistance	13.50%
Carryover to the following federal fiscal year	0.00%
Administrative and planning costs	10.00%
Services to reduce home energy needs including needs assessment (Assurance 16)	0.10%

Use	Used to develop and implement leveraging activities 0.10							0.10%				
ТОТА	L											100.00%
Alteri	nate Use of C	risis Assista	nce Fu	ınds, 2605(c)(	1)(C)							
1.3 Tl	ne funds rese	rved for win	iter cri	isis assistance	that ha	ve not been exp	ended	by March 15 wi	ill be r	eprogrammed to	):	
	Heating ass			Cooling assi				•				
	Weatheriza nce	tion assista	<	Other (speci	-	nds may be used	to ext	end Crisis throug	h Apri	1 30th or obligated	d for h	eating assistance for th
	nce			e next progra	un year.							
Categ	orical Eligib	lity, 2605(b	)(2)(A)	- Assurance	2, 2605(	c)(1)(A), 2605(b	)( <b>8A</b> )	- Assurance 8				
					-				he foll	owing categories	of be	nefits in the left colu
mn be	elow? 💽 Yes	$O_{No}$										
If you	answered "	Yes'' to ques	stion 1.	.4, you must c	omplete	the table below	and	answer question	s 1.5 a	nd 1.6.		
						Heating		Cooling		Crisis		Weatherization
TANF					•	Yes 🖸 No	•	Yes 🖸 No	⊙	Yes O No	•	Yes O No
SSI					•	Yes O No	(3	Yes O No	•	Yes O No	•	Yes ONo
SNAP					•	Yes O No	0	Yes O No	0	Yes O No	•	Yes O No
Means	-tested Vetera	ns Programs			•	Yes O No	0	Yes O No	0	Yes O No	0	Yes ONo
			Prog	gram Name		Heating		Cooling		Crisis		Weatherization
Other(	Specify) 1					O Yes O No	)	O Yes O N	D	O Yes O No	)	C Yes C No
SNAF 1.7a I If you 1.7b A	it amounts in g source. In n um are determ y Audit (MHI  Nominal Pa  Oo you alloca	every LIHEZO componentined by the IEA).  yments te LIHEAP Yes" to questominal Assistance	AP com t is the Dwellin  funds	determination ag Needs Evalu  toward a nom 7a, you must	termined of bene uation an	fits based on a h nd based on mea:	ousehousehousehousehousehousehousehouseh	old being categori	ically e	eligible. Benefit ar Audit Tool (NEA'	nount	e, and primary type of s in the weatherization Manufactured Home
	Once every											
	JICC CYCLY I	ive years										
	Other - Desc	ribe:										
1.7d How do you confirm that the household receiving a nominal payment has an energy cost or need?												
Determination of Eligibility - Countable Income												
1.8. In determining a household's income eligibility for LIHEAP, do you use gross income or net income ?												
>	Gross Incom	ie										
	Net Income											
1.9. S	elect all the a	pplicable fo	rms of	countable in	come us	ed to determine	a hou	ısehold's income	eligib	ility for LIHEAI	•	
~	Wages											

_	
~	Self - Employment Income
	ben Employment meome
<b>~</b>	Contract Income
. 4	Down ants from montages on Coles Contracts
~	Payments from mortgage or Sales Contracts
~	Unemployment insurance
<b>~</b>	Strike Pay
~	Social Security Administration (SSA ) benefits
	Including MediCare deduc   ✓ Excluding MediCare deduction
	tion
Ш	
<b>~</b>	Supplemental Security Income (SSI )
~	Retirement / pension benefits
	General Assistance benefits
	General Assistance Scients
<	Temporary Assistance for Needy Families (TANF) benefits
_	
1	Supplemental Nutrition Assistance Program (SNAP) benefits
	Women Inforts and Children Supplemental Notatition Decream (WIC) hareful
	Women, Infants, and Children Supplemental Nutrition Program (WIC) benefits
	Loans that need to be repaid
<b>~</b>	Cash gifts
	Southern assessment belongs
A	Savings account balance
<b>&gt;</b>	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.
<b>~</b>	Jury duty compensation
	Douted in come
~	Rental income
	Income from employment through Workforce Investment Act (WIA)
$ldsymbol{ldsymbol{\sqcup}}$	
	Income from work study programs
~	Alimony
~	Child support
-	To the Extention
$ldsymbol{\sqcup}$	
<b>&gt;</b>	Interest, dividends, or royalties
$\vdash$	
$\checkmark$	Commissions
	I agal cattlements
~	Legal settlements
L	
~	Insurance payments made directly to the insured
-	·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··

Insurance payments made specifically for the repayment of a bill, debt, or estimate
Veterans Administration (VA) benefits
Earned income of a child under the age of 18
Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.
Income tax refunds
Stipends from senior companion programs, such as VISTA
Funds received by household for the care of a foster child
Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
Reimbursements (for mileage, gas, lodging, meals, etc.)
Other
ny of the above questions require further explanation or clarification that could not be made in fields provided, attach a document with said explanation here.

#### **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.: 0970-0075

Expiration Date: 09/30/2020

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

	Section 2 - Heating Assistance							
Eligibility, 2605(	b)(2) - Assurance 2							
2.1 Designate the	e income eligibility threshold used for the	heating co	omponent:					
Add	Household size		Eligibility Guideline	Eligibility Threshold				
1	1		HHS Poverty Guidelines	130.00%				
2.2 Do you have EATING ASSIT	additional eligibility requirements for H ANCE?	<b>⊙</b> Yes	C <sub>No</sub>					
2.3 Check the ap	propriate boxes below and describe the p	olicies for	each.					
Do you require a	n Assets test ?	Yes	C <sub>No</sub>					
Do you have add	itional/differing eligibility policies for:							
Renters?		C Yes	⊙ No					
Renters Living in subsidized housing?								
Renters wi	th utilities included in the rent ?	C Yes	⊙ No					
Do you give prio	rity in eligibility to:	•						
Elderly?		• Yes	C <sub>No</sub>					
Disabled?		• Yes	C <sub>No</sub>					
Young chil	dren?	C Yes	<b>⊙</b> No					
Household	s with high energy burdens ?	Yes	C <sub>No</sub>					
Other?		C Yes	<b>⊙</b> No					
Explanations of p	policies for each "yes" checked above:							
То	tal liquid assets cannot exceed:							
1.3	\$2,000							
	\$3,000, if at least one person in the househo	ıld is (a) an	to 60 or older; or (b) disabled; or					
	·							
nses.	54,000 if a member of the household has an	iliness wh	ich requires lliquid resources to be accessed reg	gularly for living and medical expe				
Determination of	f Benefits 2605(b)(5) - Assurance 5, 2605(	c)(1)(B)						
2.4 Describe how	you prioritize the provision of heating as	ssistance t	ovulnerable populations,e.g., benefit amount	s, early application periods, etc.				
	d the highest heating season energy costs.		be provided to households with the lowest inco- ility is established, payment to a household's fu					
Fo	r each of the seven primary heating fuels (n	atural gas,	electric, fuel oil, propane, kerosene, wood, and	coal), an average cost for unit of f				

For each of the seven primary heating fuels (natural gas, electric, fuel oil, propane, kerosene, wood, and coal), an average cost for unit of fuel will be identified prior to the opening of the Subsidy application period. Based on this unit fuel cost information, an average cost will be calculated. Benefits will be structured so the lowest poverty level households receive the highest benefits relative to fuel type. Please see the attached benefit matrix for more information.

Applicants who are 60 and above or have disabilities and who receive a fixed income may pre-register. This pre-registration process, no b enefits are issued until Subsidy begins.

2.5 Check the variables you use to determine your benefit levels. (Check all that apply):

Income									
Family (household) size									
✓ Home energy cost or need:									
<b>✓</b> Fuel type	<b>✓</b> Fuel type								
Climate/region									
Individual bill									
Dwelling type									
Energy burden (% of income s	pent on home energy)								
Energy need									
Other - Describe:									
An example of an application: HH size of 2; Non-subsidized housing; Heats with electric; income is \$1000 month; 71% poverty level; ben efit amount is \$126.  Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)									
2.6 Describe estimated benefit levels for FY	2020:								
Minimum Benefit	\$34	Maximum Benefit	\$274						
2.7 Do you provide in-kind (e.g., blankets, space heaters) and/or other forms of benefits?  Yes  No									
If yes, describe.									
Benefits are provided in the form of utility payments and ongoing related energy assistance programs including, WinterCare, Columbia G as Energy Assistance Program, and Delta Gas Energy Assistance Programs. Clients are referred to Energy Conservation Workshops, including first home buyer classes.									
If any of the above questions			could not be made in						

## **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.: 0970-0075

Expiration Date: 09/30/2020

<u> </u>								
	Section 3 - Cooling Assistance							
Eligibility, 2605(	c)(1)(A), 2605 (b)(2) - Assurance 2							
3.1 Designate Th	e income eligibility threshold used for the	e Cooling o	component:					
Add	Add Household size Eligibility Guideline Eligibility Threshold							
1	All Household Sizes HHS Poverty Guidelines 130.009							
3.2 Do you have additional eligibility requirements for C OOLING ASSITANCE?								
3.3 Check the ap	propriate boxes below and describe the p	olicies for	each.					
Do you require a	nn Assets test ?	O Yes	<b>⊙</b> No					
Do you have add	litional/differing eligibility policies for:	,						
Renters?		C Yes	<b>⊙</b> No					
Renters Li	ving in subsidized housing ?	C Yes	⊙ <sub>No</sub>					
Renters wi	th utilities included in the rent ?	C Yes	⊙ No					
Do you give prio	rity in eligibility to:							
Elderly?		• Yes	C <sub>No</sub>					
Disabled?		• Yes	C <sub>No</sub>					
Young chil	ldren?	Yes	C No					
Household	s with high energy burdens ?	<b>⊙</b> Yes	C <sub>No</sub>					
Other?		O Yes	⊙ No					
Explanations of	policies for each "yes" checked above:							
Pri	iority is given to those households with elde	rly residen	ts, those with disabled members, and with childr	en under the age of 6.				
3.4 Describe how	you prioritize the provision of cooling as	sistance to	ovulnerable populations,e.g., benefit amounts,	, early application periods, etc.				
Ar efit.	n applicant must meet all the regular prograr	n requirem	ents regarding income, household size, and gros	s income to receive a cooling ben				
Benefits can also be provided in the form of air conditioning units. To be eligible for an air conditioner, the household must meet the eligibility requirements for cooling. The household must not have or have access to an air conditioner and must meet one of the following requirement s:								
1. Have a member with a health condition or disability that requires cooling to prevent further deterioration as verified by a physician's stat ement on letterhead. Example: persons with heart disease, asthma or severe respiratory conditions.								
2.	2. Have a member who is 65 years of age or older.							
3.	Have a member who is under the age of six.							
A household may receive both, the benefit amount and an air conditioner, if they meet the eligibility requirements.								
Determination of	Determination of Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)							
3.5 Check the va	riables you use to determine your benefit	levels. (Cl	neck all that apply):					
▼ Tanama								

Family (household) size									
Home energy cost or need:									
✓ Fuel type									
Climate/region									
Individual bill									
Dwelling type									
Energy burden (% of i	ncome spent on home energy)								
Energy need	Energy need								
Other - Describe:									
Benefit Levels, 2605(b)(5) - Assuran	irement to be eligible for an air condition  ace 5, 2605(c)(1)(B)	oner.							
3.6 Describe estimated benefit level	; for FY 2020:								
Minimum Benefit	Minimum Benefit \$50 Maximum Benefit \$175								
3.7 Do you provide in-kind (e.g., fans, air conditioners) and/or other forms of benefits?  Yes  No									
If yes, describe.									
Air conditioners are provided as described in section 3.4.									
_ <del>-</del>	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

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	Section 4: CRISIS ASSISTANCE						
Eligibility - 260	04(c), 2605(c)(1)(A)						
	the income eligibility threshold used for the crisis comp	onent					
Add	Household size	Eligibility Guideline	Eligibility Threshold				
1	All Household Sizes	HHS Poverty Guidelines	130.00%				
4.2 Provide you	ur LIHEAP program's definition for determining a cris	sis.					
1	A household is considered to be in crisis if they meet basic 1. The household has a past due or disconnect notice, if elect 2. The household is within four (4) days of running out of f	etric or natural gas is the primary heating source					
4.3 What const	titutes a <u>life-threatening crisis?</u>						
	Life-threatening means, at the time of application, a housel rous level as determined by the National Weather Service.	old is or will be without heat or cooling withi	n 18 hours and temperatures are at				
Crisis Require	ment, 2604(c)						
4.4 Within how	w many hours do you provide an intervention that will r	esolve the energy crisis for eligible househo	olds? 48Hours				
4.5 Within how ? 18Hours	w many hours do you provide an intervention that will r	esolve the energy crisis for eligible househo	olds in life-threatening situations				
Crisis Eligibilit	ty, 2605(c)(1)(A)						
4.6 Do you hav ANCE?	ve additional eligibility requirements for CRISIS ASSIS	T Yes O No					
4.7 Check the a	appropriate boxes below and describe the policies for ea	ach					
Do you require	e an Assets test ?	• Yes • No					
Do you give pr	riority in eligibility to :						
Elderly?		€ Yes C No					
Disabled	?	• Yes O No					
Young C	Children?	• Yes O No					
Househo	olds with high energy burdens?	⊙ Yes C No					
Other?	Other? C Yes O No						
In Order to rec	ceive crisis assistance:						
Must the empty tank?	e household have received a shut-off notice or have a ne	ar Yes O No					
Must the	e household have been shut off or have an empty tank?	○ Yes					
Must the	household have exhausted their regular heating benefi	t? O Yes O No					
Must ren	nters with heating costs included in their rent have received	iv G Yes O No					

Must heating/cool	ing be medically necessary?	C Yes <b>⊙</b> No			
Must the householent?	ld have non-working heating or cooling equipm	C Yes © No			
Other? See below		<b>⊙</b> Yes <b>○</b> No			
Do you have additional	differing eligibility policies for:				
Renters?		C Yes O No			
Renters living in s	ubsidized housing?	C Yes O No			
Renters with utilit	ties included in the rent?	C Yes O No			
Explanations of policies	for each "yes" checked above:				
*Househo	lds must meet the basic eligibility requirements.				
*Complete	ed applications will be processed in the order accept	ed to the extent of available funds.			
*Applicati	ons shall have no more than five (5) days to comple	ete the application from the date the application is started.			
*All house	cholds must be responsible for home heating costs d	irectly or as an undesignated part of the rent.			
	•	prevent the removal of a child from a household, or if it will enable a child to			
*	old. Households must meet the same income and as	•			
_		housing, except those at 0-74% of poverty, will be required to make a co-pa			
	t of the amount needed to relieve the crisis. Houselg a utility allowance. The co-payment will be based	olds residing in subsidized housing will be responsible for a higher co-paym on the household's percent of poverty.			
Determination of Benefi	its				
4.8 How do you handle	crisis situations?				
>	Separate component				
	Fast Track				
	Other - Describe:				
1070					
	te component, how do you determine crisis assist	ance benefits?			
>	Amount to resolve the crisis.				
Y	Other - Describe:  The maximum amount of benefits that any household may receive throughout the crisis component may not ex ceed \$400 for gas or electric. If program funding is enhanced through a federal or state award, the cabinet may approv e a subsequent increase to the benefit amount. for the past several years, the maximum benefit for gas or electric has b een maintainted at \$400. The maximum benefit for bulk fuels are two (2) tons of coal, 2 cords of wood, or 200 gallons of fuel oil or kerosene.				
Cuicia Baguinamenta 26	504(c)				
Crisis Requirements, 26		re geographically accessible to all households in the area to be served?			
• Yes O No Exp		the geographicany accessible to an nouseholds in the area to be served:			
Yes ONO Exp	lain.				
Prior to the program opening, locations are determined in each county where applications are taken and sites are listed on outreach materia ls and media articles.					
For those applicants unable to go to a location for the application process, the applicant can designate an authorized representative to apply on their behalf. Other alternate methods consist of the Community Action Agencies conducting home visits, visiting elderly communities to ensur e they receive assistance or conduting a telephone interview. If an application is taken via the phone, the client then provides verification and sign					
atures on applicati	ion forms and returns by mail.				
4.11 Do you provide individuals who are physically disabled the means to:					
Submit applications for crisis benefits without leaving their homes?					
€ Yes C No If No, explain.					
Travel to the sites at which applications for crisis assistance are accepted?					
€ Yes C No If No, explain.					
If you answered "No" to both options in question 4.11, please explain alternative means of intake to those who are homebound or physically disa					
bled?					
See response in 4.10.					

Benefit Levels, 2605(c)(1)(B)							
4.12 Indicate the maximum benefit for each type o	of crisis assis	tance offere	d.				
Winter Crisis \$400.00 maximum benef	fit						
Summer Crisis \$0.00 maximum benefit							
Year-round Crisis \$0.00 maximum benefit							
4.13 Do you provide in-kind (e.g. blankets, space h	leaters, fans)	) and/or oth	er forms of benefits?				
Yes No If yes, Describe							
4.14 Do you provide for equipment repair or repla	icement usin	ıg crisis fund	ds?				
C Yes O No							
If you answered "Yes" to question 4.14, you must	complete qu	estion 4.15.					
4.15 Check appropriate boxes below to indicate type	pe(s) of assis	stance provi	ded.				
	Winter C risis	Summer Crisis	Year-round Crisis				
Heating system repair							
Heating system replacement							
Cooling system repair							
Cooling system replacement							
Wood stove purchase							
Pellet stove purchase							
Solar panel(s)							
Utility poles / gas line hook-ups							
Other (Specify):	Other (Specify):						
4.16 Do any of the utility vendors you work with enforce a moratorium on shut offs?							
C Yes O No							
If you responded "Yes" to question 4.16, you must	t respond to	question 4.1	17.				
4.17 Describe the terms of the moratorium and any special dispensation received by LIHEAP clients during or after the moratorium period.							
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.							

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#### Section 5 - WEATHERIZATION ASSISTANCE

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

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Expiration Date: 09/30/2020

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

## **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 Household Size Eligibility Threshold **Eligibility Guideline** Add All Household Sizes HHS Poverty Guidelines 200.00% 5.2 Do you enter into an interagency agreement to have another government agency administer a WEATHERIZATION component? 💽 Yes 🔘 5.3 If yes, name the agency. Kentucky Housing Corporation 5.4 Is there a separate monitoring protocol for weatherization? • Yes O 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 eligib le units or will become eligible within 180 days Weatherize shelters temporarily housing primarily low income persons (excluding nursing homes, prisons, and similar institutional c are 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 Ration (SIR) standards. 4 Other - Describe: Weatherization not subject to the DOE WAP average Health and Safety costs limitation per dwelling. LIHEAP funding may be used to re-weatherize units in which work was performed and billed on or before September 30, 2012. LIHEAP funding may be used on energy saving measures that SIR is at a .80 or greater in the client completion report. Increase the number of dwelling units occupied by low-income households receiving weatherization assistance by decreasing the number of deferrals for minor home repairs. Examples include structural, plumbing, electrical and or roofing issues. KHC will set a cap amount for home repairs not to exceed 20% of total total projected weatherization job costs. Structural/roofing issues could be repairs to roof leaks to protect weath erization measures, minor mold remediation, repair of holes in walls and other minor repairs to protect installed weatherization measures. DOE formula to be applied to LIHEAP WX allocation. This would allow more training opportunities for contractors and crews. Eligibility, 2605(b)(5) - Assurance 5

5.6 Do you require an assets test?	C Yes ⊙ No			
5.7 Do you have additional/differing eligibil	lity policies for :			
Renters	C Yes O No			
Renters living in subsidized housing  Yes No				
5.8 Do you give priority in eligibility to:	D.			
Elderly?	€ Yes C No			
Disabled?	⊙ Yes O No			
Young Children?	€ Yes C No			
House holds with high energy burde ns?	• Yes O No			
Other?	C Yes O 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.  Priority is given to households containing elderly, disabled, persons or children. Eligible households with young children who have been i dentified by CHFS, Division of Permanancy and Protection, as being at risk of being removed from the home, if the housing conditions are substandard and in need of weatherization, will be given emergency priority and will receive service immediately. Priority is also given to households i dentified as having a high energy burden. A high energy burden is defined as 15% or more of the household income and those residing in high energy dwellings.				
Benefit Levels				
5.9 Do you have a maximum LIHEAP weatherization benefit/expenditure per household? C Yes O No				
5.10 If yes, what is the maximum? \$0				
Types of Assistance, 2605(c)(1), (B) & (D)				
5.11 What LIHEAP weatherization measur	res do you provide ? (Check al	l categories that apply.)		
Weatherization needs assessments/a	udits	<b>✓</b> Energy related roof repair		
✓ Caulking and insulation		Major appliance Repairs		
✓ Storm windows		Major appliance replacement		
Furnace/heating system modifications/ repairs		₩ Windows/sliding glass doors		
Furnace replacement		Doors		
Cooling system modifications/ repair	<b>✓</b> Water Heater			
		✓ Cooling system replacement		
Compact florescent light bulbs  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.				

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	Section 6: Outreach, 2605(b)(3) - Assurance 3, 2605(c)(3)(A)
6.1 So vaila	elect all outreach activities that you conduct that are designed to assure that eligible households are made aware of all LIHEAP assistance a ble:
<b>~</b>	Place posters/flyers in local and county social service offices, offices of aging, Social Security offices, VA, etc.
<b>~</b>	Publish articles in local newspapers or broadcast media announcements.
<b>~</b>	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.
<b>y</b>	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.
<b>y</b>	Other (specify):
	The Division of Family Support sends a memorandum to each of the local Department of Community Based Services (DCBS) offices noti fying field staff of dates, times, and locations of the agencies in order to recipients to apply. this information is posted in the lobby or waiting rooms for each DCBS office.

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

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# 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.). Joint application for multiple programs Intake referrals to/from other programs One - stop intake centers Other - Describe: Community Action Agencies are the service providers for LIHEAP and they adminster other energy assistance programs, i.e., the Weather

ization Assistance Program, and privately fuel funded energy assistance programs. Each local community action agency will coordinate the vario us available energy assistance programs and make referrals, when appropriate, to other agencies and programs.

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Section 8: Agency Designation, 2605(b)(6) - Assurance 6 (Req	uired for state grantees and t
he Commonwealth of Puerto Rice	<b>o</b> )

8.1 Hov	w would you categorize the primary respons	ibility of your State age	ncy?				
	Administration Agency						
	Commerce Agency						
	Community Services Agency						
	Energy / Environment Agency						
	Housing Agency						
<b>&gt;</b>	<b>W</b> elfare Agency  ✓						
	Other - Describe:						
Alternate Outreach and Intake, 2605(b)(15) - Assurance 15							
If you selected "Welfare Agency" 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?							
Community action agencies will be the service providers for heating assistance. The agencies provide outreach and intake throughout the s tate for all components of the program.							
8.3 How do you provide alternate outreach and intake for COOLING ASSISTANCE?							
Community action agencies will be the service provider for cooling assistance should the program be operating with emergency or additional funding.							
8.4 How do you provide alternate outreach and intake for CRISIS ASSISTANCE?							
Same as 8.2							
8.5 LIF	HEAP Component Administration.	Heating	Cooling	Crisis	Weatherization		
8.5a W	8.5a Who determines client eligibility?  Community Action Ag encies  Community Action Ag encies  Community Action Ag encies  Community Action Ag encies  Community Action Ag encies						

8.5b Wh	o processes benefit payments to gas and e endors?	Community Action Ag encies	Community Action Ag encies	Community Action Ag encies				
8.5c who processes benefit payments to bulk fuel vendors?		Community Action Ag encies	Community Action Ag encies	Community Action Ag encies				
8.5d Who performs installation of weatherization measures?  Communication encies								
•	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 Wha	t is your process for selecting local admini	stering agencies?						
	The Cabinet for Health and Family Ser te agency responsible for administering the L nd state energy programs in preceding years.		•	•				
a: n	Under contact with CHFS, Community Action Kentucky, Inc. (CAK) subcontracts with twenty-two (22) community action agencies, and o ne local government to operate locally LIHEAP. CAK has operated the Crisis component since FFY 1986 and the Subsidy component since 1990 and has received federal funds for the administraction of energy assistance programs both prior to and after the date of enactment of the Low Inco me Home Energy Assistance Act. CAK has and will continue to subcontract the local community action agencies to provide assistance in all 120 counties of the state.							
8.7 How	many local administering agencies do you	use? 23						
8.8 Have O Yes O No								
8.9 If so, why?								
	Agency was in noncompliance with grantee requirements for LIHEAP -							
	Agency is under criminal investigation							
	Added agency							
	Agency closed							
	Other - describe							
If any	of the above questions requi	re further expla	nation or clarific	ation that could	not be made in			

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# I OW INCOME HOME ENERGY ASSISTANCE PROGRAM/I IHEAD

MODEL PLAN  SF - 424 - MANDATORY
Section 9: Energy Suppliers, 2605(b)(7) - Assurance 7
9.1 Do you make payments directly to home energy suppliers?
Heating © Yes C No
Cooling • Yes O No
Crisis
Are there exceptions? • Yes O No
If yes, Describe.  Payments will be authorized to the energy provider, including landlords where heating is included as an undesignated portion of the rent, y one party check upon delivery of fuel, restoration or continuation of service, household receipt of blankets, sleeping bags, or emergency lodgin. The only exception would be if the landord or vendor refuses to accept payment or voucher.
9.2 How do you notify the client of the amount of assistance paid? At the time of application, all households that are determined eligibile for assistance receive a written notification advising them of the are ount of assistance for which they are eligible and to whom the payment will be made.
9.3 How do you assure that the home energy supplier will charge the eligible household, in the normal billing process, the difference between th actual cost of the home energy and the amount of the payment?  All vendors are required to sign a vendor agreement. Contingent on signing the agreement, the vendor will be required to comply with the Kentucky Administrative Regulation 921 KAR 4:116, Section 10 and Section 2605(b)(7) of the Low Income Home Energy Assistance Act of 19 1 as amended.
9.4 How do you assure that no household receiving assistance under this title will be treated adversely because of their receipt of LIHEAP assist nce?  All vendors are required to sign a vendor agreement. The vendor agrees to comply with the Kentucky Administrative Regulation 921 KAR R 4:116. Also, Community Action Agencies are required by contractual agreement to monitor vendors once within a five (5) year period.
9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible househos?  • Yes No
If so, describe the measures unregulated vendors may take.
For unregulated fuel sources(wood, coal, propane, fuel oil and kerosene) payment will not be made until the fuel has been delivered or privided and the vendor has submitted documentation that the consumer has accepted the fuel.

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

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

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

Program Monitoring: CAK will monitor the local community action agencies" LIHEAP program at least once during the program year to a ssure the appropriate delivery of services and documention of case actions and billings. Monitoring reports will be completed for each monitoring visit and will include a description of any corrective action to be taken. CAK will follow up on all correction plans and report resolutions to DCB S. A copy of each monitoring report, including corrective actions, if necessary will be forwarded to DCBS for review.

DCBS will review CAK's monitoring plan to ensure sufficiency of activities. At a minimum, DCBS will receive and review monitoring re ports, single audit reports, and corrective action plans. DCBS has engaged the CHFS Office of Inspector General to perform quality reviews of C AK and all Kentucky Community Action Agencies audit reports.

DCBS, Division of Administration and Financial Management (DAFM), Contract Performance Branch, will monitor CAK during the year to assure that the operation of the program is in compliance with all contract requirements and federal statutes.

Kentucky Housing Corporation (KHC) receives an audit of their Weatherization Assistance Program (including LIHEAP funded Weatheri zation) as part of the Statewide Audit of the Commonwealth, performed by Kentucky's Auditor of Public Accounts. DCBS reviews the statewide audit for any findings related to the program.

KHC will monitor the local community action agencies' weatherization program at least once during the program year. The purpose of the monitoring is to assess program compliance with the Kentucky Weatherization Assistance Program (WAP) requirements. Monitoring reports completed for each CAA will include a description of concerns, observations or findings, which will require a corrective action plan. A copy of each monitoring report, including corrective action plans will be provided to DCBS for review. See the attached monitoring tool and checklist utilized by KHC.

The DAFM Contract Performance Section monitors DCBS contractors for compliance with contractual provisions and federal/state laws. The Contract Performance Section prioritizes the annual monitoring of all contractors whose funding total require the contractor to undergo an an nual audit performed in accordance with 2 CFR, Part 200 Subpart F. All DCBS contractors receive an on-site monitoring no less than once every three years or are monitored more frequently upon request of DCBS program staff.

Fiscal Monitoring: Methods and procedures are in place for properly charging the costs of administraction under the plan and are maintain ed in accordance with Federal requirements as specified in 45 CFR 205.150 and 45 CFR Part 95 Subpart E, including identifying costs applicable to each of the separate federal programs. Revisions in such methods and procedures are submitted by CHFS on a timely basis for approval by the Department of Health and Human Services.

Procedures for determining reasonableness, allowability and allocability of costs are in accordance with provision P.L 97-35, as amended, 45 CFR Parts 75 and 96 as applicable, 2 CFR Part 200 Subpart E and federal agency implementing agencies as applicable and applicable state law s including KRS 273.410 through 273.468 through 45.359. These requirements are applicable to subcontractors who will be required to report to CAK in a manner that meets CAK"s reporting requirements to the Cabinet.

Audit	Process
Luuit	110003

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

10.3. Describe any audit findings rising to the level of material weakness or reportable condition cited in the A-133 audits, Grantee monitoring as sessments, inspector general reviews, or other government agency reviews of the LIHEAP agency from the most recently audited fiscal year.

Finding	Type	Brief Summary	Resolved?	Action Taken
	financial	Southern KY CAA had a finding reg arding controls over financial proces s to ensure funding was reconciled p roperly.	In Progress	staffing/management changes
	reporting	Pennyrile Allied Community Service s. There was a lack of the grant direc tor's approval for items charged to gr ants.	Yes	procedure/policy changes
	reporting	Pennyrile - Indirect costs were not c harged in accordance wit the Agency 's indirect cost plan.	Yes	procedure/policy changes
	financial	Pennyrile: Management oversight, in cluding applicable controls, has not been implemented in such a way as t o provide sufficient oversight and en sure compliance over sub-recipients' monitoring per OMB Uniform Guida nce.	Yes	staffing/management changes
	financial	Pennyrile: documentation of verifica tion of low income status could not b e located in the file.	Yes	training changes
	financial	Pennyfile: the allocation of insuranc e expense to the grant was not suppo rted	Yes	procedure/policy changes
	other	Bell-Whitley CAA has a case file no t created. Case was denied for excess income	Yes	training changes
	financial	Harlan - income was calculated inco rrectly resulting in an incorrect benef it amount.	In Progress	procedure/policy changes
	financial	Harlan - incorrect benefit amount wa s given due to one household membe r not added to the case.	In Progress	procedure/policy changes
	financial	Southern - audit not submitted to CA K .	In Progress	procedure/policy changes
Loc	t apply.  cal agencies/district cal agencies/district cal agencies/district	offices are required to have an annual at offices are required to have an annual at offices 'A-133 or other independent audit and program monitoring of local agence.	udit in compliance with Single udit (other than A-133) its are reviewed by Grantee as	Audit Act and OMB Circular A-133
	Monitoring e the Grantee's stra	ategies for monitoring compliance with th	ne Grantee's and Federal LIHI	EAP policies and procedures: Select al
rantee emp	loyees: ernal program revi	ew		
	partmental oversigl			
-		nvoices and payments		
	-	mechanisms are in place. Describe:		
Oth				

On - site evaluation
Annual program review
Monitoring through central database
✓ Desk reviews
Client File Testing / Sampling
Other program review mechanisms are in place. Describe:
10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.
CAK monitors the local community action agencies which operate LIHEAP at lease once during the program year to assure the appropriat e delivery of services and documentation of case actions for each monitoring visit. This will include a description of corrective actions to be taken . By contractual agreement, CAK will follow up on all corrective action plans and report the resolution to DCBS. Please see the attached monitor ing tool and schedule.
10.7. Describe how you select local agencies for monitoring reviews.
Site Visits:  DCBS will physically monitor all twenty-three (23) local sites every three years. The monitoring schedule is developed with CAK to visit 1/3 of the sites each year. Should an agency have findings in their monitoring review, or a change in leadership, an on-site review will be conducted.
Desk Reviews:
Desk reviews are completed annually for the remaining 2/3 of agencies not monitored on-site.
10.8. How often is each local agency monitored?  Annually, either on-site or by desk review.
10.9. What is the combined error rate for eligibility determinations? OPTIONAL
10.10. What is the combined error rate for benefit determinations? OPTIONAL
10.11. How many local agencies are currently on corrective action plans for eligibility and/or benefit determination issues? 0
10.12. How many local agencies are currently on corrective action plans for financial accounting or administrative issues? 2
If any of the above questions require further explanation or clarification that could not be made in

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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 deve Select all that apply.	elopment of your LIHEAP plan?			
Tribal Council meeting(s)				
<b>✓</b> Public Hearing(s)				
Draft Plan posted to website and available for co	omment			
Hard copy of plan is available for public view ar	nd comment			
Comments from applicants are recorded				
Request for comments on draft Plan is advertise	d			
Stakeholder consultation meeting(s)				
Comments are solicited during outreach activities	es			
Other - Describe:				
A public hearing was on July 9, 2019. There was a subject of the Liheap plan as no changes will be made to the Liheap plan in the changes will be made to the Liheap plan.	s a result of this participation?			
Public Hearings, 2605(a)(2) - For States and the Common	wealth of Puerto Rico Only			
11.3 List the date and location(s) that you held public hear	ring(s) on the proposed use and distribution	of your LIHEAP funds?		
	Date	Event Description		
1	07/09/2019	Public Hearing was held July 9, 2019 by the Legislative Research Commission. Special S ubcommittee on Energy, Frankfort KY		
11.4. How many parties commented on your plan at the hearing(s)? 0				
11.5 Summarize the comments you received at the hearing(s).				
Public hearing was held July 9, 2019.				
11.6 What changes did you make to your LIHEAP plan as	s a result of the comments received at the pu	blic hearing(s)?		
No changes will occur for the state plan as a result of the comments received at the public hearing.				
If any of the above questions require fu the fields provided, attach a document		ion that could not be made in		

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

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

12.1 How many fair hearings did the grantee have in the prior Federal fiscal year? 0

12.2 How many of those fair hearings resulted in the initial decision being reversed? 0

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.

An opportunity for a hearing is made available in accordance with community action agency apppeal procedures as stated in the LIHEAP manual. A hearing will be granted to any individual requesting a hearing because his claim for assistance is denied or not acted upon in a timely manner.

Requests for a hearing must be in writing. The community action agency may assist the claimant in submitting the request. Time allowed for claimants to file for a hearing in thirdy(30) days from the date of the notice of the eligibility decision.

If dissatisfied with the community action agency decision, the claimant may further appeal to CAK. If dissatisfied with the decision of CA K, the claimant may appeal through CHFS.

Hearings are conducted at a reasonable time, date and place. Adequate preliminaty written notice is given. The hearings are conducted by an impartial offical or disignee of the agency who has not been directly involved in the initial determination of the action in question. The claimn ants, or their representatives, are given adequate opportunity to examine the contents of the case file, all documents, and records to be used at the hearing, to present the case themselves or with the aid of an authorized representative to bring witnesses, to establish all pertinent facts and circuma tances to advance arguments without undue interference, and to question or refute testimony or evidence including the opportunity to confront and cross-examine adverse witnesses.

Recommendations or decisions of the hearing officer are based exclusively on evidence and other material introduced at the hearing. The t ranscript or recording of testimony and exhibits, all papers and requests filed in the proceeding and the recommentation or decition of the hearing office constitute the exclusive record. The record is made available to the claimants or representatives at an accessible place and at a reasonable ti

Decisions by the hearing authority will specify the reasons for the decision and identify the supporting evidence and regulations.

When a hearing decision is appealed any individual involved in making the original decision may not take part in making the decision on the appeal.

Final administrative action will be taken within ninety(90) days from the date of the request for a hearing and the claimant is notified in wr iting of the action.

When the decision is adverse to the claimant, the notice will inform the claimant of the right to appeal to the appeal board and to judicial review.

When the decision is favorable to the claimant, the agency shall promptly make a payment.

Subject to provision for safeguarding public assistance information, all hearing decisions of the agency are accessible to the public.

Weatherization: The CAAs are responsible to resolving all client complaints, including applicant denials, project deferrals, and work qualit y issues.

Each agency establishes a clear, objective and prompt disput resolution process that includes mediation and arbitration should internal procedures fail to remedy a complaint. Clients must be informed at time of application of their right to file a greviance. Agencies will also be responsive to requests for information regarding the disput resolution process. Clients may withdraw a greviance at any time with the understanding they may re-enter the process at the point they withdrew if a complaint is not resolved.

KHC approves and monitors the agency's disput process and is available to technical assistance and consultation. KHC will also review co

mplaints and ensure all complaints have been resolved.
12.5 When and how are applicants informed of these rights?
All claimants are informed at the time of application and at the time of any action affecting their claim of their right to a hearing, the metho d of obtaining it, and their right to be represented by others or to represent themselves.
12.6 Describe your fair hearing procedures for households whose applications are not acted on in a timely manner.
Same as section 12.4
12.7 When and how are applicants informed of these rights?
Same as section 12.5
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.

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

#### 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 ther eby the need for energy assistance?

Every Community Action Agency is given the opportunity to provide counseling to help reduce the households' energy bills. The agencies that do utilitze LIHEAP funds for Assurance 16 will provide energy reduction solutions and education, including but not limited to the completion of and follow up on Weatherization applications. The CAAs will provide services based on the needs in their area, assisting household with the th orough and long-term plan to reduce energy usage and energy burden.

The following are examples from agencies that provided services during the past LIHEAP season: (1) Northern KY CAA offers all eligible households the opportunity to apply for weatherization services. This application allows the family to take a more in-depth look at their energy us age and the opportunity to have a professional assessment of their home to ensure the home is energy efficient. Improvements and repairs may be done to the home to improve efficiency. NKCAC is able to work more intimately with the household to assess not only their energy usage, but th eier financial situation as a whole through Financial Empowerment Education with a certified financial counselor. (2) Lexington Fayette-CAC of fered information/material to applicants to help the household be more conscious of actions they can take to reduce energy consumption and save money. Intake workers talk with clients about their home energy costs. Applicants are asked to sign an Energy Counseling form confirming they have discussed and received printed materials regarding energy conservation. Lexington's database has the capability of flagging all applicants with referrals to energy counseling and identifying the programs that provide those services. (3) Louisville Metro CAA partnered with a utility company and other organizations to connect clients with energy conservation programs, bill management, workshops, and to distribute weatherization materials. Louisville Metro CAA provivdes energy conservation tip sheets and information regarding reduction of energy costs. Information in cludes tv and readio announcements, printed energy tips and other information. Louisville Metro refers LIHEAP applicants to other utility assistance programs including Project Warm and LG&E We Care program. These referrals can assist clients to be more educated about ways to reduce energy costs and lessen their energy burden.

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

An assurance is written into the contract with CAK, and the subcontracts between CAK and the community action agencies, that a community action agency may use up to 5% of the crisis allocation to provide services to encourage households to reduce their energy costs.

The cost of developing and providing such services does not count toward the maximum benefit level for any single household. CAK assi sts all community action agencies interested in providing such services in developing plans for the use of such funds for review and approval by D CBS prior to the provision of services. Final approval of such plans shall be given by DCBS.

The CAAs also budget and monitor expenses to ensure no more than 5% is used for counseling.

#### $13.3\ Describe the impact of such activities on the number of households served in the previous\ Federal\ fiscal\ year.$

Through LIHEAP assistance and the education and information provided through budget/energy counseling, it is anticipated that househol ds can learn of energy saving steps that can assist with keeping home energy costs lower and more affordable. Northern Kentucky CAC assisted 9 2 families choosing to participate in financial counseling. 35 households accessed their credit reports and 24 increased their credit score within the first 60 days of financial counseling.

#### 13.4 Describe the level ofdirect benefitsprovided to those households in the previous Federal fiscal year.

There are several other programs available to LIHEAP applicants for energy assistance, including WinterCare an ongoing assistance program for home energy. NKCAC clients received weatherization benefits as well as participating in First Time Homebuyer Program classes, attending Budget and Counseling classes, and having tax returns filed.

13.5 How many households applied for these services?  $\ensuremath{\mathrm{n/a}}$ 

13.6 How many households received these services? 37,587

August 1987, revised 05/92,02/95,03/96,12/98,11/01

OMB Clearance No.: 0970-0075

Expiration Date: 09/30/2020

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

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

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

C Yes O No

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

DCBS will work with the Community Action Agencies explaining all information needed to complete leveraging report. A solicitation packet will be provided to each CAA which includes the Action Transmittal instructions, link to the Federal Statues and Regulations, and the resource form. The grantee is available to asswer any questions if needed.

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:

uescribe the following:							
Resource	What is the type of res ource or benefit ?	What is the source(s) of the res ource ?	How will the resource be integrated and coordinated with LIHEAP?				
1	Winter Care Program	This is a utility customer con tribution fuel fund program.	Administered by Community Action Council for Lexington-Fayette, Bourbon, Haison, and Nicholas counties to supplement LIHEAP benefits when LIHEAP benefits are insufficient to meet the needs of the household.				
2	Winterhelp	This is a utility customer con tribution program that receiv es donations from the comm unity and a matching percent age from the local utility co mpany to be distributed to ho useholds in the Louisville/Jef ferson county area.	One time payments are made to the vendor. Louisville Gas and Electric for custom ers who are facing a utility crisis and the maximum crisis benefits in LIHEAP are e xhausted or LIHEAP is not available.				
3	Columbia Gas Energ y Assistance Progra m	This program provides cash benefits and discounts on hea ting bills to Columbia Gas lo w-income customers.	This resource serves households that are eligible for and receive LIHEAP subsidy. An agreement between Columbia Gas of Kentucky and Community Action Counci 1 specific eligibility criteria, benefit levels, period of operation and how LIHEAP re sources are integrated.				
4	Delta Gas Energy As sistance Program	Cash benefits for low-incom e Delta customers which pro vides a credit to their Delta Gas account for the 5 heating months (Nov - Mar).	Resource serves households that are eligible for and receive LIHEAP subsidy. An a greement between Delta Natural Gas and Community Action Council specifies eligibility criteria, benefit levels, period of operation and how LIHEAP resources are in tegrated.				
5	Salvation Army, Unit ed Way, Schools Min isterial Associations, Churches, and other non-profit organizati ons.	Private cash donations or in- kind donations.	Funds will be used to supplement LIHEAP or used when LIHEAP funds are expended.				
6	Demand Side Manag ement	Demand Side Management p rograms are utility sponsored energy efficiency programs t o lower the current demand f or energy	Enhances low-income households by providing weatherization services.				
7	Distribution of fans, air conditioners, and payments toward util ity bills.	Private cash donations or in- kind donations by communit y action agencies, utility com panies, city and county gover nment and civic organization s.	**				

8	Project Warm and ot her similar resources	Provided by local nonprofit o rganizations and utility companies	Provides weatherization activities and energy audits, window replacements, insulati on materials to low income households.			
9	Affordable Energy C orporation	Provides year found monthly cash benefits to LG&E custo mers	All clients must participate in energy education, conservation and weatherization rvices.			
10	Certificate of Need ( CFN)	Governed by the Public Serv ice Commission and adminis tered by CAAs to either give a 30 day extension or a reconnection for services for a natural gas and electric household.	Clients must meet the criteria for LIHEAP and agree to apply for the weatherization program, if applicable.			
11	Miscellaneous Lever aging Activities  Waivers of utility application s, reconnect fees, late payme nt charges, security deposits, reimbursement for energy eff icient appliances, and reduce d cost for fuel.		Client must meet the criteria for LIHEAP			
12	Columbia Gas Warm Wise	Replacement of furnaces wit h more energy efficient furna ces.	* * *			

## **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.: 0970-0075

Expiration Date: 09/30/2020

Section 15: Training						
15.1 Describe the training you provide for each of the following groups:						
a. Grantee Staff:						
Formal training on grantee policies and procedures						
How often?						
<b>✓</b> Annually						
Biannually						
As needed						
Other - Describe:						
Employees are provided with policy manual						
Other-Describe:						
b. Local Agencies:						
Formal training conference						
How often?						
Annually						
Biannually						
As needed						
Other - Describe:						
✓ On-site training						
How often?						
Annually						
Biannually						
As needed						
Other - Describe:						
Employees are provided with policy manual						
Other - Describe CAK may provide teleconferences as needed.						
c. Vendors						
Formal training conference						
How often?						
Annually						
Biannually						
As needed						

Other - Describe:						
Policies communicated through vendor agreements						
Policies are outlined in a vendor manual						
Other - Describe: Policies are provided to vendors through vendor agreements.						
15.2 Does your training program address fraud reporting and prevention?  • Yes • No						
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 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.: 0970-0075

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

#### 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 performance measure s. Include timeframes and plans for meeting these requirements and what you believe will be accomplished in the coming federal fiscal year.

Community Action Kentucky collects data for performance measures from appropriate fuel vendors to compile the data for the 2020 Performance Measures Report. CAK will request the performance measures data from the appropriate fuel vendors in order to complete the 2020 Performance Measures Report. These reported measures may reveal information that could assist our agencies in potential areas where some of the citi zens of the commonwealth may be overlooked. These measures can sharpen our focus on better serving the most vulnerable populations of our state.

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Section 17: Program Integrity, 2605(b)(10)							
17.1 Fraud Reporting Mechanisms	17.1 Fraud Reporting Mechanisms						
a. Describe all mechanisms availab	ole to the public for reporting cases of	f suspected waste, fraud, and abuse. S	elect all that apply.				
Online Fraud Reportin	g						
Dedicated Fraud Repor	rting Hotline						
Report directly to local	agency/district office or Grantee offi	ce					
Report to State Inspect	or General or Attorney General						
Forms and procedures	in place for local agencies/district off	ices and vendors to report fraud, was	te, and abuse				
Other - Describe:							
b. Describe strategies in place for a	advertising the above-referenced reso	urces. Select all that apply					
Printed outreach mater	rials						
Addressed on LIHEAP	application						
Website							
Other - Describe:							
Posters which include the Office of Inspector General's Fraud Hotline are posted in community action agencies. Also, it is addressed on the client's dential notification.							
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 m embers.							
		Collected from Whom?					
Type of Identification Collected		Concetted from Whom.	Î				
	Applicant Only	All Adults in Household	All Household Members				
Social Security Card is photocopi ed and retained	Required	Required	Required				
	Requested	Requested	Requested				
Social Security Number (Without actual Card)	Required	Required	Required				
	Requested	Requested	Requested				
	Required	Required	Required				

Government-issued identification card		<b>&gt;</b>									
(i.e.: driver's license, state ID, Tri			Requested			Requested	aguantad		Requested		
bal ID, passport, etc.)			Requesteu			Kequesteu			Requesteu		
	Other		Applicant Only Applicant On Required Requested			All Adults in Hou sehold Required	All Adults in Ho hold Requested	use	All Household Me mbers Required	All Household Members Requested	
1											
b. D	b. Describe any exceptions to the above policies.  Any household member who does not have a SSN must be advised to apply for one at the Social Security Office. Documentation consistin g of a signed and dated statement from a SSA representative, a SS-5, or receipt of application for a SSN (SS-5028) will be accepted.  A child under two years of age that has not applied for a SS card will be exempt.										
17.	3 Identification Verification										
Des app	scribe what methods are used to	o ver	ify the authenticity	of identificat	ion c	locuments provid	led by clients or	hou	sehold members.	Select all that	
	Verify SSNs with Social Se	curit	ty Administration								
	Match SSNs with death red	ords	s from Social Secur	ity Administr	atior	or state agency					
V	Match SSNs with state elig	ibilit	y/case managemen	t system (e.g.,	SNA	AP, TANF)					
	Match with state Departme	ent o	f Labor system								
	Match with state and/or fee	deral	l corrections systen	n							
	Match with state child sup	port	system								
	Verification using private s	oftw	are (e.g., The Wor	k Number)							
	In-person certification by s	taff	(for tribal grantees	only)							
	Match SSN/Tribal ID num	ber v	with tribal databas	e or enrollme	nt re	cords (for tribal g	grantees only)				
	Other - Describe:										
17.	4. Citizenship/Legal Residency	Veri	ification								
	nat are your procedures for ens hat apply.	urin	g that household m	embers are U	.S. ci	tizens or aliens w	ho are qualified	l to 1	eceive LIHEAP	benefits? Select	
	Clients sign an attestation of citizenship or legal residency										
N	Client's submission of Social Security cards is accepted as proof of legal residency										
	Noncitizens must provide	docu	umentation of imm	igration statu	s						
	Citizens must provide a co	ору о	of their birth certifi	icate, naturali	zatio	n papers, or pass	sport				
	Noncitizens are verified through the SAVE system										
	Tribal members are verified through Tribal enrollment records/Tribal ID card										
	Other - Describe:										
17.5. 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:			
	Most recent DCBS award letter for KTAP, State Supplementation, or Kinship Care.			
	Pension statement			
	Internal Revenue Service records			
	Veterans Administration records			
	Railroad Retirement records			
	Court support records			
	Union records			
SSA verification forms				
College financial aid award documents				
Contracts for sale of property				
Statement from absent parent or copy of checks from absent parent for support payments				
	statement from individual providing income to the consumer			
	employer statement or contract			
	records maintained by individual or self-employment income			
	contracts			
	records of income and expenses on farm or rental income			
Con	nputer 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:			
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				
Grantee LIHEAP database includes privacy/confidentiality safeguards				
Employee training on confidentiality for:				
✓ (	Grantee employees			
<b>✓</b> 1	ocal agencies/district offices			
<b>✓</b> Empl	oyees must sign confidentiality agreement			
✓ (	Frantee employees			
✓ Local agencies/district offices				
Physical files are stored in a secure location				
✓ Other - Describe:				
Othe				
by the				
by the	r - Describe:  Per contractual agreement CAK and the CAAs are required to maintaint confidential information acquired from the applicants or provided Cainet consistent with the requirements of KRS194A.060. Confidentiality of Records and Reports, KRS 205.175. Confidential treatment			
by the of info	Per contractual agreement CAK and the CAAs are required to maintaint confidential information acquired from the applicants or provided Cainet consistent with the requiremenets of KRS194A.060. Confidentiality of Records and Reports, KRS 205.175. Confidential treatment ormation and records, and KRS 205.177 informration may be shared by state and local government agencies.			
by the of info	Per contractual agreement CAK and the CAAs are required to maintaint confidential information acquired from the applicants or provided Cainet consistent with the requiremenets of KRS194A.060. Confidentiality of Records and Reports, KRS 205.175. Confidential treatment ormation and records, and KRS 205.177 informration may be shared by state and local government agencies.  In the Authenticity			
by the of info	Per contractual agreement CAK and the CAAs are required to maintaint confidential information acquired from the applicants or provided Cainet consistent with the requiremenets of KRS194A.060. Confidentiality of Records and Reports, KRS 205.175. Confidential treatment ormation and records, and KRS 205.177 informration may be shared by state and local government agencies.  In the Authenticity  The same in place for verifying vendor authenticity? Select all that apply.			

Grantee and/or local agencies/district offices perform physical monitoring of vendors
Other - Describe and note any exceptions to policies above:
AND D. C. D. C. LEL C. Ville
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
<b>✓</b> 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:
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, a nd 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 Grantee
Vendor agreements specify requirements selected above, and provide enforcement mechanism
Other - Describe:
During crisis CAK is required to oprovide the cabinet with a bulk fuel pricing report that compares fuel prices from local vendors wit the US Energy Information Administration.
CAAs are responsible for obtaining pricing from vendors in writing prior to the state of LIHEAP and any subsequent changes in fuel pricin g should also be done in writing during LIHEAP season.
17.10. Investigations and Prosecutions
Describe the Grantee's procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients/staff/vendors found to have committed fraud. Select all that apply.

Refer to state Inspector General
Refer to local prosecutor or state Attorney General
Refer to US DHHS Inspector General (including referral to OIG hotline)
Local agencies/district offices or Grantee conduct investigation of fraud complaints from public
Grantee attempts collection of improper payments. If so, describe the recoupment process
Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned?
Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated
Vendors found to have committed fraud may no longer participate in LIHEAP
Other - Describe:
CAK and local CAAs are required to document instances of fraud and abuse that occur during the program. Agencies are required to 1. c omplete the fraud and abuse report on each suspected case of fraud and abuse 2. submit a copy of the initial report to CAK at the time the fraud is initially suspected, and the local investigation of the case has begun 4. file a copy of each fraud and abuse report in the consumer's folder and 5 su bmit the report to the cabinet for further investigation if needed.
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 Responsi bility Matters

Certification Regarding Debarment, Suspension, and Other Responsibility Matter s--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 n ecessarily result in denial of participation in this covered transaction. The prospecti ve 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. Ho wever, 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.BrBbr.
- 4. The prospective primary participant shall provide immediate written notice t o 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 co vered transaction, participant, person, primary covered transaction, principal, prop osal, 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 1 2549. You may contact the department or agency to which this proposal is being su bmitted 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 ent er into any lower tier covered transaction with a person who is proposed for debar ment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authoriz ed by the department or agency entering into this transaction.
- 7. The prospective primary participant further agrees by submitting this propos all that it will include the clause titled ``Certification Regarding Debarment, Suspens ion, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provide d by the department or agency entering into this covered transaction, without modi

fication, in all lower tier covered transactions and in all solicitations for lower tier c overed transactions.

- 8. A participant in a covered transaction may rely upon a certification of a pros pective participant in a lower tier covered transaction that it is not proposed for deb arment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or volunt arily 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 establishm ent 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 ex ceed 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 t ransaction with a person who is proposed for debarment under 48 CFR part 9, subp art 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation i n this transaction, in addition to other remedies available to the Federal Governmen t, the department or agency may terminate this transaction for cause or default.

## Certification Regarding Debarment, Suspension, and Other Responsibility Matter s--Primary Covered Transactions

- (1) The prospective primary participant certifies to the best of its knowledge an d belief, that it and its principals:
- (a) Are not presently debarred, suspended, proposed for debarment, declared i neligible, 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 crimi nal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violati on of Federal or State antitrust statutes or commission of embezzlement, theft, forg ery, bribery, falsification or destruction of records, making false statements, or rece iving 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 offense s 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 def ault.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explan ation 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 participa nt 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 low er 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 co vered transaction, participant, person, primary covered transaction, principal, prop osal, and voluntarily excluded, as used in this clause, have the meaning set out in t he Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in o btaining a copy of those regulations.
- 5. The prospective lower tier participant agrees by submitting this proposal tha t, [[Page 33043]] should the proposed covered transaction be entered into, it shall n ot knowingly enter into any lower tier covered transaction with a person who is pro posed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declar ed ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originat ed.
- 6. The prospective lower tier participant further agrees by submitting this prop osal that it will include this clause titled ``Certification Regarding Debarment, Susp ension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," with out 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 pros pective participant in a lower tier covered transaction that it is not proposed for deb arment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or volunt arily excluded from covered transactions, unless it knows that the certification is er roneous. A participant may decide the method and frequency by which it determine s 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 establishm ent 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 ex ceed 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, i f 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 explan ation to this proposal.
- **☑** By checking this box, the prospective primary participant is providing the ce rtification set out above.

### 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 receip t point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notific ation of criminal drug convictions. For the Department of Health and Human Services, the central pint 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 grantee is providing the certification set out below.
- 2. The certification set out below is a material representation of fact upon which r eliance is placed when the agency awards the grant. If it is later determined that t he grantee knowingly rendered a false certification, or otherwise violates the req uirements of the Drug-Free Workplace Act, the agency, in addition to any other r emedies available to the Federal Government, may take action authorized under t he Drug-Free Workplace Act.
- 3. For grantees other than individuals, Alternate I applies.
- 4. For grantees who are individuals, Alternate II applies.
- 5. Workplaces under grants, for grantees other than individuals, need not be ide ntified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or up on award, if there is no application, the grantee 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 ee's drug-free workplace requirements.
- 6. Workplace identifications must include the actual address of buildings (or part s 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 hi ghway department while in operation, State employees in each local unemploym ent office, performers in concert halls or radio studios).
- 7. If the workplace identified to the agency changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously iden

tified the workplaces in question (see paragraph five).

8. Definitions of terms in the Nonprocurement Suspension and Debarment comm on rule and Drug-Free Workplace common rule apply to this certification. Grante es' 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 grantee 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 ee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

**Certification Regarding Drug-Free Workplace Requirements** 

Alternate I. (Grantees Other Than Individuals)

The grantee 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 grantee's workplace and specifying the actions that will be taken against employ ees 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 grantee's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance program s; and
- (4) The penalties that may be imposed upon employees for drug abuse violations o ccurring 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 crimina I 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 u nder paragraph (d)(2) from an employee or otherwise receiving actual notice of suc h conviction. Employers of convicted employees must provide notice, including po sition 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 p oint 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 u nder 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 termin ation, consistent with the requirements of the Rehabilitation Act of 1973, as amend ed; 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 h ealth, 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 grantee may insert in the space provided below the site(s) for the performa nce of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

275 E Main Street 3 E-I  * Address Line 1		
Address Line 2		
Address Line 3		
Frankfort  * City	KY * State	40601 * Zip Code

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

#### Alternate II. (Grantees Who Are Individuals)

- (a) The grantee 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 durin g the conduct of any grant activity, he or she will report the conviction, in writing, w ithin 10 calendar days of the conviction, to every grant officer or other designee, un

less 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 numb er(s) of each affected grant.

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

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

#### 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 of ficer 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 awar ding 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 p aid to any person for influencing or attempting to influence an officer or employe e of any agency, a Member of Congress, an officer or employee of Congress, or a n employee of a Member of Congress in connection with this Federal contract, gr ant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with i ts instructions
- (3) The undersigned shall require that the language of this certification be includ ed 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 f or 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 f ailure.

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 attem pting 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 gu arantee 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 transact

ion 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 ce rtification set out above.

#### Assurances

- (1) use the funds available under this title to--
  - (A) conduct outreach activities and provide assistance to low income househol ds in meeting their home energy costs, particularly those with the lowest incomes t hat pay a high proportion of household income for home energy, consistent with pa ragraph (5);
    - (B) intervene in energy crisis situations;
  - (C) provide low-cost residential weatherization and other cost-effective energyrelated home repair; and
  - (D)plan, develop, and administer the State's program under this title including I everaging 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 Improve ment 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 s olely 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, espe cially households with elderly individuals or disabled individuals, or both, and h ouseholds 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 und

er any other provision of law which carries out programs which were administere d 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 adm inistered by the Federal Government and such State, particularly low-income ene rgy-related programs under subtitle B of title VI (relating to community services block grant program), under the supplemental security income program, under p art 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 E nergy Conservation and Production Act, or under any other provision of law whi ch 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 furnish ed to those households which have the lowest incomes and the highest energy c osts or needs in relation to income, taking into account family size, except that t he 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 orde r to carry out the purposes of this title, to give special consideration, in the desig nation of such agencies, to any local public or private nonprofit agency which w as receiving Federal funds under any low-income energy assistance program or weatherization program under the Economic Opportunity Act of 1964 or any othe r 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; a nd
  - (B) if there is no such agency because of any change in the assistance furnish ed to programs for economically disadvantaged persons, then the State shall give s pecial consideration in the designation of local administrative agencies to any succ essor agency which is operated in substantially the same manner as the predecess or agency which did receive funds for the fiscal year preceding the fiscal year for w hich 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 ener gy 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 agre ement entered into with a home energy supplier under this paragraph will contain p

rovisions to assure that no household receiving assistance under this title will be tr eated adversely because of such assistance under applicable provisions of State la w or public regulatory requirements; and

(D) ensure that the provision of vendor payments remains at the option of the State in consultation with local grantees and may be contingent on unregulated ven dors taking appropriate measures to alleviate the energy burdens of eligible house holds, 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 sub section from receiving home energy assistance benefits under clause (2), and
- (B) the State will treat owners and renters equitably under the program assiste d 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 plannin g and administering the program assisted under this title and will not use Federal f unds for such remaining cost (except for the costs of the activities described in par agraph (16));
- (10) provide that such fiscal control and fund accounting procedures will be esta blished as may be necessary to assure the proper disbursal of and accounting fo r Federal funds paid to the State under this title, including procedures for monito ring the assistance provided under this title, and provide that the State will comp ly with the provisions of chapter 75 of title 31, United States Code (commonly kn own 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 an d intake functions for crisis situations and heating and cooling assistance that is administered by additional State and local governmental entities or community-b ased 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 age notices 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 enc ourage and enable households to reduce their home energy needs and thereby the need for energy assistance, including needs assessments, counseling, and a ssistance 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.

### **Plan Attachments**

PLAN ATTACHMENTS			
The following documents must be attached to this application			
Delegation Letter is required if someone other than the Governor or Chairman Certified this Report.			
Heating component benefit matrix, if applicable			
Cooling component benefit matrix, if applicable			
Minutes, notes, or transcripts of public hearing(s).			