

## DETAILED MODEL PLAN (LIHEAP)

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

**Grantee Name:** North Dakota

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

**Report Period:** 10/01/2020 to 09/30/2021

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

### Report Sections

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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

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

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

**7. APPLICANT INFORMATION**

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

<b>* b. Employer/Taxpayer Identification Number (EIN/TIN):</b> 45-0309764W	<b>* c. Organizational DUNS:</b> 802743534
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**\* d. Address:**

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

**e. Organizational Unit:**

<b>Department Name:</b> Department of Human Services	<b>Division Name:</b> Economic Assistance Policy Division
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**f. Name and contact information of person to be contacted on matters involving this application:**

<b>Prefix:</b>	<b>* First Name:</b> Robin	<b>Middle Name:</b> C	<b>* Last Name:</b> Addington
<b>Suffix:</b>	<b>Title:</b> HSPA III - LIHEAP Program Administrator	<b>Organizational Affiliation:</b>	
<b>* Telephone Number:</b> (701) 328-2065	<b>Fax Number:</b> (701) 328-1060	<b>* Email:</b> raddington@nd.gov	

**\* 8a. TYPE OF APPLICANT:**  
C: City or Township Government


**b. Additional Description:**

**\* 9. Name of Federal Agency:**

	<b>Catalog of Federal Domestic Assistance Number:</b>	<b>CFDA Title:</b>
<b>10. CFDA Numbers and Titles</b>	93.568	Low-Income Home Energy Assistance Program

**11. Descriptive Title of Applicant's Project**

**12. Areas Affected by Funding:**

<b>13. CONGRESSIONAL DISTRICTS OF:</b>			
<b>* a. Applicant</b> 1		<b>b. Program/Project:</b> Statewide	
Attach an additional list of Program/Project Congressional Districts if needed. N/A			
<b>14. FUNDING PERIOD:</b>		<b>15. ESTIMATED FUNDING:</b>	
<b>a. Start Date:</b> 10/01/2020	<b>b. End Date:</b> 09/30/2021	<b>* a. Federal (\$):</b> \$0	<b>b. Match (\$):</b> \$0
<b>* 16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?</b>			
a. This submission was made available to the State under the Executive Order 12372			
Process for Review on :			
b. Program is subject to E.O. 12372 but has not been selected by State for review.			
c. Program is not covered by E.O. 12372.			
<b>* 17. Is The Applicant Delinquent On Any Federal Debt?</b>			
<input type="radio"/> YES <input checked="" type="radio"/> NO			
<b>Explanation:</b>			
<b>18. By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)</b> <b>**I Agree <input checked="" type="checkbox"/></b>			
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.			
<b>18a. Typed or Printed Name and Title of Authorized Certifying Official</b> Michele A. Gee		<b>18c. Telephone (area code, number and extension)</b>	
		<b>18d. Email Address</b> mgee@nd.gov	
<b>18b. Signature of Authorized Certifying Official</b> 		<b>18e. Date Report Submitted (Month, Day, Year)</b> 09/22/2020	
<b>Attach supporting documents as specified in agency instructions.</b>			

## 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)

1.1 Check which components you will operate under the LIHEAP program. (Note: You must provide information for each component designated here as requested elsewhere in this plan.)	Dates of Operation	
	Start Date	End Date
<input checked="" type="checkbox"/> Heating assistance	10/01/2020	05/31/2021
<input checked="" type="checkbox"/> Cooling assistance	10/01/2020	09/30/2021
<input checked="" type="checkbox"/> Crisis assistance	10/01/2020	09/30/2021
<input checked="" type="checkbox"/> Weatherization assistance	10/01/2020	09/30/2021

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

North Dakota's regular heating season program runs from 10/1/2020 - 5/31/2021. Applications for North Dakota's emergency (year-round crisis) program are accepted from 10/1/2020 - 9/30/2021.

The North Dakota State LIHEAP does not routinely include a cooling program. However, the State reserves the option to implement a temporary cooling program in the event of unusual cooling needs due to weather aberrations, or an emergency disaster, contingent upon available funding.

See Section X (Cooling Assistance Program) of the attached State Plan of Operation for details.

Also see Section C of the attached State Plan of Operation.

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	70.00%

Cooling assistance	1.00%
Crisis assistance	14.00%
Weatherization assistance	5.00%
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)	0.00%
Used to develop and implement leveraging activities	0.00%
<b>TOTAL</b>	<b>100.00%</b>

Alternate Use of Crisis Assistance Funds, 2605(c)(1)(C)

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

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

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

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

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

	Heating	Cooling	Crisis	Weatherization	
TANF	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	
SSI	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	
SNAP	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	
Means-tested Veterans Programs	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	
	Program Name	Heating	Cooling	Crisis	Weatherization
Other(Specify) 1		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

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

If Yes, explain:

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

SNAP Nominal Payments

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

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

1.7b Amount of Nominal Assistance: \$0.00

1.7c Frequency of Assistance

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

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 ?

<input checked="" type="checkbox"/>	Gross Income
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<input type="checkbox"/>	Net Income
<b>1.9. Select all the applicable forms of countable income used to determine a household's income eligibility for LIHEAP</b>	
<input checked="" type="checkbox"/>	Wages
<input checked="" type="checkbox"/>	Self - Employment Income
<input checked="" type="checkbox"/>	Contract Income
<input checked="" type="checkbox"/>	Payments from mortgage or Sales Contracts
<input checked="" type="checkbox"/>	Unemployment insurance
<input checked="" type="checkbox"/>	Strike Pay
<input checked="" type="checkbox"/>	Social Security Administration (SSA ) benefits
<input type="checkbox"/>	Including MediCare deduction
<input checked="" type="checkbox"/>	Excluding MediCare deduction
<input checked="" type="checkbox"/>	Supplemental Security Income (SSI )
<input checked="" type="checkbox"/>	Retirement / pension benefits
<input checked="" type="checkbox"/>	General Assistance benefits
<input checked="" type="checkbox"/>	Temporary Assistance for Needy Families (TANF) benefits
<input type="checkbox"/>	Supplemental Nutrition Assistance Program (SNAP) benefits
<input type="checkbox"/>	Women, Infants, and Children Supplemental Nutrition Program (WIC) benefits
<input type="checkbox"/>	Loans that need to be repaid
<input type="checkbox"/>	Cash gifts
<input type="checkbox"/>	Savings account balance
<input type="checkbox"/>	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.
<input checked="" type="checkbox"/>	Jury duty compensation
<input checked="" type="checkbox"/>	Rental income
<input checked="" type="checkbox"/>	Income from employment through Workforce Investment Act (WIA)
<input type="checkbox"/>	Income from work study programs
<input checked="" type="checkbox"/>	Alimony
<input checked="" type="checkbox"/>	Child support
<input checked="" type="checkbox"/>	Interest, dividends, or royalties
<input checked="" type="checkbox"/>	Commissions

<input checked="" type="checkbox"/>	Legal settlements
<input checked="" type="checkbox"/>	Insurance payments made directly to the insured
<input type="checkbox"/>	Insurance payments made specifically for the repayment of a bill, debt, or estimate
<input checked="" type="checkbox"/>	Veterans Administration (VA) benefits
<input type="checkbox"/>	Earned income of a child under the age of 18
<input type="checkbox"/>	Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.
<input type="checkbox"/>	Income tax refunds
<input type="checkbox"/>	Stipends from senior companion programs, such as VISTA
<input type="checkbox"/>	Funds received by household for the care of a foster child
<input type="checkbox"/>	Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
<input type="checkbox"/>	Reimbursements (for mileage, gas, lodging, meals, etc.)
<input checked="" type="checkbox"/>	<p><b>Other</b></p> <p>Some of the above categories of income may or may not be counted. For example, Interest on savings and CDs is not counted, however, dividends and interest on investments and trusts are counted when included as part of monthly or regular payment from annuity, pension fund or other retirement plan. One-time inheritance and insurance settlements are excluded as income if they are non-recurring lump-sum payment. Annual payments are considered recurring payments.</p> <p>See Section H.1. (Income Eligibility Criteria for Heating Assistance) of the attached State Plan of Operation for list of income inclusions, exclusions, and allowable deductions.</p> <p>See Countable and Excluded Income list attached.</p> <p>Also see Section C of the attached State Plan of Operation.</p>
<p><b>If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.</b></p>	

## Section 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 income eligibility threshold used for the heating component:

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

2.2 Do you have additional eligibility requirements for HEATING ASSISTANCE?  Yes  No

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

Do you require an Assets test ?  Yes  No

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

Renters?  Yes  No

Renters Living in subsidized housing ?  Yes  No

Renters with utilities included in the rent ?  Yes  No

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

Elderly?  Yes  No

Disabled?  Yes  No

Young children?  Yes  No

Households with high energy burdens ?  Yes  No

Other? Crisis situations  Yes  No

#### Explanations of policies for each "yes" checked above:

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

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

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

### Determination of Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)

#### 2.4 Describe how you prioritize the provision of heating assistance to vulnerable populations, e.g., benefit amounts, early application periods, etc.

Generally, household are served on a first come-first served basis, however, applications from fixed income households are accepted prior to the official start of the heating season. A mass mailing of applications to fixed income households is completed in September.

Early identification and crisis prevention is considered essential for "high risk" households, particularly those with vulnerable members. These households may be identified when the heating assistance application is received; or a utility or other fuel supplier may establish appropriate procedures to refer households with a vulnerable member for assistance or when a serious payment problem is first discovered.

In addition, all outreach activities emphasize reaching those households that include at least one elderly person or person with a disability.



Each of the county social service boards is also responsible to administer TANF, SNAP, Medicaid, and Title XX and other service programs. Therefore, the county social service boards can assure that these programs and energy programs are fully coordinated and are able to refer households with vulnerable members.

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

<input checked="" type="checkbox"/> <b>Income</b>
<input checked="" type="checkbox"/> <b>Family (household) size</b>
<input checked="" type="checkbox"/> <b>Home energy cost or need:</b>
<input checked="" type="checkbox"/> <b>Fuel type</b>
<input type="checkbox"/> <b>Climate/region</b>
<input checked="" type="checkbox"/> <b>Individual bill</b>
<input checked="" type="checkbox"/> <b>Dwelling type</b>
<input type="checkbox"/> <b>Energy burden (% of income spent on home energy)</b>
<input type="checkbox"/> <b>Energy need</b>
<input checked="" type="checkbox"/> <b>Other - Describe:</b>

Cost/Consumption Tables (Estimated Cost of Heating Matrix): LIHEAP in North Dakota uses a statewide cost/consumption table to determine a household's estimated costs of heating. The table is used to determine heating assistance benefits only. The table is based upon actual cost and consumption data reported for LIHEAP recipients in the LIHEAP data system.

Billing data reported directly from fuel suppliers, either electronically or on paper billing statements, is used to determine the cost of heating a dwelling/residence for the entire heating season. Billing data (i.e., total amount billed to client) is determined by several factors, including fuel consumption, cost of fuel, temperature/heating degree day data, the heating values of various fuels, and furnace efficiency factor for various fuels. Billing data therefore accounts for these factors in a single number/value.

Using actual billing data from the five most recent federal fiscal years (i.e., heating seasons), a distribution of total amount billed is generated, and MEDIAN house values are identified. Using historical billing data, the median house values are adjusted to estimate the total amount billed (i.e. heating costs) for various building types and number of bedrooms. These heating costs are then multiplied by a set percentage, based on historical billing data, to estimate the maximum cost of heating for each identified building type. Using these adjusted values, a single cost/consumption table is produced for the entire state, based on various sizes of living units, various types of buildings, and various types of fuel. A single cost/consumption table is produced for the entire state, based on various sizes of living units, various types of buildings, and various types of fuel.

Accurate consumption/cost data are not available for wood, coal, and other miscellaneous types of fuel, due to the very small number of LIHEAP recipients with these primary fuel types. Therefore, consumption and cost rates are best negotiated with the individual household on a case-by-case basis, using the previous year's usage and cost data. If not available, the natural gas rate will be used to compute benefits. (See Section I attached)

Benefit Calculation (See Section J attached): Heating assistance benefits are an individually determined percentage of the eligible household's actual heat cost incurred during each eligible month of the heating season, October through May. Heating fuel and some incidental charges may be included in the household's cost of heat.

The household is responsible to pay an affordable percentage of the actual heat cost. The amount each household can afford to pay for heat cost is based on family size and income:

- (1) One percent of the household's adjusted annual income if that income is less than or equal to one-third (1/3) of the income eligibility limits described in Section H, 1, of attached state plan, or
- (2) Two percent of the household's annual income if the income is more than one-third (1/3) but less than or equal to two-thirds (2/3) of the income eligibility limits described in Section H, 1, of attached state plan, or
- (3) Three percent of the household's adjusted annual income if the income is more than two-thirds (2/3) of the income eligibility limits described in Section H, 1, or attached state plan.

The household's percentage share is the amount calculated in (1), (2), or (3) above, divided by the estimated cost of heat from the cost/consumption tables described in Section I, 2, and rounded down to the nearest 5%. The remainder is the LIHEAP percentage share of the actual heat cost. Some households can demonstrate that they maintain home temperatures higher than anticipated in the cost/consumption tables due to age, disability, or health problem. If so, the household's percentage share will be based on the higher estimated cost of heat. Therefore, benefits take into account family size, income, and heat cost so that the greatest amount of assistance is provided to households with the lowest income and the highest energy costs.

The maximum LIHEAP percentage is 95% and the minimum LIHEAP percentage share is 10%. Eligible households whose LIHEAP percentage calculates to less than 6% will receive a one-time, \$50 cash benefit. These limits will assure that the eligible household will always pay a portion of each heat bill. The total amount paid for households whose heating bills include non-residential heating costs will not exceed the amount of that household's Estimated Cost of Heat multiplied by their calculated LIHEAP Share Percentage. All households that meet the heating assistance eligibility criteria in any month of the year may be provided any of the defined services and/or premium assistance, as needed, anytime through September 30, 2021, the end of federal fiscal year 2021. (See Section N of the attached state Plan for Emergency Assistance

Eligibility Criteria)

Minimum/Maximum Benefit Note:

The maximum benefit for FY2021 is unknown due to the uniqueness of our program. We do not issue a flat benefit amount from a matrix table. Instead, LIHEAP in North Dakota is a cost-sharing program in which the LIHEAP benefit is calculated as a LIHEAP Share Percentage (LS%). Once the LS% is established, LIHEAP will pay the LS% of total heating bills for any fuel received during the household's eligibility period. Therefore, the estimated minimum and maximum benefit for FY2021 is based on actual minimum and maximum benefit from FY 2020 for heating, emergency and furnace cleanings.

Attached is a copy of the Statewide Benefit Matrix for the 2020-2021 Heating Season.

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

**2.6 Describe estimated benefit levels for the fiscal year for which this plan applies**

<b>Minimum Benefit</b>	\$7	<b>Maximum Benefit</b>	\$6,608
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**2.7 Do you provide in-kind (e.g., blankets, space heaters) and/or other forms of benefits?**  Yes  No

**If yes, describe.**

Temporary heating devices and/or other consumer type goods may be provided under the **emergency component only** in order to protect household members from a severe loss or lack of home energy.

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

## Section 3 - COOLING ASSISTANCE

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

August 1987, revised 05/92,02/95,03/96,12/98,11/01  
OMB Clearance No.: 0970-0075  
Expiration Date: 09/30/2020

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

### Section 3 - Cooling Assistance

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

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

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

**3.2 Do you have additional eligibility requirements for COOLING ASSISTANCE?**  Yes  No

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

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

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

**Renters?**  Yes  No

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

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

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

**Elderly?**  Yes  No

**Disabled?**  Yes  No

**Young children?**  Yes  No

**Households with high energy burdens ?**  Yes  No

**Other? Medical Necessity**  Yes  No

**Explanations of policies for each "yes" checked above:**

The North Dakota State LIHEAP does not routinely include a cooling program. However, the State reserves the option to implement a temporary cooling program in the event of unusual cooling needs due to weather aberrations or an emergency disaster, contingent upon available funding.

This component will allow for the purchase and installation of approved cooling devices for households with an elderly member or households who can document a medical need for cooling.

A special application will be required for this assistance. The application will establish that the income of the household are within the guidelines allowed under the Heating Assistance component, as described in Section H, 1 of the attached state plan.

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

The documentation of medical need will require a signed statement from a physician, physician's assistant, nurse practitioner, or public health nurse that identifies the member of the household who needs a cooled living space, the nature of the medical condition and why cooling of the living space is needed. An assertion that cooling is required because of disability is not sufficient to establish medical need.

**3.4 Describe how you prioritize the provision of cooling assistance to vulnerable populations, e.g., benefit amounts, early application periods, etc.**

A LIHEAP-eligible household may qualify for a cooling device (an air conditioner or a fan, as the need dictates), if a member of the household has a documented medical need. Documentation of a household member's medical need for a cooling device **will not be** required if

there is an elderly person (age 60 or over) in the household. Documentation of medical need **will continue** to be required when there are no elderly persons in the household.

(See Section X attached)

**Determination of Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)**

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

<input checked="" type="checkbox"/> Income
<input checked="" type="checkbox"/> Family (household) size
<input checked="" type="checkbox"/> Home energy cost or need:
<input type="checkbox"/> Fuel type
<input type="checkbox"/> Climate/region
<input type="checkbox"/> Individual bill
<input type="checkbox"/> Dwelling type
<input type="checkbox"/> Energy burden (% of income spent on home energy)
<input type="checkbox"/> Energy need
<input checked="" type="checkbox"/> Other - Describe:

The income of the household must be within the guidelines allowed under the Heating Assistance component, as described in Section H, 1 of the attached state plan (See Section X attached).

North Dakota does not have a cooling benefit matrix. We do not issue benefits based on a flat benefit amount from a matrix. As indicated in Question 3.4, eligibility for LIHEAP (income) is a pre-requisite for all other services, including cooling. The cooling program is part of the furnace repair/replacement contract with the Department of Commerce who, in turn, subcontracts with the Community Action Agencies to perform the services. The cooling program is comprised entirely of AC installations, repairs of existing unit/system, or for the purchase of fans and NOT for payment of electric bills.

NOTE regarding minimum/maximum benefits levels for cooling: Minimum and maximum amounts for FY2021 are based on the minimum and maximum amounts for the prior heating season.

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

**3.6 Describe estimated benefit levels for the fiscal year for which this plan applies**

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

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

**If yes, describe.**

North Dakota cooling program (not regularly implemented) does not pay a household's cooling costs. Instead, a LIHEAP-eligible household may qualify for a cooling device (an air conditioner or a fan, as the need dictates) or repair on an existing cooling device, if a member of the household is elderly or has a documented medical need. The household need not be responsible for paying heating costs so tenants in subsidized housing may qualify.

The income of the household must be within the guidelines allowed under the Heating Assistance component, as described in Section H, 1 of the attached state plan.

NOTE re MAXIMUM BENEFIT: There is no maximum amount that can be spent on an air conditioner except in the case of installing a central air unit where there was not one previously existing (\$1,000.00).

See Department of Commerce' Residential Cooling Program FY2021 document attached.

See attached Estimated Cost of Heating Table (matrix).

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



## Section 4 - CRISIS ASSISTANCE

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

August 1987, revised 05/92,02/95,03/96,12/98,11/01  
OMB Clearance No.: 0970-0075  
Expiration Date: 09/30/2020

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

#### Section 4: CRISIS ASSISTANCE

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

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

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

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

See Section E of attached state plan of operation:

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

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

See Section E of attached state plan of operation:

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

**Crisis Requirement, 2604(c)**

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

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

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

**4.6 Do you have additional eligibility requirements for CRISIS ASSISTANCE?**  Yes  No

**4.7 Check the appropriate boxes below and describe the policies for each**

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

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

**Elderly?**  Yes  No

**Disabled?**  Yes  No

**Young Children?**  Yes  No

**Households with high energy burdens?**  Yes  No

**Other?**  Yes  No

**In Order to receive crisis assistance:**

**Must the household have received a shut-off notice or have a near empty tank?**  Yes  No

**Must the household have been shut off or have an empty tank?**  Yes  No

**Must the household have exhausted their regular heating benefit?**  Yes  No

**Must renters with heating costs included in their rent have**  Yes  No

received an eviction notice ?	
Must heating/cooling be medically necessary?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Must the household have non-working heating or cooling equipment?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Other?	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>Do you have additional / differing eligibility policies for:</b>	
Renters?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Renters living in subsidized housing?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Renters with utilities included in the rent?	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>Explanations of policies for each "yes" checked above:</b>	
Renters living in subsidized housing and are not responsible for paying their heat do not qualify for emergency assistance.	
<b>Determination of Benefits</b>	
<b>4.8 How do you handle crisis situations?</b>	
<input checked="" type="checkbox"/>	Separate component
<input type="checkbox"/>	Fast Track
<input type="checkbox"/>	Other - Describe:
<b>4.9 If you have a separate component, how do you determine crisis assistance benefits?</b>	
<input checked="" type="checkbox"/>	Amount to resolve the crisis.
<input type="checkbox"/>	Other - Describe:
<b>Crisis Requirements, 2604(c)</b>	
<b>4.10 Do you accept applications for energy crisis assistance at sites that are geographically accessible to all households in the area to be served?</b>	
<input checked="" type="radio"/> Yes <input type="radio"/> No <b>Explain.</b>	
<p>Applications are available at all county social service offices. Emergency procedures include home visits when necessary, counseling, referrals, communication with suppliers, or other services and a 24 hour telephone number for requesting aid or reporting a crisis. Outreach activities assure that all potentially eligible households are informed of the heating assistance and emergency assistance components of the program and have the opportunity to submit an application. Aging service area coordinators and the North Dakota Council of Community Action Agency Directors, representing the seven (7) regional community action agencies, have agreed to continue to provide outreach and intake function for LIHEAP heating assistance and crisis situations.</p> <p>In addition, the Department contracted with Community Options to provide outreach services which includes information to potential clients or current clients, providing applications, assist completing applications and obtaining required verifications.</p>	
<b>4.11 Do you provide individuals who are physically disabled the means to:</b>	
<b>Submit applications for crisis benefits without leaving their homes?</b>	
<input checked="" type="radio"/> Yes <input type="radio"/> No <b>If No, explain.</b>	
<b>Travel to the sites at which applications for crisis assistance are accepted?</b>	
<input checked="" type="radio"/> Yes <input type="radio"/> No <b>If No, explain.</b>	
<b>If you answered "No" to both options in question 4.11, please explain alternative means of intake to those who are homebound or physically disabled?</b>	
<b>Benefit Levels, 2605(c)(1)(B)</b>	
<b>4.12 Indicate the maximum benefit for each type of crisis assistance offered.</b>	
Winter Crisis	\$0.00 maximum benefit
Summer Crisis	\$0.00 maximum benefit
Year-round Crisis	\$1,000.00 maximum benefit
<b>4.13 Do you provide in-kind (e.g. blankets, space heaters, fans) and/or other forms of benefits?</b>	
<input checked="" type="radio"/> Yes <input type="radio"/> No <b>If yes, Describe</b>	
Emergency assistance can provide assistance for the following:	

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

Supporting policy for #1:

Supplemental Fuel 415-50-05-05

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

Exception to Limitation for Emergency Services 415-50-15

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

**FY2021 COVID-19 Pandemic response**

As an immediate response to the COVID-19 pandemic, the following enhancements to the emergency assistance process were implemented in March 2020 and will continue for FY2021 in order to ensure an appropriate, effective and timely response to the nationally-declared disaster.

- Telephonic emergency applications with a verbal signature are allowed. Worker should indicate applicant's name and notate "Verbal Signature" in the applicant signature line of the emergency application.
- Client statement is acceptable as verification of income and expenses on the emergency application if currently acceptable sources of verification are not readily available. Be sure to document the verification source used.
- When processing an emergency application that is related to the COVID pandemic, add the notation "COVID emergency" as the first line in the narrative screen. Then continue documenting the emergency details as you normally would.
- The seasonal maximum amount of \$500 per season for supplemental fuel has been increased to \$1,000.00. State office approval should be obtained for amounts that exceed the seasonal maximum amount.

Congress also passed the CARES Act giving states additional funding for LIHEAP. The additional funding will be distributed primarily through LIHEAP's emergency assistance program.

With the additional funding, LIHEAP will operate a temporary Pandemic LIHEAP Program (P-LIHEAP) that provides one-time assistance with the cost of electric utility bills for households that have been approved for LIHEAP through May 2020, the end of the 2019-2020 heating season.

The department will generate a notice to qualifying LIHEAP households instructing them to register on-line and the state office will process the registration.

If approved, a one-time payment of \$460 will be issued directly to the household's electric utility vendor to assist with the household's electric utility bills during the pandemic.

Minimum benefit households (\$50 lump sum) and renter/heat paid households who are responsible for their electric utility costs may also qualify.

Households who were not approved for LIHEAP during the current heating season but who apply for emergency assistance after the end of the heating season and are approved may also qualify for the one-time payment to their vendor.



Yes  No

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

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

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

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

Yes  No

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

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

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

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

## Section 5 - WEATHERIZATION ASSISTANCE

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

August 1987, revised 05/92,02/95,03/96,12/98,11/01  
OMB Clearance No.: 0970-0075  
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

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

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

5.3 If yes, name the agency. North Dakota Department of Commerce

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

#### WEATHERIZATION - Types of Rules

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

- Entirely under LIHEAP (not DOE) rules
  - Entirely under DOE WAP (not LIHEAP) rules
  - Mostly under LIHEAP rules with the following DOE WAP rule(s) where LIHEAP and WAP rules differ (Check all that apply):
    - Income Threshold
    - Weatherization of entire multi-family housing structure is permitted if at least 66% of units (50% in 2- & 4-unit buildings) are eligible units or will become eligible within 180 days
    - Weatherize shelters temporarily housing primarily low income persons (excluding nursing homes, prisons, and similar institutional care facilities).
    - Other - Describe:
  - Mostly under DOE WAP rules, with the following LIHEAP rule(s) where LIHEAP and WAP rules differ (Check all that apply.):
    - Income Threshold
    - Weatherization not subject to DOE WAP maximum statewide average cost per dwelling unit.
    - Weatherization measures are not subject to DOE Savings to Investment Ratio (SIR ) standards.
    - Other - Describe:
      - Income eligibility for LIHEAP is a pre-requisite for weatherization services.
      - DOC weatherization does not require ASHRAE 62.2 compliance.
      - DOC weatherization does not require Quality Control Certified Inspections.
      - DOC weatherization does not follow the reweatherization date of 1994.
      - DOC weatherization does not replace refrigerators in rental properties
      - We allow omission of some measures if there are documented reasons for NOT doing them, such as a health and safety issue.
- In FY2020, a combination of Department of Energy (DOE) funds and LIHEAP funds may be used on an LIHEAP-eligible household's home in order to maintain average cost (per funding source) at a consistent, acceptable level. Federal reporting will count only those LIHEAP households for which LIHEAP funds were expended and, likewise, will only report LIHEAP dollars spent. DOE funds expended will not be included in LIHEAP reporting.**

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

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

5.6 Do you require an assets test?  Yes  No

5.7 Do you have additional/differing eligibility policies for :

    Renters  Yes  No

    Renters living in subsidized housing?  Yes  No

5.8 Do you give priority in eligibility to:

    Elderly?  Yes  No

    Disabled?  Yes  No

    Young Children?  Yes  No

    House holds with high energy burdens?  Yes  No

    Other? High Energy Usage  Yes  No

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

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

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

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

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

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

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

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

See Section M (3) of attached state plan. Also see Section O attached.

Response to federal office's State Plan Comments regarding question 5.7: from federal office:

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

**Benefit Levels**

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

5.10 If yes, what is the maximum? \$0

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

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

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Weatherization needs assessments/audits | <input checked="" type="checkbox"/> Energy related roof repair  |
| <input checked="" type="checkbox"/> Caulking and insulation                 | <input type="checkbox"/> Major appliance Repairs                |
| <input checked="" type="checkbox"/> Storm windows                           | <input checked="" type="checkbox"/> Major appliance replacement |

<input checked="" type="checkbox"/> Furnace/heating system modifications/ repairs	<input checked="" type="checkbox"/> Windows/sliding glass doors
<input checked="" type="checkbox"/> Furnace replacement	<input checked="" type="checkbox"/> Doors
<input checked="" type="checkbox"/> Cooling system modifications/ repairs	<input checked="" type="checkbox"/> Water Heater
<input type="checkbox"/> Water conservation measures	<input checked="" type="checkbox"/> Cooling system replacement
<input checked="" type="checkbox"/> Compact florescent light bulbs	<input checked="" type="checkbox"/> Other - Describe: If weatherization expenditures are above \$8,000 per household, state approval must be obtained. LED Bulbs are used instead of compact florescent light bulbs

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

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

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

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

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

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

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

Publish articles in local newspapers or broadcast media announcements.

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

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

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

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

Other (specify):

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

Community Options Outreach

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

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

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

All activities are coordinated with county social service office and the community action agencies to ensure that there is no duplication of services.

Example:

In FY2020 (through 6/30/2020) across the state, LIHEAP Outreach Specialists:

- Turned in 333 applications of which 256 were approved for LIHEAP
- Conducted 50 booth presentations (Ex: Booths as VA conference, Mental Health conference, etc.)
- Conducted 88 marketing presentations to organizations, hotels, fast food establishments, etc. to speak with employees (3 or more) about LIHEAP and provide information about the program
- Conducted 3,057 site visits to provide flyers and/or information about the LIHEAP to 1 or 2 people
- 3,782 Business Developments - face-to-face conversation with hiring authority

LIHEAP funds are used to purchase blankets and sleeping bags as an in-kind service to households while educating them on the services of LIHEAP, SNAP, Medicaid and other community resources.

For FY2020 (through 6/30/2020) across the state, LIHEAP Outreach Specialists turned in 333 applications of which:

256 Approved for LIHEAP

55 Denied

15 Not available

4 Pending

3 Withdrawn

See Section G of state plan attached.

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

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

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

August 1987, revised 05/92,02/95,03/96,12/98,11/01  
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**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
 MODEL PLAN  
 SF - 424 - MANDATORY**

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

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

<input type="checkbox"/>	Joint application for multiple programs
<input checked="" type="checkbox"/>	Intake referrals to/from other programs
<input checked="" type="checkbox"/>	One - stop intake centers
<input type="checkbox"/>	Other - Describe:

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

See Section M of attached State Plan of Operation.

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

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

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

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

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

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

<input checked="" type="checkbox"/>	Administration Agency
<input type="checkbox"/>	Commerce Agency
<input type="checkbox"/>	Community Services Agency
<input type="checkbox"/>	Energy / Environment Agency
<input type="checkbox"/>	Housing Agency
<input type="checkbox"/>	Welfare Agency
<input type="checkbox"/>	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?**

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

The North Dakota Department of Human Services Aging Services Division, as the statewide agency for Aging Services employs coordinators in each of the eight (8) regional Human Service Centers. The division has agreed that the regional Aging Services coordinators will continue to provide outreach and intake functions for LIHEAP heating assistance and crisis situations.

The North Dakota LIHEAP has agreed to provide appropriate staff training, administrative forms and printed information to the regional community action agencies and the regional Aging Services coordinators.

The outreach function and the intake function assigned to these alternate sites are defined in Section E of the attached state plan.

**Intake Function:** Intake is defined as the beginning formal contact(s) with a potential applicant to provide program information and explanations, and to provide the application form with instructions for completion and submission.

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



meetings and presentations, fliers and brochures.

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

**8.3 How do you provide alternate outreach and intake for COOLING ASSISTANCE?**

See Section B (2) of State Plan of Operations attached: Community Action Agencies provide alternate outreach for the cooling program.

**8.4 How do you provide alternate outreach and intake for CRISIS ASSISTANCE?**

See Section B (2) of State Plan of Operations attached: See above for heating

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

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

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

53 Counties (51 county offices)

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

Section Powers and duties of the department - 50-06-05.1.19. states, "To act as the official agency of the state in the administration of the Low Income Home Energy Assistance Program; to direct and supervise county administration of that program; and to take such actions, give such directions, and adopt such rules, subject to review in the courts of this state, as may be necessary or desirable to carry out this subsection. For purposes of the administration of the energy assistance program, funds are obligated at the earlier of the time a written commitment is made to pay a vendor or contractor for services or supplies delivered or to be delivered, or at the time payment is made to a vendor or contractor for services or supplies delivered or to be delivered. The provisions of this subsection concerning obligation of funds apply to payments and commitments made on or after July 1, 1991. The department with the consent of the budget section of the legislative management may terminate the program if the rate of federal financial participation in administrative costs is decreased or limited to less than fifty percent of total administrative costs, or if the state or counties become financially responsible for all or a portion of the cost of energy assistance program benefits.

CAAs (7):

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

§440.15 Subgrantees.

(a) The grantee shall ensure that:

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

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

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

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

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

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

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

- (ii) The quality of work performed by the subgrantee;
  - (iii) The number, qualifications, and experience of the staff members of the subgrantee; and
  - (iv) The ability of the subgrantee to secure volunteers, training participants, public service employment workers, and other Federal or State training programs.
- (b) The grantee shall ensure that the funds received under this part will be allocated to the entities selected in accordance with paragraph (a) of this section, such that funds will be allocated to areas on the basis of the relative need for a weatherization project by low-income persons.
- (c) If DOE finds that a subgrantee selected to undertake weatherization activities under this part has failed to comply substantially with the provisions of the Act or this part and should be replaced, such finding shall be treated as a finding under §440.30(i) for purposes of §440.30.
- (d) Any new or additional subgrantee shall be selected at a hearing in accordance with §440.14(a) and upon the basis of the criteria in paragraph (a) of this section.
- (e) A State may terminate financial assistance under a subgrant agreement for a grant period only in accordance with established State procedures that provide to the subgrantee appropriate notice of the State's reasons for termination and afford the subgrantee an adequate opportunity to be heard.

**8.7 How many local administering agencies do you use? 58**

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

Yes

No

**8.9 If so, why?**

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

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

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

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

August 1987, revised 05/92,02/95,03/96,12/98,11/01  
OMB Clearance No.: 0970-0075  
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### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) 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  No

Cooling  Yes  No

Crisis  Yes  No

Are there exceptions?  Yes  No

#### If yes, Describe.

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

Renters whose heating costs are included as an undesignated portion of their rent payment will receive LIHEAP payments directly. Payments will generally be made once per month, on the third Tuesday, and will continue for the client's eligibility period.

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

See Section K (Supplier Agreements) of attached State Plan of Operation.

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

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

County eligibility workers have 45 days to process an application. Upon entry of the households information into the computer system, a notice is sent to the household notifying them of percentage is their responsibility and the state share for heating costs.

See Section L (4) of attached State Plan of Operation.

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

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

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

- a. To charge the eligible household, in a normal billing process, the difference between the actual cost of the home energy and the amount of payment to be made by the State. (The household's co-payment)
- b. To give assurance that no household receiving assistance under this program will be treated adversely because of such assistance under applicable provisions of State Law or public regulatory requirements.
- c. Not to discriminate, either in the cost of the goods supplied or the services provided, against the eligible household on whose behalf payments are made.
- d. To cooperate in reviews or audits of LIHEAP payments, and to refund to the State any over-payments.

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

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

See Section K (Supplier Agreements) of attached State Plan of Operation

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

Per agreement signed with vendor (See Section K of attached State Plan of Operation).

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

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

Yes  No

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

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

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

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

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

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
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**Section 10: Program, Fiscal Monitoring, and Audit, 2605(b)(10)**

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

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

**Audit Process**

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

Yes  No

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

No Findings

Finding	Type	Brief Summary	Resolved?	Action Taken
1	financial	Recommendation that the Department implement controls to detect and prevent payments from being made outside of grant award's period of performance.	Yes	procedure/policy changes
2	financial	Recommendation that the Department properly account for subrecipient and contractor administrative costs when tracking compliance with administrative cost limits	Yes	procedure/policy changes
3	monitoring	Recommendation that the Department review policies and processes surrounding the calculation of benefits for LIHEAP to ensure proper payments are being made	Yes	training changes
4	other	Recommendation that the Department update the LIHEAP application form to include fields for all allowable expense deductions	Yes	procedure/policy changes

**10.4. Audits of Local Administering Agencies**

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

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

**Compliance Monitoring**

**10.5. Describe the Grantee's strategies for monitoring compliance with the Grantee's and Federal LIHEAP policies and procedures: Select all that apply**

**Grantee employees:**

Internal program review

Departmental oversight

Secondary review of invoices and payments

Other program review mechanisms are in place. Describe:

**Local Administering Agencies / District Offices:**

On - site evaluation

Annual program review

Monitoring through central database

Desk reviews

Client File Testing / Sampling

Other program review mechanisms are in place. Describe:

Weatherization Monitoring by Department of Commerce (See attached document).

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

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

The results of the reviews are shared with the eligibility worker, county director and respective Economic Assistance Regional Representative. If overpayments exist as a result of the review, overpayments are established regardless if it is due to an agency or recipient error. At the time an overpayment is established, the family is informed of the overpaid amount and their responsibility for repayment.

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

Monitoring

The North Dakota Department of Human Services has built a web-based verification system called NDVerify that streamlines the search of different interfaces/sources to obtain verification electronically. NDVerify allows eligibility workers to search multiple interfaces/sources for all household members included in a LIHEAP case at the same time. NDVerify also stores the search based on the date completed for historical purposes. The following interfaces/sources are included in NDVerify:

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

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

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

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

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

In addition, an abstract is created each week of payments authorized by the eligibility worker in the LIHEAP eligibility system along with payments requested by fuel vendors. The abstract is reviewed by DHS policy staff and fiscal administration before payments are released and paid through the PeopleSoft payment system. In addition, Fiscal Administration provides monthly spenddown tables on the utilization of program funds to the Economic Assistance Director.

For Weatherization Monitoring by DOC, see attached document.

**10.7. Describe how you select local agencies for monitoring reviews.**

**Site Visits:**

On-site county visits are not conducted unless deemed necessary based on reviews completed by Quality Assurance Unit or Policy and System Support (PaSS) Unit.

Weatherization Monitoring by DOC; see attached document.

**Desk Reviews:**

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

Weatherization Monitoring by DOC; see attached document.

**10.8. How often is each local agency monitored ?**

See 10.6

**10.9. What is the combined error rate for eligibility determinations? OPTIONAL**

The error rate won't be calculated until the end of FFY2020.

**10.10. What is the combined error rate for benefit determinations? OPTIONAL**

For federal fiscal year 2019, the payment error rate percentage was 2.05% for benefit determinations. Corrective action has been taken on all findings.

**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? 0**

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

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

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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 development of your LIHEAP plan?**  
 Select all that apply.

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

See Section D (Public Participation, Review and Comments on State Plan) of the attached State Plan of Operation.

**11.2 What changes did you make to your LIHEAP plan as a result of this participation?**  
 None

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

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

	Date	Event Description
1	07/30/2020	Public Comment Hearing on proposed FY2021 ND State Plan of Operation for LIHEAP, Bismarck

**11.4. How many parties commented on your plan at the hearing(s)?** 1

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

In addition to two (2) representatives from LIHEAP and both the Director of Economic Division of DHS and the Director of Economic Policy in DHS, public hearing attendees included: one representative from the Department of Commerce , one representative from Community Action Agency in Bismarck, two persons from Southwest Dakota Human Service Center, one member of Policy and System Support Team, and one technical support person.

There were no negative comments from those in attendance. Both attendees were pleased with the 3.5% overall increase in the eligibility limits.

There was also one question regarding the additional CARES Act Funding.

One electronic comment was received expressing support of LIHEAP outreach services, case management services, and weatherization services.

Affidavit of publication and attendees are attached.



11.6 What changes did you make to your LIHEAP plan as a result of the comments received at the public hearing(s)?

Per attached outreach comment, Updates on the outcomes of the outreach contract were added. See Section 6 - Outreach

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

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

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
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## 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? 7

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?

None

12.4 Describe your fair hearing procedures for households whose applications are denied.

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

12.5 When and how are applicants informed of these rights?

Whenever a case is processed or changed, the client receives a notice of the action taken on the case. The "Your Right to Appeal" document is on the back of all notices of action sent to clients.

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

12.6 Describe your fair hearing procedures for households whose applications are not acted on in a timely manner.

Same as above.

12.7 When and how are applicants informed of these rights?

Same as above

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

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

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

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

Not applicable

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

Not Applicable

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

Not Applicable

13.4 Describe the level of direct benefits provided to those households in the previous Federal fiscal year.

Not Applicable

13.5 How many households applied for these services? N/A

13.6 How many households received these services? N/A

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

## Section 14 - Leveraging Incentive Program ,2607A

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

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

Yes  No

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

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

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

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

## Section 15 - Training

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
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### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

## 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?**

**Annually**

**Biannually**

**As needed**

**Other - Describe:** Federal webinars, conferences, work groups

**Employees are provided with policy manual**

**Other-Describe:**

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

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

**Employees are provided with policy manual**

**Other - Describe**

LIHEAP eLearning courses are available online 24 hours a day to eligibility workers and sub-grantees. The courses provide an opportunity to become familiar with program operations and allows eligibility workers to develop competency and skills in applying LIHEAP policy.

**c. Vendors**

**Formal training conference**

**How often?**

**Annually**

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

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

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

Per agreement with our federal partners, the state LIHEAP staff will meet with our IT Department to discuss possible alterations to our current process for federal reporting so that our LIHEAP Performance Data Report complies with HHS reporting instructions included in the OCS Action Transmittal. The main issue is in regard to the data capture process and the reporting of a household's average annual energy bills for both main heating fuel and electricity.

Because of the uniqueness of our program, LIHEAP is calculated as a share percentage. The vendor submits actual billing data and we issue payment for the eligible percentage for deliveries/reads that fall within the client's eligibility period. In the past, the data for the LIHEAP Performance Measures form has been obtained by using the actual 8-months of billing data that the vendor submits through the heating season to calculate the household's average annual energy bills.

For FY2020 reporting, we will comply with HHS reporting instruction and collect both average annual energy bills for both main heating fuel and electricity from the vendor for a 12-month period.

In order to accomplish this requirement, changes have been made to both the LIHEAP application and the vendor agreements.

The LIHEAP application has been modified to ask all clients to provide their electric (utility) vendor name and account number information. A release of information waiver has also been added to the application. By making these changes, we will be able to request the LIHEAP household's electric utility billing information from the electricity vendors.

The addition of client waiver language will permit the sharing of the electricity account information with the electric utility vendors and the sharing of the annual bill information with LIHEAP.

The change to the vendor agreement will specify that the vendor provide the annual bill amount and to specify that electric vendors furnish data for all LIHEAP recipients (rather than LIHEAP recipients with electricity as their primary heat source).

The above changes to the Performance Measures data collection will result in reporting (for FY2020) that is consistent with the instructions in the OCS Action Transmittal.

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

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

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

**17.1 Fraud Reporting Mechanisms**

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

- Online Fraud Reporting
- Dedicated Fraud Reporting Hotline
- Report directly to local agency/district office or Grantee office
- Report to State Inspector General or Attorney General
- Forms and procedures in place for local agencies/district offices and vendors to report fraud, waste, and abuse
- Other - Describe:

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

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

- Printed outreach materials
- Addressed on LIHEAP application
- Website
- Other - Describe:

As part of the human service delivery system in North Dakota, LIHEAP has a visible presence in all 53 of the state's counties. In addition, DHS has a fraud hot-line, a toll-free number, and a website by which cases of suspected fraud can be reported at any time [www.nd.gov/dhs](http://www.nd.gov/dhs).

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

Our tools and mechanisms are in place; we continue seeking new and creative ways to encourage our citizens to inform DHS of suspected fraud.

**17.2. Identification Documentation Requirements**

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

Type of Identification Collected	Collected from Whom?		
	Applicant Only	All Adults in Household	All Household Members
Social Security Card is photocopied and retained	<input type="checkbox"/> Required	<input type="checkbox"/> Required	<input type="checkbox"/> Required
	<input type="checkbox"/> Requested	<input type="checkbox"/> Requested	<input type="checkbox"/> Requested



Social Security Number (Without actual Card)	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	
	<input checked="" type="checkbox"/>	Requested	<input checked="" type="checkbox"/>	Requested	<input checked="" type="checkbox"/>	Requested	
Government-issued identification card (i.e.: driver's license, state ID, Tribal ID, passport, etc.)	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	
	<input checked="" type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	
	Other	Applicant Only Required	Applicant Only Requested	All Adults in Household Required	All Adults in Household Requested	All Household Members Required	All Household Members Requested
1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

LIHEAP in North Dakota utilizes the head of household's Social Security Number (SSN) as its primary identifier in its computer system. Several years ago, DHS also began collecting the SSN's of all of the household members. Because of Privacy Act considerations, we informed applicants that providing the SSN was voluntary, but virtually all applicants comply.

The current LIHEAP system does not cross-check SSNs, but the system being developed will. However, if LIHEAP is in combination with Medicaid, SNAP, or TANF, the SSN is verified through an interface with Social Security Administration.

Although SSN is a primary identifier in our computer system, the system also assigns a Billing Number to the head of household's SSN and it is the Billing Number that is used to communicate with vendors and other entities outside of DHS and county social service offices.

LIHEAP policy regarding SSN will remain the same. If HHS directs that providing that information can no longer be voluntary, DHS will comply.

NOTE regarding Identification Documentation Required (Question 17.2a):

Government-issued ID cards are requested for the applicant if they have not already been submitted for another program or if questionable.

**17.3 Identification Verification**

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

- Verify SSNs with Social Security Administration
- Match SSNs with death records from Social Security Administration or state agency
- Match SSNs with state eligibility/case management system (e.g., SNAP, TANF)
- Match with state Department of Labor system
- Match with state and/or federal corrections system
- Match with state child support system
- Verification using private software (e.g., The Work Number)
- In-person certification by staff (for tribal grantees only)
- Match SSN/Tribal ID number with tribal database or enrollment records (for tribal grantees only)

Other - Describe:

North Dakota Department of Human Services currently has a verification application called NDVerify. This tool allows eligibility workers to access identifying information such as North Dakota Vital Records for birth date and death record, Social Security Administration information for validation of SSN's and amount of benefits received, North Dakota Motor Vehicle registration, and North Dakota Child Support for child support income and paid out.

The following systems are sources of information to obtain verification through NDVerify:

- Birth/Death records (ND Vital Records)
- Health Insurance
- ND Child Support
- ND Department of Corrections

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

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

DHS is currently working on implementing a central integrated eligibility system which will include all of the Department's economic assistance programs and will incorporate all of the above mentioned NDVerify sources.

The first phase of the new system, which included ACA, CHIP and common elements, was implemented in February 2016. The second phase, which includes Child Care Assistance, Supplemental Nutrition Assistance (SNAP) and Temporary Assistance for Needy Families Programs (TANF) programs, was implemented in March 2019. Phase 3 and 4 will implement the remainder of Medicaid (Aged, Blind, and Disabled) along with LIHEAP. One of the requirements of the system will be the verification of applicants' identities across all programs using a Master Client Index.

#### 17.4. Citizenship/Legal Residency Verification

What are your procedures for ensuring that household members are U.S. citizens or aliens who are qualified to receive LIHEAP benefits? Select all that apply.

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

DHS' verification system (NDVerify) is able to provide verification of citizenship, qualified noncitizens through SAVE as an interface and web service. In addition, verification of identity through numerous interfaces in NDVerify. See 17.3 for further information.

#### 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:

All sources and types of income that exceed \$500 per year must be verified. This may be accomplished by the use of wage stubs, signed statement from an employer, Internal Revenue Service (IRS) forms, automatic bank deposit slips for social security, award letters for SSI, other types of benefits and NDVerify.

Eligibility workers have access to a verification system that includes interfaces with sources that verify both earned and unearned income. These include:

- ND Child Support
- ND Directory of New Hire
- ND Unemployment Insurance Benefits
- Social Security Administration
- ND Wage Match

Eligibility workers are trained on the requirements to verify information necessary to support eligibility determinations.

- Computer data matches:

<input type="checkbox"/> Income information matched against state computer system (e.g., SNAP, TANF)
<input checked="" type="checkbox"/> Proof of unemployment benefits verified with state Department of Labor
<input checked="" type="checkbox"/> Social Security income verified with SSA
<input checked="" type="checkbox"/> Utilize state directory of new hires
<input checked="" type="checkbox"/> Other - Describe: <p>North Dakota Department of Human Services' currently utilizes a verification application called NDVerify that interfaces with the Social Security Administration, Child Support Enforcement System, ND Unemployment Insurance Benefits and ND Job Service. It can be accessed to verify Social Security/Supplemental Security Income benefits, Child Support and spousal support received and paid, quarterly wage match and unemployment benefits (through North Dakota Job Service). Information is not available from out-of-state employers. New hires is also part of NDVerify.</p>
<b>17.6. Protection of Privacy and Confidentiality</b>
<b>Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.</b>
<input checked="" type="checkbox"/> Policy in place prohibiting release of information without written consent
<input checked="" type="checkbox"/> Grantee LIHEAP database includes privacy/confidentiality safeguards
<input checked="" type="checkbox"/> Employee training on confidentiality for:
<input checked="" type="checkbox"/> Grantee employees
<input checked="" type="checkbox"/> Local agencies/district offices
<input checked="" type="checkbox"/> Employees must sign confidentiality agreement
<input checked="" type="checkbox"/> Grantee employees
<input checked="" type="checkbox"/> Local agencies/district offices
<input checked="" type="checkbox"/> Physical files are stored in a secure location
<input checked="" type="checkbox"/> Other - Describe: <p>DHS took significant steps in safeguarding client's privacy in 2011 with its SSN suppression initiative. All written communications being mailed out identify the client with a system-assigned "billing number" rather than a Social Security Number. This will continue in 2020.</p> <p>Economic Assistance Policy Division addresses safeguarding of client information in Administrative Procedural manual 448-01 which may be found on North Dakota Department of Human Services website at <a href="http://www.state.nd.us/humanservices/policymanuals/home/financialhelp.htm">http://www.state.nd.us/humanservices/policymanuals/home/financialhelp.htm</a></p> <p>The Economic Assistance Policy Division Administrative Procedural manual 448-01 is utilized to provide county eligibility workers with guidance on policy and procedures of client information.</p> <p>In addition, eligibility workers and Economic Assistance staff are required to take an online Safeguard training annually. The training includes what information must be safeguarded and penalties for improper disclosure.</p>
<b>17.7. Verifying the Authenticity</b>
<b>What policies are in place for verifying vendor authenticity? Select all that apply.</b>
<input checked="" type="checkbox"/> All vendors must register with the State/Tribe.
<input type="checkbox"/> All vendors must supply a valid SSN or TIN/W-9 form
<input checked="" type="checkbox"/> Vendors are verified through energy bills provided by the household
<input checked="" type="checkbox"/> Grantee and/or local agencies/district offices perform physical monitoring of vendors
<input type="checkbox"/> Other - Describe and note any exceptions to policies above: <p>North Dakota's status as a rural state lends a generous hand to vendor authenticity. A majority of the vendor in the state are small 'mom and pop' businesses that have been established in the communities for many years and, in many cases, generations. County staff have developed an excellent working relationship with vendors in their areas as most of the vendors and their employees are part of rural community. Vendor reputation is very well known to county staff.</p>
<b>17.8. Benefits Policy - Gas and Electric Utilities</b>
<b>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.</b>
<input type="checkbox"/> Applicants required to submit proof of physical residency

<input checked="" type="checkbox"/> Applicants must submit current utility bill
<input checked="" type="checkbox"/> Data exchange with utilities that verifies:
<input checked="" type="checkbox"/> Account ownership
<input checked="" type="checkbox"/> Consumption
<input checked="" type="checkbox"/> Balances
<input checked="" type="checkbox"/> Payment history
<input checked="" type="checkbox"/> Account is properly credited with benefit
<input type="checkbox"/> Other - Describe:
<input checked="" type="checkbox"/> Centralized computer system/database tracks payments to all utilities
<input checked="" type="checkbox"/> Centralized computer system automatically generates benefit level
<input checked="" type="checkbox"/> Separation of duties between intake and payment approval
<input checked="" type="checkbox"/> Payments coordinated among other energy assistance programs to avoid duplication of payments
<input checked="" type="checkbox"/> Payments to utilities and invoices from utilities are reviewed for accuracy
<input checked="" type="checkbox"/> Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities
<input checked="" type="checkbox"/> Direct payment to households are made in limited cases only
<input checked="" type="checkbox"/> Procedures are in place to require prompt refunds from utilities in cases of account closure
<input checked="" type="checkbox"/> Vendor agreements specify requirements selected above, and provide enforcement mechanism
<input type="checkbox"/> Other - Describe:
<b>17.9. Benefits Policy - Bulk Fuel Vendors</b>
<b>What procedures are in place for averting fraud and improper payments when dealing with bulk fuel suppliers of heating oil, propane, wood, and other bulk fuel vendors? Select all that apply.</b>
<input checked="" type="checkbox"/> Vendors are checked against an approved vendors list
<input checked="" type="checkbox"/> Centralized computer system/database is used to track payments to all vendors
<input checked="" type="checkbox"/> Clients are relied on for reports of non-delivery or partial delivery
<input type="checkbox"/> Two-party checks are issued naming client and vendor
<input checked="" type="checkbox"/> Direct payment to households are made in limited cases only
<input type="checkbox"/> Vendors are only paid once they provide a delivery receipt signed by the client
<input type="checkbox"/> Conduct monitoring of bulk fuel vendors
<input type="checkbox"/> Bulk fuel vendors are required to submit reports to the Grantee
<input checked="" type="checkbox"/> Vendor agreements specify requirements selected above, and provide enforcement mechanism
<input checked="" type="checkbox"/> Other - Describe:
<p>Applicants are asked to include a copy of their current heating bill with their application. This serves to verify heating vendor's authenticity and to ensure that the proper vendor is authorized to submit heating bills on behalf of the client.</p> <p>LIHEAP benefits are based on a percentage co-payment between the client and LIHEAP. The percentage for which the client is responsible is determined by the household's income, household size, type of fuel and type of dwelling. The vendor sends the household's bill directly to the DHS central office, and DHS remits payment to the vendor for the LIHEAP share. With the bill coming directly to the central office, DHS is able to review them for potential irregularities prior to any payment being made. This policy has proven successful, and will continue in 2021.</p> <p>Unregulated energy vendors, primarily of deliverable fuels, tend to be located in North Dakota's rural areas. In addition to the billing procedures described above, there are also edit checks built into the computer system to spot irregularities such as duplicate billing dates. These checks apply to all vendors. These procedures will continue in 2021.</p> <p>In addition, the LIHEAP system includes edits to prevent duplicate payments. However in a situation when a vendor or eligibility worker enters different information such as incorrect vendor, different dates of service, etc. a duplicate payment may be made. To prevent duplicate payments in these unusual situations, a report is generated and reviewed by program staff as a secondary prevention of duplicate payments.</p>

<b>17.10. Investigations and Prosecutions</b>
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.
<input type="checkbox"/> Refer to state Inspector General
<input checked="" type="checkbox"/> Refer to local prosecutor or state Attorney General
<input type="checkbox"/> Refer to US DHHS Inspector General (including referral to OIG hotline)
<input checked="" type="checkbox"/> Local agencies/district offices or Grantee conduct investigation of fraud complaints from public
<input checked="" type="checkbox"/> Grantee attempts collection of improper payments. If so, describe the recoupment process See Section J.1.4. (Erroneous Payments) of attached state plan of operation
<input type="checkbox"/> Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned?
<input type="checkbox"/> Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated
<input type="checkbox"/> Vendors found to have committed fraud may no longer participate in LIHEAP
<input type="checkbox"/> Other - Describe:
<b>If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.</b>

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

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

**Instructions for Certification**

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

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

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

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

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

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

7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction,"

provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

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

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

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

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

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

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

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

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

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

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

explanation to this proposal.

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

### **Instructions for Certification**

- 1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.**
- 2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.**
- 3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.**
- 4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.**
- 5. The prospective lower tier participant agrees by submitting this proposal that, [[Page 33043]] should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.**
- 6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.**
- 7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.**
- 8. Nothing contained in the foregoing shall be construed to require**



establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

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

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

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

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

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

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

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

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

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

1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.
2. The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
3. For 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 identified 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 upon 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 grantee's drug-free workplace requirements.
6. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).
7. If the workplace identified to the agency changes during the performance of

the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph five).

8. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' 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 grantee'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 employees for violation of such prohibition;
- (b) Establishing an ongoing drug-free awareness program to inform employees about --
  - (1) The dangers of drug abuse in the workplace;
  - (2) The grantee's policy of maintaining a drug-free workplace;
  - (3) Any available drug counseling, rehabilitation, and employee assistance

programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will --

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency in writing, within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted --(1)

Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

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

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

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

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

600 East Boulevard Avenue

\* Address Line 1

Department 325

Address Line 2

Burleigh County

Address Line 3

Bismarck

\* City

ND

\* State

58505-0250

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

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

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

**Section 20: Certification Regarding Lobbying**

**Section 20: Certification Regarding Lobbying**

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

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

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

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

**Statement for Loan Guarantees and Loan Insurance**

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

**If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or**

**entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.**

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

## Assurances

### Assurances

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**(3) conduct outreach activities designed to assure that eligible households, especially households with elderly individuals or disabled individuals, or both, and households with high home energy burdens, are made aware of the assistance available under this title, and any similar energy-related assistance available under subtitle B of title VI (relating to community services block grant**



program) or under any other provision of law which carries out programs which were administered under the Economic Opportunity Act of 1964 before the date of the enactment of this Act;

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

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

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

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

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

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

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

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

(C) assure that the home energy supplier will provide assurances that any agreement entered into with a home energy supplier under this paragraph will

contain provisions to assure that no household receiving assistance under this title will be treated adversely because of such assistance under applicable provisions of State law or public regulatory requirements; and

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

**(8) provide assurances that,**

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

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

**(9) provide that--**

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

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

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

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

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

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

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

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

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

**(16) use up to 5 percent of such funds, at its option, to provide services that encourage and enable households to reduce their home energy needs and thereby the need for energy assistance, including needs assessments, counseling, and assistance with energy vendors, and report to the Secretary concerning the impact of such activities on the number of households served, the level of direct benefits provided to those households, and the number of households that remain unserved.**

## Plan Attachments

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