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

Program Name: Low Income Home Energy Assistance Grantee Name: CONNECTICUT Report Name: DETAILED MODEL PLAN (LIHEAP) Report Period: 10/01/2017 to 09/30/2018 Report Status: Submission Accepted by CO

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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				-0075	
	1		OME			L PLAN		PROG	GRAM	1(LIHEAP)	
* 1.a. Type of Plan	Submis	ision:	* 1.b. J	Frequency: nual		* 1.c. Conso Application Request? Explanation 2. Date Reco 3. Applicant 4a. Federal 4b. Federal	/Plan/Fun 1: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2:	er: entifier:	:	<ul> <li>* 1.d. Version:</li> <li>Initial</li> <li>Resubmission</li> <li>Revision</li> <li>Update</li> <li>State Use Only:</li> <li>5. Date Received By State:</li> <li>6. State Application Identified</li> </ul>	ier:
7. APPLICAN	NT INFO	ORMATION	<u> </u>			4			Į		
* a. Legal Na	me: Sta	te of Connecticu	ıt								
* <b>b. Employe</b> 000006100	r/Taxpa	yer Identificati	on Nun	iber (EIN/TIN	):	* c. Organiz	ational D	UNS:	807854	435	
* d. Address:											
* Street 1:		55 Farmingto	n Aven	ıe		Street 2:		1			
* City:		HARTFORD				County:		HAR	HARTFORD		
* State:		СТ				Province	:				
* Country		United States				* Zip / Po Code:	ostal	0610:	5		
e. Organizatio Department N		t:				Division Na					
Department of		Services				Office of C		Service	s		
f. Name and c	ontact i	nformation of <b>j</b>	person (	to be contacted	on matters inv	volving this ap	oplication	:			
Prefix:	* First Linet	t <b>Name:</b> te			Middle Name L.H.	ame: * Last Name: Jones					
Suffix:	Title: Public	c Assistance Co	nsultant			onal Affiliation: artment of Social Services					
* Telephone Number: (860) 424-5392	Fax N (860)	<b>umber</b> 424-4952			* Email: linette.jones	@ct.gov					
* <b>8a. TYPE O</b> A: State Gover		LICANT:									
b. Addition		ription:									
* 9. Name of 1	Federal	Agency:									
					g of Federal Do sistance Numbe					CFDA Title:	
10. CFDA Num	bers and	l Titles		93568		-	Low-Inc	ome Ho	ome Ener	gy Assistance	
11. Descriptiv	e Title o	of Applicant's I	Project				т. Т				
12. Areas Affe		<b>Funding:</b> thing the state.									
^		AL DISTRICT	S OF:								
						1					

T

* a. Applicant 01	b. Program/Project: Statewide						
Attach an additional list of Progran	n/Project Congressional Districts if ne	ded.					
14. FUNDING PERIOD:		15. ESTIMATED FU	NDING:				
<b>a. Start Date:</b> 10/01/2017	<b>b. End Date:</b> 09/30/2018	:	* a. Federal (\$): \$0	<b>b. Match (\$):</b> \$0			
* 16. IS SUBMISSION SUBJECT T	O REVIEW BY STATE UNDER EX	ECUTIVE ORDER 12	372 PROCESS?				
a. This submission was made ava	ilable to the State under the Executiv	Order 12372					
Process for Review on :							
b. Program is subject to E.O. 123	372 but has not been selected by State	or review.					
c. Program is not covered by E.C	). 12372.						
* 17. Is The Applicant Delinquent C YES NO							
Explanation:							
complete and accurate to the best of	tify (1) to the statements contained in F my knowledge. I also provide the rec ny false, fictitious, or fraudulent state ion 1001)	ired assurances** an	d agree to comply wit	th any resulting terms if I			
** The list of certifications and assu instructions.	rances, or an internet site where you	nay obtain this list, is o	contained in the anno	uncement or agency specific			
18a. Typed or Printed Name and Ti Kathleen M. Brennan	tle of Authorized Certifying Official	<b>18c. Tele</b> (860) 424	<b>phone (area code, nur</b> 4-5693	nber and extension)			
			<b>ail Address</b> brennan@ct.gov				
18b. Signature of Authorized Certif	ying Official	<b>18e. Date Report Submitted (Month, Day, Year)</b> 10/04/2017					
Attach supporting doc	uments as specified in a	gency instruct	tions.				

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES AUgust 1987 ADMINISTRATION FOR CHILDREN AND FAMILIES	OMB Clea	/95,03/96,12/98,11/01 Irance No.: 0970-0075 ation 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	s of Operation					
	Start Date	End Date					
Heating assistance	11/15/2017	03/15/2018					
Cooling assistance							
Crisis assistance	11/15/2017	03/15/2018					
	11/15/2017	03/15/2018					
Weatherization assistance							
Weatherization assistance							
Weatherization assistance         Weatherization assistance         Provide further explanation for the dates of operation, if necessary         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: Th must add up to 100%.	10/01/2017	2es Percentage ( % )					
Weatherization assistance         Weatherization assistance         Provide further explanation for the dates of operation, if necessary         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 section of the sectio	10/01/2017	ges Percentage (%) 52.68%					
Weatherization assistance         Weatherization assistance         Provide further explanation for the dates of operation, if necessary         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: Th must add up to 100%.	10/01/2017	2es Percentage ( % )					
Weatherization assistance         Weatherization assistance         Provide further explanation for the dates of operation, if necessary         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: Th must add up to 100%.         Heating assistance	10/01/2017	ges Percentage (%) 52.68%					
Weatherization assistance         Weatherization assistance         Provide further explanation for the dates of operation, if necessary         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: Th must add up to 100%.         Heating assistance         Cooling assistance	10/01/2017	ges Percentage (%) 52.68% 0.00%					
Weatherization assistance         Weatherization assistance         Provide further explanation for the dates of operation, if necessary         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: Th must add up to 100%.         Heating assistance         Cooling assistance         Crisis assistance	10/01/2017	2es Percentage (%) 52.68% 0.00% 34.64%					
Weatherization assistance         Weatherization assistance         Provide further explanation for the dates of operation, if necessary         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: Th must add up to 100%.         Heating assistance         Cooling assistance         Crisis assistance         Weatherization assistance	10/01/2017	ges Percentage (%) 52.68% 0.00% 34.64% 1.34%					
Weatherization assistance         Provide further explanation for the dates of operation, if necessary         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: Th must add up to 100%.         Heating assistance         Cooling assistance         Crisis assistance         Weatherization assistance         Carryover to the following federal fiscal year	10/01/2017	ges Percentage (%) 52.68% 0.00% 34.64% 1.34% 0.00%					
Weatherization assistance         Weatherization assistance         Provide further explanation for the dates of operation, if necessary         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: Th must add up to 100%.         Heating assistance         Cooling assistance         Crisis assistance         Weatherization assistance         Carryover to the following federal fiscal year         Administrative and planning costs	10/01/2017	ges         Percentage (%)           52.68%         0.00%           34.64%         1.34%           0.00%         10.00%					

Section 1 - Program Components

Alter	Alternate Use of Crisis Assistance Funds, 2605(c)(1)(C)									
1.3 T	he funds reserve	ed for winter crisis assistance tha	t ha	ve not been expen	ded by	March 15 will h	oe rep	orogrammed to:		
>	Heat	ing assistance				Coo	ling assistance			
	Wea	eatherization assistance					Oth	er (specify:)		
Cate	gorical Eligibilit	y, 2605(b)(2)(A) - Assurance 2, 24	605(	c)(1)(A), 2605(b)(8	3A) - A	Assurance 8				
1.4 D	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	7		$\odot$	Yes O No	O	O Yes O No		Yes O <sub>No</sub>	$\odot$	Yes O <sub>No</sub>
SSI			0	Yes 💿 No	O	es 💽 No	0	Yes 💿 No	0	Yes 💿 No
SNAP	,		0	Yes 💽 No	O	es 💽 No	0	Yes 💿 No	0	Yes 💿 No
Mean	s-tested Veterans	Programs	0	Yes 💿 No	Ob	es 💽 No	0	Yes 💿 No	0	Yes 💿 No
		Program Name	<u> </u>	Heating		Cooling		Crisis	I	Weatherization
Other	(Specify) 1	State Supplement to the Aged Bli & Disabled	ind	• Yes O No		O Yes O No		⊙ <sub>Yes</sub> O <sub>No</sub>		⊙ Yes O No
Other	(Specify) 2	Refugee Assistance		• Yes O No		O Yes 💿 No		⊙Yes ONo		• Yes O No
1.5 D	o you automatic	cally enroll households without a	dire	ct annual applicat	ion? 🕻	Yes 💽 No				
If Ye	s, explain:									
Note: incon deterr	A household in the eligible for the	gibility and benefit amounts? which ALL members are participat cEAP. Categorically eligible hou gible at the same level as househol y assistance.	seho	lds whose annual g	ross ir	come is above 15	50% o	f the federal pover	ty gi	udelines shall be
SNAI	P Nominal Paym	ents								
1.7a ]	Do you allocate 1	LIHEAP funds toward a nomina	l pay	ment for SNAP h	ouseh	olds? 🖸 Yes 🛛 🤇	No			
If you	u answered "Yes	s'' to question 1.7a, you must pro	vide	a response to que	stions	1.7b, 1.7c, and 1	.7d.			
1.7b	Amount of Nom	inal Assistance: \$20.01								
_	Frequency of As									
	Once Per Year									
	Once every five	e years								
	Other - Descril	be:								
<b>1.7</b> d ]	How do you con	firm that the household receiving	g a n	ominal payment h	as an	energy cost or n	eed?			
		to SNAP recipients who have their owest energy burdens, thus resulting					0% oi	f their income towa	ard tl	heir rent. These
Deter	mination of Eligi	ibility - Countable Income								
1.8. I	n determining a	household's income eligibility fo	r LI	HEAP, do you use	gross	income or net ir	ncom	e ?		
<ul> <li></li> </ul>	Gross Income									
	Net Income									
1.9. S	elect all the app	licable forms of countable incom	e us	ed to determine a	house	hold's income eli	gibili	ty for LIHEAP		
<ul> <li></li> </ul>	Wages									
<ul> <li></li> </ul>	Self - Employn	nent Income								

~	Contract Income						
	Payments from mortgage or Sales Contracts						
V	Unemployment insurance						
$\mathbf{N}$	Strike Pay						
>	Social Security Administration (SSA ) benefits						
	Including MediCare deduction     Image: Constraint of the second se						
>	Supplemental Security Income (SSI )						
>	Retirement / pension benefits						
>	General Assistance benefits						
>	Temporary Assistance for Needy Families (TANF) benefits						
	Supplemental Nutrition Assistance Program (SNAP) benefits						
	Women, Infants, and Children Supplemental Nutrition Program (WIC) benefits						
	Loans that need to be repaid						
>	Cash gifts						
	Savings account balance						
>	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.						
>	Jury duty compensation						
$\mathbf{\mathbf{V}}$	Rental income						
	Income from employment through Workforce Investment Act (WIA)						
	Income from work study programs						
>	Alimony						
>	Child support						
>	Interest, dividends, or royalties						
>	Commissions						
<b>&gt;</b>	Legal settlements						
<b>&gt;</b>	Insurance payments made directly to the insured						
<b>&gt;</b>	Insurance payments made specifically for the repayment of a bill, debt, or estimate						
<b>&gt;</b>	Veterans Administration (VA) benefits						
	Earned income of a child under the age of 18						

	Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.
	Income tax refunds
	Stipends from senior companion programs, such as VISTA
	Funds received by household for the care of a foster child
~	Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
	Reimbursements (for mileage, gas, lodging, meals, etc.)
	Reimbursements (for mileage, gas, lodging, meals, etc.) Other
	Other - Value of non-monetary contributions, such as non-residing parents who provide food, clothing, etc., rather than cash to the parent with primary

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN ON FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES						
		MO	Y ASSISTANCE PROGRAM DEL PLAN - MANDATORY	(LIHEAP)		
	Section	on 2 - 1	Heating Assistance			
Eligibility, 2605	(b)(2) - Assurance 2					
2.1 Designate th	e income eligibility threshold used for the	heating co	mponenet:			
Add	Household size		Eligibility Guideline	Eligibility Threshold		
1	All Household Sizes		State Median Income	60.00%		
2.2 Do you have HEATING ASS	e additional eligibility requirements for ITANCE?	• Yes	C No			
2.3 Check the ap	ppropriate boxes below and describe the p	olicies for	each.			
Do you require	an Assets test ?	• Yes	C No			
Do you have ad	ditional/differing eligibility policies for:					
Renters?		🖸 Yes	C No			
Renters L	iving in subsidized housing ?	• Yes	C No			
Renters w	vith utilities included in the rent ?	• Yes	C No			
Do you give prie	ority in eligibility to:					
Elderly?		🖸 Yes	C No			
Disabled?		🖸 Yes	C No			
Young chi	ildren?	🖸 Yes	C No			
Househole	ds with high energy burdens ?	• Yes	C No			
Other?		C Yes	⊙ <sub>No</sub>			
-	Policies for each "yes" checked above: he FFY 2018 LIHEAP Allocation Plan for fur	ther inform	nation.			
Determination of	f Benefits 2605(b)(5) - Assurance 5, 2605(c)(	1)(B)				
2.4 Describe hov	w you prioritize the provision of heating as	sistance to	ovulnerable populations,e.g., benefit amount	s, early application periods, etc.		
	efit awards per income category than non-vul		elderly (60 or over), disabled, or a young child useholds. Agencies also accommodate the app			
2.5 Check the va	ariables you use to determine your benefit	levels. (Cl	neck all that apply):			
Income						
Family (he	ousehold) size					
Home ener	rgy cost or need:					
Fue	el type					
	mate/region					
	lividual bill					
	relling type					
En En	ergy burden (% of income spent on home e	energy)				

Energy burden (% of income spent on home energy)

Energy need								
V Other - Describe:								
A household's liquid assets might affect the energy assistance benefit eligibility or award level.								
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)	Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)							
2.6 Describe estimated benefit levels for FY 2018:								
Minimum Benefit	\$275	Maximum Benefit	\$660					
2.7 Do you provide in-kind (e.g., blankets, space heat	ers) and/or other fo	rms of benefits? O Yes 💿 No						
If yes, 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 3 -	COOLING	ASSISTANCE
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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	Eligibility, 2605(c)(1)(A), 2605 (b)(2) - Assurance 2								
3.1 Designate The income eligibility threshold used for the Cooling componenet:									
Add	Household size		Eligibility Guideline	Eligibility Threshold					
1				0.00%					
<b>3.2 Do you have a</b> COOLING ASSI	<b>3.2 Do you have additional eligibility requirements for</b> COOLING ASSITANCE?								
3.3 Check the appropriate boxes below and describe the policies for each.									
Do you require a	n Assets test ?	C Yes	C No						
Do you have add	Do you have additional/differing eligibility policies for:								
Renters?		C Yes	O No						
Renters Liv	ving in subsidized housing ?	C Yes	C No						
Renters wi	th utilities included in the rent ?	Oyes	C <sub>No</sub>						
Do you give prior	rity in eligibility to:								
Elderly?		C Yes	C No						
Disabled?		Oyes	C No						
Young chil	dren?	C Yes O No							
Households	s with high energy burdens ?	O <sub>Yes</sub> O <sub>No</sub>							
Other?		C Yes C No							
Explanations of J	policies for each "yes" checked above:	•							
3.4 Describe how	you prioritize the provision of cooling as	sistance to	vulnerable populations,e.g., benefit amounts,	early application periods, etc.					
Determination of	Benefits 2605(b)(5) - Assurance 5, 2605(c)	(1)(B)							
3.5 Check the var	riables you use to determine your benefit	levels. (Ch	eck all that apply):						
Income									
Family (hou	isehold) size								
Home energ	gy cost or need:								
Fuel	type								
Clin	nate/region								
Indi <sup>*</sup>	vidual bill								
Dwe	Dwelling type								
Ener	rgy burden (% of income spent on home	energy)							
Ener	rgy need								
Othe	er - Describe:								

Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)								
3.6 Describe estimated benefit levels for FY 2018:	3.6 Describe estimated benefit levels for FY 2018:							
Minimum Benefit	\$0	Maximum Benefit	\$0					
3.7 Do you provide in-kind (e.g., fans, air conditioners) an	d/or other form	ns of benefits? O Yes O No						
If yes, describe.								
If any of the above questions require furth fields provided, attach a document with sa		tion or clarification that could not be made i tion here.	in the					

Section 4 -	CRISIS	ASSISTA	ANCE
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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES	OME	/92,02/95,03/96,12/98,11/01 3 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 compon	ent		
Add Household size	Eligibility Guideline	Eligibility Threshold	
1 All Household Sizes St	ate Median Income	60.00%	
4.2 Provide your LIHEAP program's definition for determining a crisis			
There are two categories of 'Crisis' in use. 'Winter Crisis' refers to benefits p and are still in need of assistance. 'Other Crisis' assistance refers to benefits Crisis' benefits and are in a life-threatening situation. The eligibility thresho	provided to households that have fully utilitze	ed their 'heating' and 'Winter	
4.3 What constitutes a life-threatening crisis?			
lessor of 70 gallons of fuel or one-quarter tank). In addition, the household must have exhausted its heating benefits.         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	• Yes O No		
ASSISTANCE? 4.7 Check the appropriate boxes below and describe the policies for each Do you require an Assets test ? •• Yes ONO			
Do you require an Assess est : Do you give priority in eligibility to :	Yes V No		
Elderly?	O Yes 💿 No		
Disabled?	O Yes O No		
Young Children? O Yes O No			
Households with high energy burdens?			
Other?     O Yes O No			
In Order to receive crisis assistance:			
Must the household have received a shut-off notice or have a near empty tank?	• Yes C No		
Must the household have been shut off or have an empty tank?	O Yes 💿 No		
Must the household have exhausted their regular heating benefit?	• Yes O No		
Must renters with heating costs included in their rent have received an eviction notice ?			
Must heating/cooling be medically necessary?			
Must the household have non-working heating or cooling	O Yes 💿 No		

equipment?		
Other?	C Yes 💿 No	
Do you have additional / differing eligibility policies for:		
Renters?	O Yes 💿 No	
Renters living in subsidized housing?	C Yes 💿 No	
Renters with utilities included in the rent?	O Yes 💿 No	
Explanations of policies for each "yes" checked above:		

Eligible deliverable fuel heated households with incomes from zero to 200% of the federal poverty guidelines, that have exhausted their Basic Benefit award and are unable to secure primary heat, will be eligible to receive a Crisis Benefit of \$655. Eligible deliverable fuel heated households with incomes above 200% of the federal poverty guidelines up to 60% of the State Median Income guidelines, will be eligible to receive a Crisis Assistance benefit of \$295.

Determina	tion of Benefits		
4.8 How d	lo you handle crisis situations?		
>	Separate component		
	Fast Track		
	Other - Describe:		
4.9 If you	have a separate component, how do you determine crisis assistance benefits?		
<b>&gt;</b>	Amount to resolve the crisis.		
>	Other - Describe:		
	A redetermination of income eligibility will not be required to receive Crisis Assistance.		
Crisis Req	uirements, 2604(c)		
4.10 Do yo	ou accept applications for energy crisis assistance at sites that are geographically accessible to all households in the area to be served?		
• Yes	O No Explain.		
Applicatio	ns are taken at community action agencies or through an additional 170 intake sites (approximation) throughout the state.		
4.11 Do yo	ou provide individuals who are physically disabled the means to:		
Submit	applications for crisis benefits without leaving their homes?		
• Yes	C No If No, explain.		
	to the sites at which applications for crisis assistance are accepted?		
O Yes	No If No, explain.		
If you answered "No" to both options in question 4.11, please explain alternative means of intake to those who are homebound or physically disabled?			
The provision of crisis benefits are typically processed through phone calls, with no need for travel required by the client.			
Benefit Le	evels, 2605(c)(1)(B)		
4.12 Indic	ate the maximum benefit for each type of crisis assistance offered.		
Winter	Crisis \$655.00 maximum benefit		
Summe	er Crisis \$0.00 maximum benefit		
Year-r	ound Crisis \$0.00 maximum benefit		
	ou provide in-kind (e.g. blankets, space heaters, fans) and/or other forms of benefits?		
C Yes (	No If yes, Describe		
	ou provide for equipment repair or replacement using crisis funds?		
O Yes (			
If you answered "Yes" to question 4.14, you must complete question 4.15.			
4.15 Chec	k appropriate boxes below to indicate type(s) of assistance provided.		

	Winter Crisis	Summer Crisis	Year-round Crisis		
Heating system repair					
Heating system replacement					
Cooling system repair					
Cooling system replacement					
Wood stove purchase					
Pellet stove purchase					
Solar panel(s)					
Utility poles / gas line hook-ups					
Other (Specify):					
4.16 Do any of the utility vendors you work with er	nforce a mor	atorium on	shut offs?		
• Yes C No					
If you responded "Yes" to question 4.16, you must	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.					
The utility moratorium in Connecticut is from November 1st to May 1st. Households that use a utility for their primary heating source and have an arrearage may qualify to participate in the Matching Payment Program. The program will 'match' the amount of a household's LIHEAP benefit plus payments made during the moratorium, and apply this to the household's account at the end of the moratorium, down to a zero balance.					

	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES			
	LOW INCOME	HOME ENERG	Y ASSISTANCE PROGRAM(	
			DEL PLAN	
		SF - 424	- MANDATORY	
	Sect	ion 5: WEATHE	RIZATION ASSISTANCE	
	c)(1)(A), 2605(b)(2) - Assur			
5.1 Designate the	income eligibility thresho	ld used for the Weatheriz	ation component	1
Add	Househ	old Size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes		State Median Income	60.00%
5.2 Do you enter No	into an interagency agreer	nent to have another gove	ernment agency administer a WEATHERIZ	ATION component? • Yes
5.3 If yes, name t	he agency. State of Connec	cticut Department of Energ	y and Environmental Protection	
5.4 Is there a sep	arate monitoring protocol	for weatherization? 💽 Y	res 🖸 No	
WEATHERIZA	TION - Types of Rules			
	ules do you administer LI	HEAP weatherization? (C	Check only one.)	
Entirely ur	nder LIHEAP (not DOE) r	ules		
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:				
See Section 5.8 below.				
	Mostly under DOE WAP rules, with the following LIHEAP rule(s) where LIHEAP and WAP rules differ (Check all that apply.)			
	me Threshold			
	Weatherization not subject to DOE WAP maximum statewide average cost per dwelling unit.			
	Weatherization measures are not subject to DOE Savings to Investment Ration (SIR ) standards.			
	Other - Describe:			
Eligibility, 2605(	Eligibility, 2605(b)(5) - Assurance 5			
5.6 Do you requi	re an assets test?	• Yes O No		
5.7 Do you have	additional/differing eligibil	ity policies for :		
Renters		• Yes O No		
Renters liv housing?	ing in subsidized	• Yes O No		
5.8 Do you give p	5.8 Do you give priority in eligibility to:			
Elderly?		• Yes O No		
		i		

# Section 5 - WEATHERIZATION ASSISTANCE

Xama Children 9	• Yes O No	
Young Children?	• Yes O No	
House holds with high energy burdens?	O Yes O No	
Other?	O Yes 💿 No	
If you selected "Yes" for any of the options below.	s in questions 5.6, 5.7, or 5.8,	you must provide further explanation of these policies in the text field
DSS has set aside \$1,000,000.00 to provide repairs or replacement of heating systems for single family, owner-occupied dwellings that are determined to be unsafe or inoperable. These funds will be available to eligible homeowners with household incomes up to 60% of the State Median Income. Heating system componenents replaced with this funding will comply with Energy Star standards. This funding will be directly administered by DSS under LIHEAP rules.		
In addition, DSS entered into a Memorandum of Agreement for \$1,000,000 with the Department of Energy and Environmental Protection (DEEP) to provide weatherization services to CEAP eligible households. These funds will be used to address health and safety measures and will be in compliance with the U.S. Department of Energy's (DOE) Weatherization requirements. CEAP eligible households that receive these services will also receive DOE funded weatherization services. DEEP will be responsible for tracking the use of LIHEAP funds provided by DSS for the weatherization of CEAP eligible households, and will provide the Department information and data necessary to fully comply with federal reporting requirements pertaining the expenditure of LIHEAP weatherization funds.		
Benefit Levels		
5.9 Do you have a maximum LIHEAP weat	therization benefit/expendit	ire per household? • Yes ONo
5.10 If yes, what is the maximum? \$10,000		
Types of Assitance, 2605(c)(1), (B) & (D)		
Types of Assitance, 2605(c)(1), (B) & (D) 5.11 What LIHEAP weatherization measure		all categories that apply.)
Types of Assitance, 2605(c)(1), (B) & (D)	res do you provide ? (Check	all categories that apply.)
Types of Assitance, 2605(c)(1), (B) & (D) 5.11 What LIHEAP weatherization measur	res do you provide ? (Check	
Types of Assitance, 2605(c)(1), (B) & (D) 5.11 What LIHEAP weatherization measure Weatherization needs assessments/a	res do you provide ? (Check	Energy related roof repair
Types of Assitance, 2605(c)(1), (B) & (D) 5.11 What LIHEAP weatherization measur Weatherization needs assessments/a Caulking and insulation	res do you provide ? (Check udits	Energy related roof repair     Major appliance Repairs
Types of Assitance, 2605(c)(1), (B) & (D) 5.11 What LIHEAP weatherization measur Weatherization needs assessments/a Caulking and insulation Storm windows	res do you provide ? (Check udits	Energy related roof repair     Major appliance Repairs     Major appliance replacement
Types of Assitance, 2605(c)(1), (B) & (D) 5.11 What LIHEAP weatherization measure Weatherization needs assessments/a Caulking and insulation Storm windows Furnace/heating system modification	res do you provide ? (Check udits ns/ repairs	Energy related roof repair     Major appliance Repairs     Major appliance replacement     Windows/sliding glass doors
Types of Assitance, 2605(c)(1), (B) & (D)         5.11 What LIHEAP weatherization measure         Weatherization needs assessments/a         Caulking and insulation         Storm windows         Furnace/heating system modification         Furnace replacement	res do you provide ? (Check udits ns/ repairs	Energy related roof repair         Major appliance Repairs         Major appliance replacement         Windows/sliding glass doors         Doors

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 ASSIS	STANCE PROGRAM(LIHEAP)		
MODEL PL	· · · · · · · · · · · · · · · · · · ·		
SF - 424 - MAND	ATORY		
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 tha available:	t eligible households are made aware of all LIHEAP assistance		
Place posters/flyers in local and county social service offices, offices of agir	ng, 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):			
The state maintains a website dedicated to the Connecticut Energy Assistance Program. It includes information for both prospective applicants as well as vendors. Energy assistance information is also streamed through the 'DSS Network' at all DSS regional offices to inform DSS clients of the availability of heating assistance.			
An early application period is used at the beginning of the program to allow agencies time to provide outreach to vulnerable households, especially those that are homebound.			
If any of the above questions require further explanation o fields provided, attach a document with said explanation h			

	DEPARTMENT OF HEALTH AND HUMAN SERVICES NISTRATION 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 7: Coordination, 2605	(b)(4) - Assurance 4	
	7.1 Describe how you will ensure that the LIHEAP program is coordinated with other programs available to low-income households (TANF, SSI, WAP, etc.).		
>	Joint application for multiple programs		
>	Intake referrals to/from other programs		
>	One - stop intake centers		
	Other - Describe:		
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.			

	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN ON FAMILIES ADMINISTRATION FOR CHILDREN OF AND FAMILIES				
	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 response	sibility of your State ag	ency?		
>	Administration Agency				
	Commerce Agency				
	Community Services Agency				
	Energy / Environment Agency				
	Housing Agency				
	Welfare Agency				
Other - Describe:					
Alternat	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	8.2 How do you provide alternate outreach and intake for HEATING ASSISTANCE?				
8.3 How	do you provide alternate outreach and int	ake for COOLING ASS	SISTANCE?		
8.4 How do you provide alternate outreach and intake for CRISIS ASSISTANCE?					
8.5 LIH	EAP Component Administration.	Heating	Cooling	Crisis	Weatherization
	o determines client eligibility?	Community Action Agencies	Non-Applicable	Community Action Agencies	Community Action Agencies
	o processes benefit payments to gas and vendors?	Community Action Agencies	Non-Applicable	Community Action Agencies	
8.5c who vendors	o processes benefit payments to bulk fuel ?	Community Action Agencies	Non-Applicable	Community Action Agencies	
8.5d Wh measure	o performs installation of weatherization s?				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?

The Economic Opportunity Act allows for community action agencies (CAAs) to be designated and prioritized as community based organizations. As such, waivers from competitive procurement are secured by the state's Office of Policy and Management prior to contracting with CAAs to operate Low Income Home Energy Assistance Programs (LIHEAP). Additionally relating to the selection process, the annual Connecticut Energy Assistance Program (CEAP) Allocation Plan for LIHEAP specifically identifies the CAAs as the contractors for CEAP. This plan is reviewed by the State Office of Policy and Management, and submitted by the Governor to the state's LIHEAP legislative committees of cognizance for approval - Appropriations, Human Services and Energy/Technology.			
8.7 How	many local administering agencies do you use? 9		
8.8 Have you changed any local administering agencies in the last year? Yes No			
8.9 If so,	why?		
>	Agency was in noncompliance with grantee requirements for LIHEAP -		
	Agency is under criminal investigation		
	Added agency		
	Agency closed		
<b>&gt;</b>	Other - describe		
communi	The Human Resources Agency, Inc. (HRA) and Bristol Community Organization, Inc. (BCO) merged effective January 1, 2017 resulting in 9 local community action agencies instead of 10.		
Community Action Agency of New Haven, Inc. (CAANH), experienced cash flow issues in FFY2017, resulting in delayed payments to LIHEAP deliverable fuel vendors. These issues have risen to the point of material weakness, threatening the financial stability of their organization.			
LIHEAP	artment of Social Services (DSS), has intervened in light of the cash flow issues at Community Action Agency of New Haven, and began making related utility payments directly to vendors for FFY2017 and will be making both utility and deliverable fuel payments directly to vendors for 8, in addition to more stringent fiscal and program monitoring.		
Assuranc	portunities, Inc. continues to work through their action steps to address the previously reported cash flow issues and the DSS Quality we will continue to review, canceled checks for deliverable fuel vendors to ensure timely payments for New Opportunities, Inc. In addition, DSS inue to make LIHEAP related utility payments directly to vendors in FFY 2018.		

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LOW INCOME HOME ENERGY ASSIS		
MODEL PLA		
SF - 424 - MANDA		
Section 9: Energy Suppliers, 260	5(b)(7) - Assurance 7	
0.1 Do you make payments directly to home energy suppliers?		
Heating • Yes O No		
Cooling O Yes O No		
Crisis O Yes O No		
Are there exceptions? • Yes C No		
If yes, Describe.		
The only exception to this is when the household's heat is included in their rent, in which	ch case a check is sent directly to the household.	
0.2 How do you notify the client of the amount of assistance paid?		
All eligible clients receive an eligibility letter stating the amount of benefits they are awarded. Payments on behalf of utility heated households are sent directly by community action agencies (CAA) to their utility (with the exception of payments made directly by DSS to utility companies on behalf of New Dpportunities, Inc. and Community Action Agency of New Haven), and are reflected on the household's utility bill. Deliverable fuel heated households contact their CAA when they need fuel and are informed of their benefit balance prior to the authorization of each fuel delivery.		
<b>9.3</b> How do you assure that the home energy supplier will charge the eligible house actual cost of the home energy and the amount of the payment?	chold, in the normal billing process, the difference between the	
Participating deliverable fuel vendors each sign a document that specifies that they are should their retail price be higher than the fixed margin price.	not to charge clients for deliveries made through the program,	
9.4 How do you assure that no household receiving assistance under this title will l assistance?	be treated adversely because of their receipt of LIHEAP	
All home energy suppliers (except wood and coal), are required to sign an agreement w attached vendor agreements for deliverble fuel energy suppliers and utility energy supp	· · ·	
0.5. Do you make payments contingent on unregulated vendors taking appropriate nouseholds?	e measures to alleviate the energy burdens of eligible	
If so, describe the measures unregulated vendors may take.		
If any of the above questions require further explanation or fields provided, attach a document with said explanation he		

	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES					
	LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)					
			L PLAN			
		SF - 424 - M	ANDATORY			
	Section	10: Program, Fiscal Mo	nitoring, and Audit, 260	5(b)(10)		
10.1. How do	you ensure good fiscal	accounting and tracking of LIHEAP	funds?			
demographics, that funds are	, and fiscal information being committed in a tir	w, the Office of Community Services pul such as funds committed, funds invoice mely manner and that funds are being ex ministrative expenditures. Reports are	d for payment, and actual expenditures spended properly and timely. Monthly	. These reports are analyzed to ensure reports are required from community		
Audit Process	s					
10.2. Is your l		ited annually under the Single Audit	Act and OMB Circular A - 133?			
		sing to the level of material weakness ws, or other government agency revio				
No Findings						
Finding	Туре	Brief Summary	Resolved?	Action Taken		
	Type financial	Brief Summary Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year.	Resolved? In Progress	Action Taken		
Finding 1	financial	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year.				
Finding 1 1 10.4. Audits o	financial of Local Administering	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year.	In Progress	procedure/policy changes		
Finding 1 1 10.4. Audits o	financial of Local Administering f annual audit requirer	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year.	In Progress	procedure/policy changes		
Finding 1 1 1 10.4. Audits o What types of Select all that	financial of Local Administering f annual audit requirer apply.	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year.	In Progress dminstering agencies/district offices'	procedure/policy changes		
Finding Finding 1 1 1 1 1 1 1 1 1 1 1 1 1	financial of Local Administering f annual audit requiren t apply. al agencies/district offi	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year. Agencies ments do you have in place for local a	In Progress dminstering agencies/district offices? udit in compliance with Single Audit	procedure/policy changes		
Finding I I I I I I I I I I I I I I I I I I I	financial of Local Administering f annual audit requirer t apply. al agencies/district offi al agencies/district offi	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year. Agencies ments do you have in place for local a	In Progress dminstering agencies/district offices? adit in compliance with Single Audit adit (other than A-133)	procedure/policy changes		
Finding Finding 1 1 1 1 1 1 1 1 1 1 1 1 1	financial of Local Administering f annual audit requirer t apply. al agencies/district offi al agencies/district offi	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year. Agencies ments do you have in place for local a ices are required to have an annual an ices are required to have an annual an	In Progress dminstering agencies/district offices? Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part of	procedure/policy changes		
Finding Finding 1 1 1 1 1 1 1 1 1 1 1 1 1	financial of Local Administering f annual audit requirer t apply. al agencies/district offi al agencies/district offi	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year. Agencies ments do you have in place for local a ices are required to have an annual an ices 'A-133 or other independent audi	In Progress dminstering agencies/district offices? Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part of	procedure/policy changes		
Finding Finding 1 1 1 1 1 1 1 1 1 1 1 1 1	financial of Local Administering f annual audit requirer apply. al agencies/district offi al agencies/district offi al agencies/district offi	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year. Agencies ments do you have in place for local a ices are required to have an annual an ices 'A-133 or other independent audi	In Progress dminstering agencies/district offices? Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part of	procedure/policy changes		
Finding Finding 1 1 1 1 1 1 1 1 1 1 1 1 1	financial of Local Administering f annual audit requirer a agencies/district offi al agencies/district offi al agencies/district offi untee conducts fiscal an Monitoring	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year. Agencies ments do you have in place for local a ices are required to have an annual an ices 'A-133 or other independent audi	In Progress dminstering agencies/district offices? udit in compliance with Single Audit udit (other than A-133) ts are reviewed by Grantee as part of ies/district offices	procedure/policy changes P Act and OMB Circular A-133 f compliance process.		
Finding Finding 1 1 1 1 1 1 1 1 1 1 1 1 1	financial of Local Administering f annual audit required apply. al agencies/district offi al agencies/district offi al agencies/district offi intee conducts fiscal an Monitoring e the Grantee's strateg	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year. Agencies ments do you have in place for local a fices are required to have an annual au- tices are required to have an annual au- tices 'A-133 or other independent audit ad program monitoring of local agence	In Progress dminstering agencies/district offices? udit in compliance with Single Audit udit (other than A-133) ts are reviewed by Grantee as part of ies/district offices	procedure/policy changes P Act and OMB Circular A-133 f compliance process.		
Finding Finding 1 1 1 1 1 1 1 1 1 1 1 1 1	financial of Local Administering f annual audit required apply. al agencies/district offi al agencies/district offi al agencies/district offi intee conducts fiscal an Monitoring e the Grantee's strateg	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year. Agencies ments do you have in place for local a fices are required to have an annual au- tices are required to have an annual au- tices 'A-133 or other independent audit ad program monitoring of local agence	In Progress dminstering agencies/district offices? udit in compliance with Single Audit udit (other than A-133) ts are reviewed by Grantee as part of ies/district offices	procedure/policy changes P Act and OMB Circular A-133 f compliance process.		
Finding Finding 1 1 1 1 1 1 1 1 1 1 1 1 1	financial of Local Administering f annual audit requirer i apply. al agencies/district offi al agencies/district offi al agencies/district offi ntee conducts fiscal an Monitoring e the Grantee's strateg	Present in the last two audits for Community Action Agency of New Haven, applicants not receiving correct benefits. The Department issued a management decision letter for the previous audit that it agreed with the audit finding, The Department is in the process of issuing a management decision letter for the current year. Agencies ments do you have in place for local a fices are required to have an annual au- tices are required to have an annual au- tices 'A-133 or other independent audit ad program monitoring of local agence	In Progress dminstering agencies/district offices? udit in compliance with Single Audit udit (other than A-133) ts are reviewed by Grantee as part of ies/district offices	procedure/policy changes P Act and OMB Circular A-133 f compliance process.		

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

Other program review mechanisms are in place. Describe:

The Auditors of Public Accounts for the state complete an annual audit of DSS that includes LIHEAP.

Local Adminstering 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:

Monitoring includes the review of sample program files and payments to ensure that the program is being operated in accordance with the State Plan. All monitoring is conducted by DSS staff.

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

Each community action agency is assigned a technical advisor/monitor from the DSS Office of Community Services staff. Frequent on-site visits are conducted during the program year to review sample files and resolve any emergent issues. A sampling of deliverbale fuel slips and associated payments are also examined during the program year to ensure accurate, proper, and timely payments.

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

Site Visits:

All community action agencies are monitored.

#### **Desk Reviews:**

DSS has access to the LIHEAP computer systems used by each community action agency. Beyond pulling caseload and fiscal information, we can review individual computer files to access the records of clients who have contacted DSS for assistance with their specific case. Note that this assistance is different from the formal appeal process that LIHEAP applicants/clients have the right to, i.e., a desk review of their case by the community action agency should they believe that they were wrongfully denied benefits, and if still unsatisfied, an appeal to the DSS Office of Legal Counsel, Regulations and Administrative Hearings.

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

Continuously during the full program year.

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

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

10.11. How many local agencies are currently on corrective action plans for eligibility and/or benefit determination issues? 0

10.12. How many local agencies are currently on corrective action plans for financial accounting or administrative issues? 0

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

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

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

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

## 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)

**D**raft 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:

Public participation in the development of the plan, prior to the legislative hearings, is accomplished through input from the community action agency program operators and directors, and also from members of the Low Income Energy Advisory Board (LIEAB). The responsibility of LIEAB is to advise and assist the State Office of Policy and Management and DSS in the planning, development, implementation and coordination of the energy assistance program. LIEAB is also required to make recommendations to the General Assembly regarding legislation and plans to ensure affordable access to residential energy services to low income state residents. Membership of LIEAB includes representatives from the Connecticut Association for Community Action, Commission on Aging, the Department of Energy and Environmental Protection, the Office of Consumer Council, Operation Fuel, 211 United Way, Connecticut Local Administrators of Social Services, Legal Assistance Resource Center of Connecticut, Connecticut AARP, Connecticut Energy Marketers Association, Eversource utility company, United Illuminating Company, Yankee Gas Company, Connecticut Natural Gas Company, Southern Connecticut Gas Company, and Norwich Public Utilities. Many of these organizations and members of LIEAB represent the low-income population in Connecticut.

Copies of the proposed FFY 2018 LIHEAP Allocation Plan were provided to LIEAB members, the community action agencies, and linked on the DSS main website and the DSS Energy Staywarm website also provided to others who requested it prior to review and approval by the legislative committees of cognizance.

#### 11.2 What changes did you make to your LIHEAP plan as a result of this participation?

Changes made in this year's plan as a result of public participation include the expanding of eligibility to include Level 5 households in the Heating System Repair Replacement component one of the LIEAB recommendations along with the continuation of the SUA LIHEAP benefit and funding for the repair and replacement of heating systems to eligible CEAP clients.

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	08/31/2017	LIHEAP Block Grant Hearings by the legislative committees of cognizance, i.e., Appropriations, Human Services, and Energy & Technology

11.4. How many parties commented on your plan at the hearing(s)? Approx. 17

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

Testimony provided by two organizations in addition to the State Department of Social Services at the legislative hearings was in support of the FFY 17

LIHEAP Allocation Plan. Questions and comments at the hearings came from State Senators and Representatives. Written testimony was also presented. Comments focused on the budget/benefit matrix in the plan, fuel costs, vendor payments and the SNAP/SUA benefit. The allocation plan was passed by all three legislative committees of cognizance.

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

N/A

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

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

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

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

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

12.1 How many fair hearings did the grantee have in the prior Federal fiscal year? 3

12.2 How many of those fair hearings resulted in the initial decision being reversed? 1

12.3 Describe any policy and/or procedural changes made in the last Federal fiscal year as a result of fair hearings?

Not applicable.

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

If a household has been denied, they have the right to a desk review at the community action agency where their application was certified. The request must be made in writing to the Chief Executive of the agency. Requests for desk reviews must be submitted within sixty (60) days of the occurrence or the discovery of the occurrence, or by the end of the program year, whichever comes first. If the household is dissatisfied with the result of the desk review, they may request, in writing, a fair hearing with the Department of Social Services' Office of Legal Counsel, Regulations and Administrative Hearings.

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

All households are notified in writing at the time of application of their rights and obligations and the procedures for appeal. Award letters also include information regarding the applicants rights to and process for appeals.

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

If a household has not been informed of their eligibility in a timely manner, they have the right to a desk review at the community action agency where their application was certified. The request must be made in writing to the Chief Executive of the agency. Requests for desk reviews must be submitted within sixty(60) days of the occurrence or the discovery of the occurrence, or by the end of the program year, whichever comes first. If the household is dissatisfied with the result of the desk review, they may request, in writing, a fair hearing with the Department of Social Services' Office of Legal Counsel, Regulations and Administrative Hearings.

12.7 When and how are applicants informed of these rights?

All households are notified in writing when they apply of their rights and obligations and the procedures for appeal.

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

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

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

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

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

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

Assurance 16 funds play a significant role in the ability of community action agencies to provide the appropriate case management activities aimed at reducing reliance on LIHEAP funds and reducing their overall energy needs. Such services include, but are not limited to, risk assessment, counseling, energy reduction education/awareness, assistance with energy suppliers/vendors aimed at enabling households to achieve a greater degree of energy self-sufficiency, and financial education.

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

DSS allocates less than the 5% maximum of the LIHEAP funds for these activities to the community action agencies. The agencies are required to submit quarterly fiscal and programatic reports detailing their use of these funds for the specific purposes intended.

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

Beyond the direct benefits to LIHEAP recipients as described in Section 13.4 below, clients benefited from budget counseling and money management services, energy conservation counseling, and vendor mediation.

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

Services provided through Assurance 16-funded staff helped to leverage millions of dollars for LIHEAP recipients through enrollment in utility arrearage forgiveness programs (Matching Payment Program and NewStart), as well as through Operation Fuel, which is a non-profit organization that provides heating assistance to households that have exhausted their LIHEAP benefits, or that are at risk of losing their heat from shut-offs.

13.5 How many households applied for these services? 16,905

13.6 How many households received these services? 16,905

		TH AND HUMAN SERVICE DREN AND FAMILIES	ES August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075 Expiration Date: 09/30/2020			
	LOW INC		GY ASSISTANCE PROGRAM(LIHEAP)			
			DDEL PLAN 4 - MANDATORY			
	Section 14:Leveraging Incentive Program, 2607(A)					
14.1 Do you p • Yes ON		cation for the leveraging incen	tive program?			
14.2 Describe records.	instructions to any thi	rd parties and/or local agencie	es for submitting LIHEAP leveraging resource information and retaining			
			red to post their retail price on fuel slips when they make a delivery. This price is g of the difference between the FMP and the retail price.			
			Operation Fuel and Utility Companies can provide the total amount of funding -administered arrearage forgiveness programs.			
14.3 For each describe the f		or benefit to be leveraged in th	e upcoming year that will meet the requirements of 45 C.F.R. § 96.87(d)(2)(iii),			
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	Fixed Margin Pricing Program	The Fixed Margin Pricing Program will pay oil vendors making deliveries to LIHEAP households the lessor of their retail price or the margin over rack price based on information downloaded each work day from the Oil Price Information Service (OPIS). The daily fixed margin price is based on the daily New Haven rack average OPIS low sulfur distillate price, plus a fixed margin of 33 cents per gallon, plus the appropriate county differential, which ranges between counties from 3.3 cents to 11.5 cents per gallon.	Any leveraged funds will be used for direct program services to clients.			
2	Operation Fuel	Operation Fuel is a private, non-profit organization that distributes privately raised funds through a network of fuel banks that accept and approve applications from households in need of emergency fuel oil deliveries or protection from shut-offs. Operation Fuel can, as funding permits and with the approval of its Board of Directors, on an annual basis provide limited assistance to LIHEAP households that are facing a crisis because they have exhausted all available LIHEAP benefits, or because they did not apply for the energy assistance program by the required deadlines.	Any leveraged funds received will be used for direct program services to clients.			

# Section 14 - Leveraging Incentive Program ,2607A

3	Utility Arrearage Forgiveness Programs	Community Action Agencies may also refer eligible households to utility companies that operate arrearage forgiveness programs. Households that participate in these programs will have a portion of their arrears (back bills) forgiven if all payment arrangements are kept, and if the household has been approved for LIHEAP. In order to participate in the arrearage forgiveness programs, households must provide utility companies with verification as to the amount of the energy assistance payment which will be issued by the community action agency on their behalf. The amount of arrearage forgiveness received by the household is dependent on the amount of personal payments made by the household and the amount of the household's benefit.	Any leveraged funds received will be used for direct program services to clients.
4	Home Energy Solutions-Income Eligible	Households under 60% of the state median income may qualify for services through this program.	Any leveraged funds will be used for direct client services.

Section	15	- Training
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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 15: Tr	raining			
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:				
Employees are provided with policy manual				
Other-Describe:				
b. Local Agencies:				
Formal training conference				
How often?				
Annually				
Biannually				
As needed				
Other - Describe:				
On-site training				
How often?				
Annually				
Biannually				
As needed				
Other - Describe: Technical Assistance/Monitoring Visits				
Employees are provided with policy manual				
Other - Describe				
c. Vendors				
Formal training conference				
How often?				
Annually				
Biannually				
As needed				
Other - Describe: Vendor conferences are held each year after a	pproval of the Allocation Plan.			

Policies c	communicated through vendor agreements
Policies a	are outlined in a vendor manual
Other - I	Describe:
15.2 Does your tra	aining program address fraud reporting and prevention?
•	above questions require further explanation or clarification that could not be made in the ed, attach a document with said explanation here.

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

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

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

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

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

16.1 Describe your progress toward meeting the data collection and reporting requirements of the four required LIHEAP performance measures. Include timeframes and plans for meeting these requirements and what you believe will be accomplished in the coming federal fiscal year.

In FFY 2014, Connecticut imbedded a series of energy burden questions in its statewide LIHEAP application which has allowed us to harvest preventive and restorative data for LIHEAP households. Subsequent to this, a pilot project commenced in Calendar Year 2016 to harvest consumption data from one municipal utility that provides both electricity and natural gas, one heating oil vendor and the Community Action Agency (CAA) that provides LIHEAP services in this catchment area. Technical specifications adhered to HHS recommendations from the *LIHEAP Performance Data Form-Calculations for Performance Measures Section*. The pilot project demonstrated the ability to calculate the energy burdens for a small sample of gas, electric, and oil heated households of LIHEAP clients, using the consumption data from the pilot and the annual income data from the CAA LIHEAP software system. The data from this sample met the HHS requirement of using unduplicated numbers of households with 12 consecutive months of billing data (main fuel and electric). The data described in this paragraph was used in the development of the state's first full Performance Measures Report, filed in January of 2017. The use of the word full in this case refers to the completion of all data elements called for in the Performance Measure Report. The actual preventative/restorative data reflected LIHEAP recipients statewide, while the consumption data was based on a small sample which will be expanded in future reports.

A larger sample of consumption data was tested in August of 2017 from the LIHEAP recipient pool served by the CAA involved with the pilot. Ongoing discussion with addition vendors have progressed, and soon will involve data sharing with one of the state's largest utility companies. This additional data will dramatically increase the sample size of the data used to report consumption information in the next Performance Measures Report, which will be filed in January of 2018.

As indicated above, Connecticut has piloted the collection of consumption data relating to the development of performance measures, and many 'best practices' have been identified which will help with the rollout of this project. Next steps to be undertaken in FFY 2018 will include expanding the pilot to an additional CAA and interaction with additional electric, natural gas, and deliverable fule vendors. In addition, the other LIHEAP software provider in the state will begin to asssit with the collection of consumption data for service areas of other CAAs.

Connecticut is committed to generating sufficient data to improve upon the current benefit matrix, and to ensure that LIHEAP benefits and services are provided to those households with the highest energy burdens.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES					
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN					
	SF - 424 - N	IANDATORY			
	Section 17: Program	Integrity, 2605(b)(10)			
17.1 Fraud Reporting Mechanisms					
a. Describe all mechanisms availab	le to the public for reporting cases of	suspected waste, fraud, and abuse. Se	elect all that apply.		
Online Fraud Reporting	g				
Dedicated Fraud Repor	ting Hotline				
	agency/district office or Grantee offic	e			
<u>·</u>	or General or Attorney General				
Forms and procedures	in place for local agencies/district offic	ces and vendors to report fraud, wast	e, and abuse		
Other - Describe:					
b. Describe strategies in place for a	dvertising the above-referenced resou	rces. Select all that apply			
Printed outreach mater	ials				
Addressed on LIHEAP	application				
Website					
Other - Describe:					
17.2. Identification Documentation	Requirements				
	·		A Darmellanda an dhain hanna ha bh		
a. Indicate which of the following f members.	orms of identification are required or	requested to be conected from LIHE	AP applicants or their nousehold		
		Collected from Whom?			
Type of Identification Collected					
	Applicant Only Required	All Adults in Household	All Household Members		
Social Security Card is		Required	Required		
photocopied and retained	Requested	Requested	Requested		
	Required	Required	Required		
Social Security Number (Without actual Card)					
	Requested	Requested	Requested		
Government-issued identification card	Required	Required	Required		
(i.e.: driver's license, state ID, Tribal ID, passport, etc.)	Requested	Requested	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							
b. D	escribe any exceptions to the above	e policies.		-	u-		
	3 Identification Verification						
Des appl	cribe what methods are used to ve ly	rify the authenticity	v of identification of	locuments provid	ed by clients or hou	sehold members.	Select all that
~	Verify SSNs with Social Securi	ty Administration					
>	Match SSNs with death record	s from Social Secur	ity Administratio	n or state agency			
~	Match SSNs with state eligibili	ty/case managemen	t system (e.g., SNA	AP, TANF)			
	Match with state Department of	of Labor system					
	Match with state and/or federa	l corrections systen	n				
	Match with state child support	system					
	Verification using private softw	vare (e.g., The Wor	k Number)				
	In-person certification by staff	(for tribal grantees	only)				
	Match SSN/Tribal ID number	with tribal databas	e or enrollment re	cords (for tribal g	rantees only)		
	Other - Describe:						
	4. Citizenship/Legal Residency Ver				1		
	at are your procedures for ensurin hat apply.	ig that nousehold m	embers are U.S. c	tizens or allens w	no are quantied to i	receive LIHEAP	Select
	Clients sign an attestation of o	titizenship or legal ı	residency				
	Client's submission of Social S	Security cards is ac	cepted as proof of	legal residency			
	Noncitizens must provide doc	umentation of imm	igration status				
	Citizens must provide a copy of their birth certificate, naturalization papers, or passport						
	Noncitizens are verified throu	igh the SAVE system	m				
	Tribal members are verified t	hrough Tribal enro	llment records/Tr	ibal ID card			
~	Other - Describe:						
an S deriv and	d social security numbers must be su SN is pending, an SSN is applied for vative beneficiaries). Non-qualified citizens/qualified aliens may be proc me will be counted.	, an SSN is not requi aliens (NQAs) are no	ired (battered spous ot eligible for LIHE	es, lawful permane AP benefits. Appl	nt residents, victims ications for househol	of human trafficki ds that include nor	ng and their n-qualified aliens
17.5	5. Income Verification						
	at methods does your agency utiliz	e to verify househo	ld income? Select	all that apply.			
	Require documentation of inco	me for all adult ho	isehold members				
	Pay stubs						
	Social Security award le	etters					
	Bank statements						
	Tax statements						
	Zero-income statements	8					
	Unemployment Insuran	ce letters					
	Other - Describe:						
	Computer data matches:						
	Income information ma	tched against state	computer system (	e.g., SNAP. TANI	<u>?</u> )		
	Proof of unemployment	0	1 0	,			

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Social Security income verified with SSA
Utilize state directory of new hires
Other - Describe:
17.6. Protection of Privacy and Confidentiality
Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.
Policy in place prohibiting release of information without written consent
Grantee LIHEAP database includes privacy/confidentiality safeguards
Employee training on confidentiality for:
Grantee employees
Local agencies/district offices
Employees must sign confidentiality agreement
Grantee employees
Local agencies/district offices
Physical files are stored in a secure location
Other - Describe:
17.7. Verifying the Authenticity
What policies are in place for verifying vendor authenticity? Select all that apply.
All vendors must register with the State/Tribe.
All vendors must supply a valid SSN or TIN/W-9 form
Vendors are verified through energy bills provided by the household
Grantee and/or local agencies/district offices perform physical monitoring of vendors
Other - Describe and note any exceptions to policies above:
17.8. Benefits Policy - Gas and Electric Utilities
17.8. Benefits Policy - Gas and Electric Utilities         What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.
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
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.
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply. Applicants required to submit proof of physical residency
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.           Applicants required to submit proof of physical residency           Applicants must submit current utility bill
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership Consumption
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership  Consumption Balances
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership  Consumption Balances Payment history
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.         Applicants required to submit proof of physical residency         Applicants must submit current utility bill         Data exchange with utilities that verifies:         Account ownership         Consumption         Balances         Payment history         Account is properly credited with benefit
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.         Applicants required to submit proof of physical residency         Applicants must submit current utility bill         Data exchange with utilities that verifies:         Account ownership         Consumption         Balances         Payment history         Account is properly credited with benefit         Other - Describe:         When household members move from prior addresses, community action agencies may require documentation that verifies their current residential
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership Consumption Balances Payment history Account is properly credited with benefit  Other - Describe: When household members move from prior addresses, community action agencies may require documentation that verifies their current residential address.
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.         Applicants required to submit proof of physical residency         Applicants must submit current utility bill         Data exchange with utilities that verifies:         Account ownership         Consumption         Balances         Payment history         Account is properly credited with benefit         Other - Describe:         When household members move from prior addresses, community action agencies may require documentation that verifies their current residential address.
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.         Applicants required to submit proof of physical residency         Applicants must submit current utility bill         Data exchange with utilities that verifies:         Account ownership         Consumption         Balances         Payment history         Account is properly credited with benefit         Other - Describe:         When household members move from prior addresses, community action agencies may require documentation that verifies their current residential address.         Centralized computer system/database tracks payments to all utilities         Centralized computer system automatically generates benefit level
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.         Applicants required to submit proof of physical residency         Applicants must submit current utility bill         Data exchange with utilities that verifies:         Account ownership         Consumption         Balances         Payment history         Account is properly credited with benefit         Other - Describe:         When household members move from prior addresses, community action agencies may require documentation that verifies their current residential address.         Centralized computer system/database tracks payments to all utilities         Centralized computer system automatically generates benefit level         Separation of duties between intake and payment approval
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.         Applicants required to submit proof of physical residency         Applicants must submit current utility bill         Data exchange with utilities that verifies:         Account ownership         Consumption         Balances         Payment history         Account is properly credited with benefit         Other - Describe:         When household members move from prior addresses, community action agencies may require documentation that verifies their current residential address.         Centralized computer system/database tracks payments to all utilities         Centralized computer system automatically generates benefit level         Separation of duties between intake and payment approval         Payments coordinated among other energy assistance programs to avoid duplication of payments

Direct payment to households are made in limited cases only
Procedures are in place to require prompt refunds from utilities in cases of account closure
Vendor agreements specify requirements selected above, and provide enforcement mechanism
Other - Describe:
17.9. Benefits Policy - Bulk Fuel Vendors
What procedures are in place for averting fraud and improper payments when dealing with bulk fuel suppliers of heating oil, propane, wood, and other bulk fuel vendors? Select all that apply.
Vendors are checked against an approved vendors list
Centralized computer system/database is used to track payments to all vendors
Clients are relied on for reports of non-delivery or partial delivery
Two-party checks are issued naming client and vendor
Direct payment to households are made in limited cases only
Vendors are only paid once they provide a delivery receipt signed by the client
Conduct monitoring of bulk fuel vendors
Bulk fuel vendors are required to submit reports to the Grantee
Vendor agreements specify requirements selected above, and provide enforcement mechanism
Other - Describe:
17.10. Investigations and Prosecutions
Describe the Grantee's procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients/staff/vendors found to have committed fraud. Select all that apply.
Refer to state Inspector General
Refer to local prosecutor or state Attorney General
<b>Refer to US DHHS Inspector General (including referral to OIG hotline)</b>
Local agencies/district offices or Grantee conduct investigation of fraud complaints from public
Grantee attempts collection of improper payments. If so, describe the recoupment process
Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned? Current year plus 2 additional years.
Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated
Vendors found to have committed fraud may no longer participate in LIHEAP
V Other - Describe:
Vendors determined to have committed fraud are banned for 5 years.
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.

fields provided, attach a document with said explanation here.

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

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

Instructions for Certification

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

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

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

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

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 pint is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, SW Washington, DC 20201.

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

**1.** By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

2. The certification set out below is a material representation of fact upon which 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)

	<u>i</u> state	⊥ zip Code	
Hartford <u>* City</u>	ст <u>*</u> State	06105 <u>*</u> Zip Code	
Address Line 3			
Address Line 2			
55 Farmington Avenue <u>* Address Line 1</u>			

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

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 disbursal 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

- Delegation Letter is required if someone other than the Governor or Chairman Certified this Report.
- Heating component benefit matrix, if applicable
- Cooling component benefit matrix, if applicable
- Minutes, notes, or transcripts of public hearing(s).