# **DETAILED MODEL PLAN (LIHEAP)**

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

**Grantee Name:** Maryland

Report Name: DETAILED MODEL PLAN (LIHEAP)

**Report Period:** 10/01/2020 to 09/30/2021 **Report Status:** Submission Accepted by CO

# Report Sections

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- 4. Section 3 COOLING ASSISTANCE
- 5. Section 4 CRISIS ASSISTANCE
- 6. Section 5 WEATHERIZATION ASSISTANCE
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- 16. Section 15 Training
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- 18. Section 17 Program Integrity, 2605(b)(10)
- 19. Section 18: Certification Regarding Debarment, Suspension, and Other Responsibility Matters
- 20. Section 19: Certification Regarding Drug-Free Workplace Requirements
- 21. Section 20: Certification Regarding Lobbying
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# **Mandatory Grant Application SF-424**

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

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

OMB Clearance No.: 0970-0075

Expiration Date: 09/30/2020

* 1.a. Type of	Submis	ssion:	* 1.b. Frequency:	* 1.c. Consolidated Application/			* 1.d. Version:		
Plan			• Annual		Plan/Funding Request?		t?		
				Explanation:			C Resubmission		
								Revision	
								C Update	
					2. Date Recei	ved:		State Use Only:	
					3. Applicant	Identifie	r:		
					4a. Federal E	Entity Ide	entifier:	5. Date Received By State:	
					<b>4b. Federal</b> <i>A</i> 93.568	Award Id	entifier:	6. State Application Identifier:	
7. APPLICAN	T INFO	ORMATION							
* a. Legal Nar	ne: Stat	te of Maryland							
* <b>b. Employer</b> 526002033	/Taxpa	yer Identificat	ion Number (EIN/TIN	): 1-	* c. Organiza	ntional D	UNS: 878358	3332	
* d. Address:									
* Street 1:		311 West Sar	ratoga St, 2nd Floor		Street 2:				
* City:		BALTIMOR	E		County:				
* State:		MD			Province:				
* Country:		United States			* Zip / Postal 21201 - Code:		21201 -		
e. Organizatio	nal Uni	t:							
Department N Maryland De		t of Human Ser	vices		Division Name: Office of Home Energy Programs				
f. Name and co	ontact i	nformation of	person to be contacted	on matters in	volving this ap	plication	n:		
Prefix:	* First Willia	Name:		Middle Name	* Last Name: Freeman				
Suffix:	Title:	3111		Ouganization	nal Affiliation:				
Sumx.		tor, Office of H	ome Energy	-	of Human Services				
* Telephone	Fax Nu	umber		* Email:					
Number: 4107675324				Bill.Freeman	ı@maryland.go	v			
* 8a. TYPE O A: State Gover		LICANT:							
b. Addition	al Desci	ription:							
* 9. Name of I	ederal	Agency:							
		<b>3V</b> .							
			1 ~ -	45.1					
			<b>II</b>	g of Federal Dor sistance Number				CFDA Title:	
10. CFDA Num	bers and	Titles	93568			Low-Inc	ome Home Ene	ergy Assistance	
-		of Applicant's Energy Assistan	Project ce Program for the State	e of Maryland					
12. Areas Affe	cted by	Funding:							

13. CONGRESSIONAL DISTRICT	TS OF:					
* a. Applicant 7		b. Program/Project: Statewide				
Attach an additional list of Program	n/Project Congressional Districts if ne	eded.				
14. FUNDING PERIOD:		15. ESTIMA	IATED FUNDING:			
a. Start Date: 10/01/2020	<b>b. End Date:</b> 09/30/2021		* a. Federal (\$):			
* 16. IS SUBMISSION SUBJECT T	O REVIEW BY STATE UNDER EX	ECUTIVE (	ORDER 12372 PROCESS?			
a. This submission was made ava	nilable to the State under the Executive	e Order 123	372			
Process for Review on :						
b. Program is subject to E.O. 123	372 but has not been selected by State	for review.				
c. Program is not covered by E.O	). 12372.					
* 17. Is The Applicant Delinquent On Any Federal Debt?  C YES  NO						
Explanation:						
complete and accurate to the best of	f my knowledge. I also provide the req ny false, fictitious, or fraudulent stater	uired assura	ertifications** and (2) that the statements herein are true, ances** and agree to comply with any resulting terms if I ims may subject me to criminal, civil, or administrative			
** The list of certifications and assu specific instructions.	rances, or an internet site where you i	may obtain t	this list, is contained in the announcement or agency			
	tle of Authorized Certifying Official		18c. Telephone (area code, number and extension)			
Augustin Ntabaganyimana			18d. Email Address			
18b. Signature of Authorized Certif	ying Official		18e. Date Report Submitted (Month, Day, Year) 09/01/2020			

# **Section 1 - Program Components**

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

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

Expiration Date: 09/30/2020

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

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

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

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

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

# **Section 1 Program Components**

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

(No	Check which components you will operate under the LIHEAP program. te: You must provide information for each component designated here as requested elsewhere in plan.)	Dates of Operation		
		Start Date	End Date	
>	Heating assistance	10/01/2020	05/31/2021	
>	Cooling assistance	05/01/2020	09/30/2021	
>	Crisis assistance	11/01/2020	05/31/2021	
	Weatherization assistance			

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

Customers do not apply separately for crisis assistance in Maryland and there are no separate fuel benefits provided. Crisis assistance is provided as expedited assistance as defined by Code of Maryland Regulations (COMAR) 07.03.21.10. Crisis assistance funds are also provided to the Maryland Department of Housing and Community Development through and Inter-Agency Agreement for emergency heating and/or cooling system repair and replacement.

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

1.2 Estimate what amount of available LIHEAP funds will be used for each component that you will operate: The total of all percentages must add up to 100%.	Percentage (%)
Heating assistance	67.00%
Cooling assistance	15.00%
Crisis assistance	5.00%
Weatherization assistance	0.00%

	Commence to the following follows fixed year										
<u> </u>	Carryover to the following federal fiscal year 5.00%										
_	Administrative and planning costs 8.009										
_								0.00%			
TO		npieme	ent leveraging activities								0.00%
10.	AL										100.00%
Alto	ernate Use of Crisis	Assis	tance Funds, 2605(c)(1)(0	C)							
1.3	The funds reserved	for w	inter crisis assistance tha	t ha	ve not been exper	ıded	by March 15 will	be re	eprogrammed to:		
	Heating assistance		Cooling assistance								
	Weatherization assistance	>	Other (specify:) Maryland provides expedited heating assistance payments to assist households experiencing a crisis situation, but we do not reserve funds specifically for crisis assistance. We do however take measures to ensure that heating assistance funds are available throughout the crisis season to make expedited payments to qualified households experiencing crisis situations. The 5% number in Section 1.2 represents the estimate of the amount of heating assistance funds that will be distributed in an expedited manner for crisis assistance in addition to the crisis funds provided to DHCD for heating and cooling system repair.								
Cat	egorical Eligibility,	2605	(b)(2)(A) - Assurance 2, 2	605(	c)(1)(A), 2605(b)(	(8A)	- Assurance 8				
	•		lds categorically eligible i	if on	e household mem	ber 1	receives one of the	follo	owing categories o	of ber	nefits in the left
<u> </u>	ımn below? O Yes										
If y	ou answered "Yes"	' to qu	estion 1.4, you must com	plete	the table below a	and a	nswer questions 1	l.5 aı	nd 1.6.		
					Heating		Cooling	_	Crisis		Weatherization
TAN	IF.				Yes 💽 No	<u> </u>	Yes 💽 No		Yes 🖲 No		Yes 💽 No
SSI				0	Yes 💽 No	0	Yes 💽 No	0	Yes 💽 No	0	Yes 💿 No
SNA	P			0	Yes 💽 No	0	Yes 💽 No	0	Yes 💽 No	0	Yes 💽 No
Mea	ns-tested Veterans Pi	rogran	ıs	0	Yes 💽 No	0	Yes 🖸 No	0	Yes 💽 No	0	Yes 💽 No
			Program Name		Heating		Cooling		Crisis		Weatherization
Oth	er(Specify) 1		Program Name		Heating  O Yes O No		Cooling  C Yes No		Crisis  C Yes • No		Weatherization  O Yes O No
		llv eni		dire	C Yes O No	tion	C Yes O No				
1.5	Do you automatical	lly eni	Program Name roll households without a	dire	C Yes O No	tion	C Yes O No				
1.5		lly eni		dire	C Yes O No	tion	C Yes O No				
1.5 If Y	Do you automatical es, explain: How do you ensure	there			C Yes No		C Yes ♠ No	from	C Yes No	ng ot	C Yes © No
1.5 If Y	Do you automatical es, explain: How do you ensure en determining eligi	there	roll households without a		C Yes No		C Yes ♠ No	from	C Yes No	ng ot	C Yes © No
1.5 If Y	Do you automatical es, explain:  How do you ensure en determining eligi	there ibility ents	roll households without a is no difference in the tre and benefit amounts?	eatm	C Yes No	lly el	Yes No		C Yes No	ng ot	C Yes © No
1.5 If Y  1.6 whe	Do you automatical es, explain: How do you ensure en determining eligi AP Nominal Payme	e there ibility ents	roll households without a is no difference in the tre and benefit amounts?  P funds toward a nomina	eatn	Yes No ct annual application of categorication of categorication with the second secon	lly el	Yes No Yes No No igible households	No	C Yes No	ng ot	C Yes © No
1.5 If Y 1.6 who SNA 1.7a If y	Do you automatical es, explain:  How do you ensure en determining eligi AP Nominal Payme a Do you allocate Ll ou answered "Yes"	e there ibility ents IHEA	roll households without a  is no difference in the tre and benefit amounts?  P funds toward a nomina testion 1.7a, you must pro	eatn	Yes No ct annual application of categorication of categorication with the second secon	lly el	Yes No Yes No No igible households	No	C Yes No	ng ot	C Yes © No
1.5 If Y 1.6 whe SNA 1.7a If y	Do you automatical es, explain:  How do you ensure en determining eligi AP Nominal Payme Do you allocate Ll ou answered "Yes"	e there ibility ents IHEA ' to qu	roll households without a sis no difference in the treated and benefit amounts?  P funds toward a nomina testion 1.7a, you must prosistance: \$0.00	eatn	Yes No ct annual application of categorication of categorication with the second secon	lly el	Yes No Yes No No igible households	No	C Yes No	ng ot	C Yes © No
1.5 If Y 1.6 whe SNA 1.7a If y	Do you automatical es, explain:  How do you ensure en determining eligi AP Nominal Payme a Do you allocate Ll ou answered "Yes"	e there ibility ents IHEA ' to qu	roll households without a sis no difference in the treated and benefit amounts?  P funds toward a nomina testion 1.7a, you must prosistance: \$0.00	eatn	Yes No ct annual application of categorication of categorication with the second secon	lly el	Yes No Yes No No igible households	No	C Yes No	ng ot	C Yes © No
1.5 If Y 1.6 who SNA 1.7a If y	Do you automatical es, explain:  How do you ensure en determining eligi AP Nominal Payme Do you allocate Ll ou answered "Yes" O Amount of Nomin	there ibility ents THEA to qual Ass	roll households without a sis no difference in the treated and benefit amounts?  P funds toward a nomina testion 1.7a, you must prosistance: \$0.00	eatn	Yes No ct annual application of categorication of categorication with the second secon	lly el	Yes No Yes No No igible households	No	C Yes No	ng ot	C Yes © No
1.5 If Y 1.6 who SNA 1.7a If y	Do you automatical es, explain:  How do you ensure on determining eligi AP Nominal Payme a Do you allocate L1 ou answered "Yes" o Amount of Nomin Frequency of Assi	thereibility  mts  HEA  to qu  al Ass	roll households without a sis no difference in the treated and benefit amounts?  P funds toward a nomina testion 1.7a, you must prosistance: \$0.00	eatn	Yes No ct annual application of categorication of categorication with the second secon	lly el	Yes No Yes No No igible households	No	C Yes No	ng ot	C Yes © No
1.5 If Y 1.6 who SNA 1.7a If y 1.7t 1.7t	Do you automatical es, explain:  How do you ensure the determining eligit AP Nominal Payme a Do you allocate Ll ou answered "Yes" b Amount of Nomin Frequency of Assi Once Per Year  Once every five you	there ibility  IHEA  I to qual Assistance	roll households without a sis no difference in the treated and benefit amounts?  P funds toward a nomina testion 1.7a, you must prosistance: \$0.00	eatm	Yes No ct annual applica ment of categorica  yment for SNAP	houseestio	Yes No Yes No No Yes No N	No.	C Yes No	ng ot	C Yes © No
1.5 If Y 1.6 who SNA 1.7a If y 1.70 1.7c	Do you automatical es, explain:  How do you ensure en determining eligi AP Nominal Payme Do you allocate Li ou answered "Yes" Amount of Nomin Frequency of Assi Once Per Year  Once every five y  Other - Describe	thereibility  IHEA  'to qual Assistance  stance  ::	roll households without a sis no difference in the tread benefit amounts?  P funds toward a nomina sestion 1.7a, you must prosistance: \$0.00	eatm	Yes No ct annual applica ment of categorica  yment for SNAP	houseestio	Yes No Yes No No Yes No N	No.	C Yes No	ng ot	C Yes © No
1.5 If Y 1.6 who SNA 1.7a If y 1.7c  1.7c  Det	Do you automatical es, explain:  How do you ensure en determining eligi AP Nominal Payme Do you allocate Ll ou answered "Yes" OAmount of Nomin Frequency of Assi Once Per Year Once every five y Other - Describe	thereibility  IHEA  ' to qual Assistance  stance  ::	roll households without a  is no difference in the tre and benefit amounts?  P funds toward a nomina testion 1.7a, you must pro sistance: \$0.00	d pa	Yes No ct annual applica ment of categorica when the categorica when the categorica are sponse to que cominal payment	house estio	Yes No Yes No No Yes No N	No.	C Yes No	ng ot	C Yes © No
1.5 If Y 1.6 who SNA 1.7a If y 1.7c  1.7c  Det	Do you automatical es, explain:  How do you ensure en determining eligi AP Nominal Payme Do you allocate Ll ou answered "Yes" OAmount of Nomin Frequency of Assi Once Per Year Once every five y Other - Describe	thereibility  IHEA  ' to qual Assistance  stance  ::	roll households without a  is no difference in the tre and benefit amounts?  P funds toward a nomina sestion 1.7a, you must pro sistance: \$0.00	d pa	Yes No ct annual applica ment of categorica when the categorica when the categorica are sponse to que cominal payment	house estio	Yes No Yes No No Yes No N	No.	C Yes No	ng ot	C Yes © No

	Net Income
1.9. 8	Select all the applicable forms of countable income used to determine a household's income eligibility for LIHEAP
>	Wages
>	Self - Employment Income
>	Contract Income
	Payments from mortgage or Sales Contracts
>	Unemployment insurance
>	Strike Pay
>	Social Security Administration (SSA ) benefits
	☐ Including MediCare deduction
<b>&gt;</b>	Supplemental Security Income (SSI )
>	Retirement / pension benefits
>	General Assistance benefits
<b>&gt;</b>	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
<b>&gt;</b>	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.
	Jury duty compensation
>	Rental income
	Income from employment through Workforce Investment Act (WIA)
	Income from work study programs
>	Alimony
>	Child support
<b>&gt;</b>	Interest, dividends, or royalties
	Commissions

>	Legal settlements
>	Insurance payments made directly to the insured
	Insurance payments made specifically for the repayment of a bill, debt, or estimate
>	Veterans Administration (VA) benefits
	Earned income of a child under the age of 18
	Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.
	Income tax refunds
	Stipends from senior companion programs, such as VISTA
	Funds received by household for the care of a foster child
	Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
	Reimbursements (for mileage, gas, lodging, meals, etc.)
Y	Other
	Workmen's Compensation, Railroad Retirement Benefits, Mine Worker Benefits, Armed Forces Allowance Benefits, Criminal Injuries Compensation Board Payments, Severance Pay, Monetary Settlements as a Result of Insurance Claims or Lawsuits, Inheritances.
	ny of the above questions require further explanation or clarification that could not be made in fields provided, attach a document with said explanation here.

### **Section 2 - HEATING ASSISTANCE**

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

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

Expiration Date: 09/30/2020

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

<u> </u>				
	Section	on 2 - H	leating Assistance	
Eligibility, 2605(	b)(2) - Assurance 2			
2.1 Designate the	e income eligibility threshold used for the	heating co	emponent:	
Add	Household size		Eligibility Guideline	Eligibility Threshold
1	All Household Sizes		HHS Poverty Guidelines	175.00%
2.2 Do you have HEATING ASSI	additional eligibility requirements for ITANCE?	<b>⊙</b> Yes	O No	
2.3 Check the ap	propriate boxes below and describe the p	policies for	each.	
Do you require a	nn Assets test ?	C Yes	<b>⊙</b> No	
Do you have add	litional/differing eligibility policies for:			
Renters?		• Yes	C <sub>No</sub>	
Renters Li	ving in subsidized housing ?	• Yes	C <sub>No</sub>	
Renters wi	th utilities included in the rent ?	• Yes	C No	
Do you give prio	rity in eligibility to:			
Elderly?		C Yes	€ No	
Disabled?		O Yes	⊙ No	
Young children?		C Yes	⊙ No	
Households with high energy burdens?		O Yes	⊙ No	
Other?		O Yes	C <sub>No</sub>	
Explanations of	policies for each "yes" checked above:	•		
		0.	assistance benefits provided they meet all other must be verified in order to determine if and ho	

- Applicants who are renters and pay their heating costs directly must identify their energy supplier and fuel type.
- Applicants who are renters (including roomers and boarders) and pay their energy costs indirectly as undesignated portions of rent payments are
  required to furnish the name, address, and phone number of the landlord to whom the rent payments are made. If their application is qualified,
  benefits will be paid to the landlord and their rent will be reduced accordingly.
- Applicants who are residents of subsidized housing must provide proof that they are directly responsible for paying their own heating costs and
  receive a lower benefit level than those with similar incomes that do not have access to subsidized housing since a utility allowance is
  incorporated into their subsidy.

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

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

During the crisis season defined by COMAR 07.03.21.10, crisis situations are deemed "life threatening" if a household has a member that is over the age of 65, under the age of 2, or is experiencing an energy-related life threatening crisis. In these situations, vulnerable households are given priority. Further, applicants with a Physician's Certification are provided expedited processing. Under the arrearage assistance program, applicants considered vulnerable may receive a waiver to obtain forgiveness of past due electric and gas bills multiple times within a 7-year period. This is as opposed to other non-vulnerable applicants that can only obtain the benefit once every 7 years.

Beginning October 1, 2019, the new Critical Medical Needs Program is in place. This program provides for streamlined and expedited application processing for individuals with particular medical vulnerabilities.

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

<b>☑</b> Income								
Family (household) size	Family (household) size							
Mome energy cost or need:								
<b>☑</b> Fuel type								
Climate/region								
✓ Individual bill								
<b>✓</b> Dwelling type								
Energy burden (% of income spent on home energy)	Energy burden (% of income spent on home energy)							
Energy need								
Other - Describe:								
The program accounts for whether customer lives in subsidized housing and if the bill is in the name of the customer or the landlord.								
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)								
2.6 Describe estimated benefit levels for the fiscal year for which this	plan applies							
Minimum Benefit \$150 Maximum Benefit \$2,213								
2.7 Do you provide in-kind (e.g., blankets, space heaters) and/or other forms of benefits? O Yes No								
If yes, describe.								
If any of the above questions require further exthe fields provided, attach a document with said	•	t could not be made in						

# **Section 3 - COOLING ASSISTANCE**

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

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

Expiration Date: 09/30/2020

Section	on 3 - (	Cooling Assistance					
Eligibility, 2605(c)(1)(A), 2605 (b)(2) - Assurance 2							
3.1 Designate The income eligibility threshold used for th	e Cooling	component:					
Add Household size	Add Household size Eligibility Guideline Eligibility Threshold						
1 All Household Sizes		HHS Poverty Guidelines	175.00%				
3.2 Do you have additional eligibility requirements for COOLING ASSITANCE?	C Yes	€ No					
3.3 Check the appropriate boxes below and describe the	policies for	each.					
Do you require an Assets test ?	C Yes	<b>⊙</b> No					
Do you have additional/differing eligibility policies for:							
Renters?	• Yes	ONo					
Renters Living in subsidized housing ?	Yes	O <sub>No</sub>					
Renters with utilities included in the rent ?	• Yes	O No					
Do you give priority in eligibility to:							
Elderly?	C Yes	<b>⊙</b> <sub>No</sub>					
Disabled?	C Yes	⊙ <sub>No</sub>					
Young children?	C Yes	⊙ No					
Households with high energy burdens?	C Yes	⊙ <sub>No</sub>					
Other?	C Yes	⊙ No					
Explanations of policies for each "yes" checked above:	•						
Applicants who are renters are eligible to receive rental arrangements between the renter (tenant) and to applicants who are renters and pay their heating confidence of the Applicants who are renters (including roomers and required to furnish the name, address, and phone in benefits will be paid to the landlord and their rentered Applicants who are residents of subsidized housing receive a lower benefit level than those with similar incorporated into their subsidy.  3.4 Describe how you prioritize the provision of cooling a	he landlord osts directly l boarders) number of th will be redu g must prov ar incomes	must identify their energy supplier and fuel ty and pay their energy costs indirectly as undesig the landlord to whom the rent payments are mad used accordingly. The proof that they are directly responsible for that do not have access to subsidized housing si	ow benefits will be paid.  pe. mated portions of rent payments are e. If their application is qualified, paying their own heating costs and ince a utility allowance is				
Applicate of District Code of		and the description of the descr					
Applicants with a Physician's Certification are provided expedited processing. Under the arrearage assistance program, applicants considered vulnerable may receive a waiver to obtain forgiveness of past due electric and gas bills multiple times within a 7-year period. This is as opposed to other non-vulnerable applicants that can only obtain the benefit once every 7 years.  Beginning October 1, 2019, the new Critical Medical Needs Program is in place. This program provides for streamlined and expedited application processing for individuals with particular medical vulnerabilities.							
Determination of Benefits 2605(b)(5) - Assurance 5, 2605	(c)(1)(B)						
3.5 Check the variables you use to determine your benefi	t levels. (C	heck all that apply):					
Income							

Family (household) size								
✓ Home energy cost or need:								
Fuel type								
Climate/region	Climate/region							
Individual bill	✓ Individual bill							
Dwelling type								
Energy burden (% of income sp	Energy burden (% of income spent on home energy)							
Energy need								
Other - Describe:								
Benefit Levels, 2605(b)(5) - Assurance 5, 260	5(c)(1)(B)							
3.6 Describe estimated benefit levels for the f	iscal year for which this pla	n applies						
Minimum Benefit \$150 Maximum Benefit \$2,213								
3.7 Do you provide in-kind (e.g., fans, air conditioners) and/or other forms of benefits? C Yes No								
If yes, describe.								
If any of the above questions r the fields provided, attach a do	<del>-</del>		could not be made i					

# **Section 4 - CRISIS ASSISTANCE**

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

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

OMB Clearance No.: 0970-0075

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	Section 4: CRI	SIS ASSISTANCE				
Eligibility - 2604	(c), 2605(c)(1)(A)					
4.1 Designate the	e income eligibility threshold used for the crisis comp	onent				
Add	dd Household size Eligibility Guideline Eligibility Threshold					
1	All Household Sizes	HHS Poverty Guidelines	175.00%			
4.2 Provide your	LIHEAP program's definition for determining a cris	sis.				
off (less the time length of the length of t	aryland defines an energy crisis as a situation wherein a nan three days) during the normal winter period (Novem h in the defintion of the winter period.  isis funds are also used to address non-functioning heating with the Department of Housing and Community Develocies on the application that they have non-functioning extended from the local energy assistance agency, DHCD promport heating and cooling system repair, first preference is given under five (5) years of age in the household and/or in the solife threatening exists?	oer 1 through March 31). Local agencies may and cooling equipment. OHEP maintains at opment (DHCD) to carry out this work. Energuipment. Upon receiving an energy crisis refetly assigns the work to a licensed HVAC contivent to elderly and handicapped homeowners.	n inter-agency agreement gy assistance applicants inform erral regarding non-functioning tractor for assessment within 48			
4.3 What constitu	utes a <u>life-threatening crisis?</u>					
	aryland defines a life-threatening crisis as a household ex sue or has a energy crisis and has a member of the house					
Crisis Requirem	ent, 2604(c)					
4.4 Within how r	many hours do you provide an intervention that will i	resolve the energy crisis for eligible househo	olds? 48Hours			
4.5 Within how r situations? 18He	many hours do you provide an intervention that will nours	resolve the energy crisis for eligible househo	olds in life-threatening			
Crisis Eligibility	, 2605(c)(1)(A)					
4.6 Do you have ASSISTANCE?	additional eligibility requirements for CRISIS	€ Yes C No				
4.7 Check the ap	propriate boxes below and describe the policies for e	ach				
Do you require a	Do you require an Assets test ?					
Do you give prio	rity in eligibility to :					
Elderly?		⊙ Yes O No				
Disabled?		C Yes O No				
Young Chi	ildren?	⊙ Yes C No				
Household	s with high energy burdens?	C Yes O No				
experiencing a life or cooling issue.	household that is experiencing or in danger of e-threatening or health-related emergency due to a heatin	G Yes ○ No				
In Order to recei	ive crisis assistance:		· · · · · · · · · · · · · · · · · · ·			

N.			
Must the household have empty tank?	received a shut-off notice or have a near	€ Yes C No	
Must the household have been shut off or have an empty tank?		C Yes © No	
Must the household have	exhausted their regular heating benefit?	C Yes © No	
Must renters with heating received an eviction notice?	costs included in their rent have	C <sub>Yes</sub> € <sub>No</sub>	
Must heating/cooling be m	nedically necessary?	C Yes ⊙ No	
Must the household have requipment?	non-working heating or cooling	○ Yes	
Other?		C Yes ⊙ No	
Do you have additional / differin	ng eligibility policies for:		
Renters?		C Yes O No	
Renters living in subsidize	ed housing?	C Yes O No	
Renters with utilities inclu	ided in the rent?	C <sub>Yes</sub> ⊙ <sub>No</sub>	
Explanations of policies for each	ı "yes" checked above:		
<ul> <li>a household is experiencing or in danger of experiencing a life-threatening or health-related emergency due to a heating or cooling issue; or</li> <li>a member of the household is over the age of 65; or</li> <li>a member of the household is under the age of 2.</li> <li>The elderly, households with young children, and those facing an energy emergency that threatens their health or their life, have their crisis situation treated in an expedited way since it is determined to be "life threatening".</li> <li>For renters, DHCD must obtain permission from the property owner before providing furnace repair and replacement crisis assistance to a customer and the landlord must comply with DHCD Weatherization policies on rental housing.</li> </ul>			
Determination of Benefits  4.8 How do you handle crisis site	uations?		
	Separate component		
	Fast Track		
	Other - Describe:		
	onent, how do you determine crisis assist	ance benefits?	
I F	Amount to resolve the crisis.		
Other - Describe:  Maryland provides the same benefit levels for customers with a crisis situation. However, services are expedited in order to ensure timely resolution of the crisis situation.			
Crisis Requirements, 2604(c)			
4.10 Do you accept applications for energy crisis assistance at sites that are geographically accessible to all households in the area to be served?			
<b>⊙</b> Yes <b>○</b> No <b>Explain.</b>			
OHEP operates a network of 20 Local Administering Agencies with locations in each county to ensure that all households have access to a site that is not too far away from their home. All of the Local Administering Agencies are also required to provide reasonable accommodations to customers with mobility issues that have difficulty accessing a local office.			
4.11 Do you provide individuals who are physically disabled the means to:			
Submit applications for crisis benefits without leaving their homes?			
	in.		
Travel to the sites at which ap	oplications for crisis assistance are accept	ted?	

€ Yes € No If No, explain.				
If you answered "No" to both options in question 4 disabled?	4.11, please o	explain alter	native means of intake to those who ar	e homebound or physically
Benefit Levels, 2605(c)(1)(B)		90	-	
4.12 Indicate the maximum benefit for each type of	f crisis assist	tance offere	d.	
Winter Crisis \$0.00 maximum benefit				
Summer Crisis \$0.00 maximum benefit				
Year-round Crisis \$2,213.00 maximum bendance		37 48	- 0. 0. 0	
4.13 Do you provide in-kind (e.g. blankets, space h	eaters, tans)	and/or othe	er forms of benefits?	
C Yes No If yes, Describe				
4.14 Do you provide for equipment repair or repla	cement usin	g crisis fund	ls?	
€ Yes O No				
If you answered "Yes" to question 4.14, you must o	complete qu	estion 4.15.		
4.15 Check appropriate boxes below to indicate type	pe(s) of assis	stance provi	ded.	
	Winter Crisis	Summer Crisis	Year-round Crisis	
Heating system repair	<b>&gt;</b>			
Heating system replacement	<b>&gt;</b>			
Cooling system repair			<b>&gt;</b>	
Cooling system replacement			<b>V</b>	
Wood stove purchase				
Pellet stove purchase				
Solar panel(s)				
Utility poles / gas line hook-ups				
Other (Specify):  Note: Heating and cooling system repair/ replacement is provided by the Maryland Department of Housing & Community Development (DHCD) with LIHEAP funds provided through Inter-Agency Agreement. Heating systems from October 1 take priority. If funds remain and there are no outstanding heating system requests as of June 1, DHCD may expend funds for cooling system repairs or replacements.				
4.16 Do any of the utility vendors you work with en	nforce a moi	ratorium on	shut offs?	
C Yes No				
If you responded "Yes" to question 4.16, you must respond to question 4.17.				
4.17 Describe the terms of the moratorium and any special dispensation received by LIHEAP clients during or after the moratorium period.				
If any of the above questions requi the fields provided, attach a docun		-		could not be made in

# **Section 5 - WEATHERIZATION ASSISTANCE**

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

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Sec	ction 5: WEATHF	ERIZATION ASSISTANC	CE
Eligibility, 2605(c)(1)(A), 2605(b)(2) -	Assurance 2		
5.1 Designate the income eligibility thi	eshold used for the Weather	rization component	
Add Ho	usehold Size	Eligibility Guideline	Eligibility Threshold
1			0.00%
<b>5.2 Do you enter into an interagency a</b> No	greement to have another go	overnment agency administer a WEATHE	CRIZATION component? C Yes •
5.3 If yes, name the agency.			
5.4 Is there a separate monitoring pro	ocol for weatherization?	Yes No	
WEATHERIZATION - Types of Rule	s		
5.5 Under what rules do you administe	er LIHEAP weatherization?	(Check only one.)	
Entirely under LIHEAP (not DO	DE) rules		
Entirely under DOE WAP (not )	LIHEAP) rules		
	<u> </u>	rule(s) where LIHEAP and WAP rules dif	fer (Check all that apply):
Income Threshold			
Weatherization of entire n		re is permitted if at least 66% of units (50	% in 2- & 4-unit buildings) are
	•	v income persons (excluding nursing home	es, prisons, and similar institutional
care facilities).	31 a 3 a		,
Other - Describe:			
Mostly under DOE WAP rules,	with the following LIHEAP	rule(s) where LIHEAP and WAP rules di	ffer (Check all that apply.)
Income Threshold			
Weatherization not subjec	t to DOE WAP maximum st	atewide average cost per dwelling unit.	
Weatherization measures	are not subject to DOE Savii	ngs to Investment Ration (SIR ) standards	s.
Other - Describe:			
Eligibility, 2605(b)(5) - Assurance 5			
5.6 Do you require an assets test?	C Yes O No		
5.7 Do you have additional/differing el	igibility policies for :		
Renters	C Yes O No		
Renters living in subsidized housing?	C Yes O No		
5.8 Do you give priority in eligibility to	):		
Elderly?	O Yes 💿 No		
Disabled? C Yes No			

Young Children?	C Yes No		
House holds with high energy burdens?	C Yes <b>⊙</b> No		
Other?	C Yes C No		
If you selected "Yes" for any of the optibelow.	ons in questions 5.6, 5.7, or 5.8,	you must provide further explanation of these policies in the text field	
Benefit Levels			
5.9 Do you have a maximum LIHEAP w	eatherization benefit/expenditu	re per household? O Yes • No	
<b>5.10</b> If yes, what is the maximum? \$0			
Types of Assistance, 2605(c)(1), (B) & (I	<b>)</b> )		
5.11 What LIHEAP weatherization mea	sures do you provide ? (Check a	all categories that apply.)	
Weatherization needs assessment	ts/audits	Energy related roof repair	
Caulking and insulation		Major appliance Repairs	
Storm windows		Major appliance replacement	
Furnace/heating system modifications/ repairs		Windows/sliding glass doors	
Furnace replacement		Doors	
Cooling system modifications/ repairs		Water Heater	
Water conservation measures		Cooling system replacement	
Compact florescent light bulbs		Other - Describe:	
If any of the above question the fields provided, attach a	-	lanation or clarification that could not be made in explanation here.	

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

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

6.1 Select all outreach activities that you conduct that are designed to assure that eligible households are made aware of all LIHEAP assistance available:
Place posters/flyers in local and county social service offices, offices of aging, Social Security offices, VA, etc.
Publish articles in local newspapers or broadcast media announcements.
Include inserts in energy vendor billings to inform individuals of the availability of all types of LIHEAP assistance.
Mass mailing(s) to prior-year LIHEAP recipients.
Inform low income applicants of the availability of all types of LIHEAP assistance at application intake for other low-income programs.
Execute interagency agreements with other low-income program offices to perform outreach to target groups.

# Other (specify):

OHEP has a robust annual outreach planning process through which local agencies identify specific goals and craft localized strategies suitable to their particular jurisdiction. Local Administering Agencies (local Departments of Social Services, local jurisdictions, and contracted Community Action Agencies) submit the annual plan, which includes a supplemental request for additional outreach funding from State Special Funds. These plans include all events, targeted outreach efforts, advertising, and partnerships planned for the year. OHEP then approves a final plan and Local Administering Agencies submit a monthly Outreach Log detailing the activities performed in the month and the results of each activity. Outreach activities are further monitored during the formal program monitoring process.

On July 1, 2019, Maryland launched an important outreach effort and streamlined process for the medically vulnerable. Through the Critical Medical Needs Program (CMNP) "Navigators" are trained to work within hospitals and health care communities to assist clients with energy assistance applications. Navigators provide risk assessments, counseling, and assistance with energy suppliers. Applications are submitted directly to OHEP for expeditious processing to ensue maintenance or restoration of service.

The program also partners with Benefits Data Trust to conduct targeted outreach to older adults receiving Medicaid that have not applied for energy assistance. Through a cental call center, Benefits Data Trust provides remote application assistance and document collection and coordinate direct submission of applications to local LIHEAP offices.

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

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

Customers can apply online through https://mydhrbenefits.dhr.state.md.us for LIHEAP, TANF, SNAP, and other benefit programs offered by the Department of Human Services. Customers wishing to be referred to weatherization based on eligibility for LIHEAP assistance are referred upon eligibility certification for LIHEAP. Lists of customers determined eligible for energy assistance programs are provided directly to the Maryland Department of Housing and Community Development for enrollment in weatherization and other energy efficiency programs.

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

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

the Commonwealth of Tuesto Rico)		
3.1 How would you categorize the primary responsibility of your State agency?		
Administration Agency		
Commerce Agency		
Community Services Agency		
Energy / Environment Agency		
Housing Agency		
Welfare Agency		
Other - Describe:		
Alternate Outreach and Intake, 2605(b)(15) - Assurance 15  If you selected "Welfare Agency" in question 8.1, you must complete questions 8.2, 8.3, and 8.4, as applicable.		
Local Administering Agencies are required to conduct home visits for intake when requested by customers. All outreach activities are included in the annual outreach plan submitted by each Local Administering Agency and approved by OHEP. These plans include many targeted outreach events and strategic partnerships for outreach to target populations. OHEP partners with local vendors and utilities in outreach activities. Targeted messaging is conducted in the heating season to promote LIHEAP as a way to prepare for the winter. Satellite intake is conducted by several program partners, such as Area Agencies on Aging, to help increase access to LIHEAP. Customers can access information and obtain applications for heating assistance alternatively by contacting the DHS Call Center.		
5.5 How do you provide afternate outreach and mitake for COOLING ASSISTANCE:		

Local Administering Agencies are required to conduct home visits for intake when requested by customers. All outreach activities are included in the annual outreach plan submitted by each Local Administering Agency and approved by OHEP. These plans include many targeted outreach events and strategic partnerships for outreach to target populations. OHEP partners with local vendors and utilities in outreach activities. Targeted messaging is conducted in the heating season to promote LIHEAP as a way to prepare for the winter. Satellite intake is conducted by several program partners, such as Area Agencies on Aging, to help increase access to LIHEAP. Customers can access information and obtain applications for heating assistance alternatively by contacting the DHS Call Center.

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

General Crisis outreach mirrors that of heating and cooling outreach. The Office of Home Energy Programs and Local Administering Agencies also receive lists of households that are in imminent danger of termination. Direct outreach to these households is a key part of Crisis outreach in Maryland. OHEP also works closely with the Office of People's Counsel and the Public Service Commission to coordinate on crisis cases that have been identified by those entities. All emergency repair cases are referred by OHEP directly to the Department of Housing and Community Development.

8.5 LIHEAP Component Administration.	Heating	Cooling	Crisis	Weatherization	
8.5a Who determines client eligibility?	Local City	Local City	Local City	State Housing Agency	
ola wax accommes enem engionicy	Government Local County Government Community Action Agencies State Community	Government Local County Government Community Action Agencies	Government Local County Government Community Action Agencies State Welfare Agency	Same Tousing Figure	
	Services Agency State Welfare Agency				
8.5b Who processes benefit payments to gas and electric vendors?	State Administration Agency	State Administration Agency	State Administration Agency		
8.5c who processes benefit payments to bulk fuel vendors?	Local City Government Local County Government Community Action Agencies	Local City Government Local County Government Community Action Agencies	Local City Government Local County Government Community Action Agencies State Welfare Agency		
8.5d Who performs installation of weatherization measures?				State Housing Agency	
8.6 What is your process for selecting local administering agencies?  The Department of Human Services conducts an RFP process in the jurisdictions not served by a local Department of Social Services or local government entity. Interagency agreements are executed with participating local governments (Baltimore City and Frederick). The remaining administering agencies are local Departments of Social Services, which are local welfare offices that are part of the Department of Human Services.					
8.7 How many local administering agencies do you use? 20  8.8 Have you changed any local administering agencies in the last year?  O Yes					
8.9 If so, why?					
Agency was in noncompliance with grantee requirements for LIHEAP -					
Agency is under criminal investigation					
Added agency					
Agency closed					
Other - describe					

N/A

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# LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) **MODEL PLAN**

# SF - 424 - MANDATORY Section 9: Energy Suppliers, 2605(b)(7) - Assurance 7 9.1 Do you make payments directly to home energy suppliers? Yes ○ No Heating Cooling Tes O No Crisis Are there exceptions? • Yes • No If yes, Describe. The vast majority of payments are made directly to home energy suppliers and Energy Supplier Agreements are established to facilitate such payments. Occasional payments are made directly to customers in special circumstances when a landlord or supplier will not accept the benefit payment. If a landlord refuses to sign a Landlord Agreement or an energy supplier refuses to sign an Energy Supplier Agreement, and there is no alternative energy supplier, then a payment may be made directly to a customer. Direct payment may also be used for purchase of certain fuel types, such as wood or coal, when no Energy Supplier Agreement is in place with a vendor in the applicant's immediate area. 9.2 How do you notify the client of the amount of assistance paid? Maryland sends a benefit letter to the customer's mailing address. 9.3 How do you assure that the home energy supplier will charge the eligible household, in the normal billing process, the difference between the actual cost of the home energy and the amount of the payment? Maryland requires that all vendors submit an Energy Delivery Record for reconciliation of all transactions at the end of each year. 9.4 How do you assure that no household receiving assistance under this title will be treated adversely because of their receipt of LIHEAP assistance? Non-discrimination language is included in the Energy Supplier Agreements executed with suppliers. 9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households? O Yes O No If so, describe the measures unregulated vendors may take. Maryland requires that unregulated vendors provide a 3% discount off their cash price for the fuel delivered to program participants as part of their LIHEAP benefit.

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

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

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

Maryland uses the State financial accounting system to manage LIHEAP funds. Separate budget costs are used to account for expenditures charged to LIHEAP, and separate sub-codes distinguish between various eligible uses of LIHEAP funds (e.g. administration, crisis, client benefits, etc.).

### Audit Process

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

⊙ Yes O No

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

No Findings

Finding	Type	Brief Summary	Resolved?	Action Taken
1	other	The Maryland Office of Legislative Audits review of November 25, 2013 April 30, 2017 found that periodic review and adequate restrictions of user access to its Office of Home Energy Programs computer system were not conducted, resulting in several hundred employees with unnecessary access to recipients personally identifiable information. This issue was primarily the result of Call Center employees having inquiry access to the OHEP Data Management System that was never used or not used for some time. OHEP addressed this finding through a combination of enhanced, automated system security measures, and improved system use entitlement and access protocols and monitoring. As of July 1, 2019, the OHEP Data System automatically disables inactive accounts after 60 days of inactivity and permanently removes inactive accounts after 90 days. OHEP reviews and documents the user access policy on an annual basis to ensure that levels of access are appropriate for specific job duties. This entitlement review is comprehensive in looking at each role, user group, and user assignments to ensure access is related to specific job duties. The OHEP System User List in the	Yes	procedure/policy changes

	OHEP Data Management System is reviewed monthly to ensure that all deactivations and deletions were completed appropriately.					
10.4. Audits	of Local Administering Agencies					
	What types of annual audit requirements do you have in place for local administering agencies/district offices? Select all that apply.					
✓ L	cal agencies/district offices are required to have an annual	audit in compliance with Single Audit	Act and OMB Circular A-133			
L	cal agencies/district offices are required to have an annual	audit (other than A-133)				
✓ L	cal agencies/district offices' A-133 or other independent au	lits are reviewed by Grantee as part o	f compliance process.			
<b>✓</b> G	rantee conducts fiscal and program monitoring of local ager	cies/district offices				
Compliance	Monitoring					
10.5. Descri	be the Grantee's strategies for monitoring compliance with	the Grantee's and Federal LIHEAP po	olicies and procedures: Select all			
Grantee em	ployees:					
✓ In	ternal program review					
✓ D	<b>☑</b> Departmental oversight					
✓ Se	Secondary review of invoices and payments					
o	Other program review mechanisms are in place. Describe:					
Local Adm	nistering Agencies / District Offices:					
<b>✓</b> 0	a - site evaluation					
✓ A	Annual program review					
✓ M	Monitoring through central database					
<b>✓</b> D	sk reviews					
<b>✓</b> C	ient File Testing / Sampling					
0	her program review mechanisms are in place. Describe:					

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

Monitoring is conducted on an ongoing basis throughout the year and annually. Monitoring is conducted both remotely and onsite.

Ongoing monitoring ensures consistent compliance with all program and fiscal elements and includes a limited selection of files for review.

Comprehensive monitoring examines program and administrative performance in greater depth and includes a larger selection of files and other documents for review.

The purpose of monitoring is to ensure compliance with all program policies, procedures, and standards, as well as any fiscal and administrative requirements. Elements of both program and fiscal monitoring will be conducted each month for every agency. The objective of OHEP fiscal monitoring is to determine if a Local Administering Agency (LAA), as a recipient of federal LIHEAP block grant funds and State Special Funds, has obligated and expended the grant funds in accordance with any contractual obligations and applicable federal statutes and regulations. Administrative cost allocations, record keeping, personnel time policies, corrective action for any prior audit findings.

Every LAA will receive an annual monitoring report. Interim corrective action may be required as the result of monthly monitoring.

If selected for onsite monitoring, the LAA will receive notice from State OHEP at least two weeks prior to the monitoring visit, notifying the LAA of the date and duration of the visit as well as expectations for the monitoring process. The local OHEP Director must be present throughout the monitoring visit. The LAA must provide private and secure space on-site for State OHEP staff to conduct the monitoring visit and assist in retrieval of case files and other program materials as needed.

### **Ongoing Monitoring**

Each month OHEP monitors each agency for certain program and fiscal elements.

Monthly Monitoring for All LAAs: All LAAs are monitored each month on the following compliance elements.

- 1. Outreach: LAAs are assessed on whether they have submitted the annual Outreach Proposal Plan and monthly Outreach Logs timely and completely.
- 2. myDHR: LAAs are assessed on whether online applications through myDHR are processed in a timely and efficient manner.
- 3. Customer Relationship Management (CRM) Tool: LAAs are assessed on whether work orders through the CRM tool are resolved in a timely manner. However, it will not be a part of the monitoring findings.
- Application Timeliness: LAAs are assessed on the average time it takes to certify applications, as well as the percentage of applications certified beyond 45 days.
- 5. Application Denial Rates: State OHEP evaluates trends in denial rates among LAAs.
- 6. Financial Reports and Invoices: LAAs are assessed on the submission of accurate MEAP Monthly Financial Status Report, OHEP Administrative Funds-Monthly Financial Status Report, Administrative Invoices, Supplemental Outreach Invoices, and any other reports or documentation required that month (ex. Bulk Fuel Processing Plan, Energy Crisis Plan etc.)

Monthly Monitoring for Select LAAs: LAAs are selected monthly on a rotating basis to be monitored on the following compliance elements.

- Case File Monitoring: State OHEP will pull a random sample of case file records from ECMS/ECM. If the files selected are not scanned and available for review, State OHEP will request the full file be sent electronically for review. Case files will be monitored for the following areas:
- · Application completeness and accuracy -
  - · Applications should be filled out completely and accurately
- Documentation -
  - · Documentation to support the application must be in accordance with OHEP policies and procedures
- System Verifications -
  - The OHEP Data Management System must match the application and documentation in the case file
- Denied Case Review
  - · Denied cases should be denied in a timely manner and the reason for denial must be justified
- 1. Customer Service: LAAs will be assessed on whether service is provided to customers in a manner that is accessible, courteous and secure.
- Language Access: LAAs will be assessed on whether non-English speaking customers are able to effectively access services and receive information about the agency's programs.
- 3. Financial Supporting Documents: State OHEP may request LAAs provide supporting documentation for expenses documented on the OHEP Administrative Funds-Monthly Financial Status Report, the MEAP Monthly Financial Status Report, or other reports.

### Program Areas Monitored in Annual Monitoring

Review of Monthly Monitoring Outcomes:

- 1. Case File Monitoring: State OHEP will pull a random sample records. Case files will be monitored for the following areas:
- Application completeness and accuracy
- Applications should be filled out completely and accurately
- Documentation -
  - Documentation to support the application must be in accordance with OHEP policies and procedures
- System Verifications -
  - The OHEP Data Management System must match the application and documentation in the case file
- Denied Case Review -
  - Denied cases should be denied in a timely manner and the reason for denial must be justified
- Fraud Prevention & Enforcement; LAAs will be assessed on whether the Duplicate Applications Report and the Social Security Number Validation Report are completed properly and on time. LAAs will also be assessed on their adherence to the Fraud, Repayment, and Administrative Hearing Procedures Manual.
- Computer Information and Security: LAAs will be assessed on their compliance with the File Retention Policy, as well as the ability to keep customer files and computer information systems secure.
- 3. <u>File Retention Policy</u>: Applicant records are to be kept on file for three complete program years. A random sample files per program year will be requested in order to verify that the LAA is in compliance with the File Retention Policy. The LAA will be given the list of applicant names the day before the monitoring review in order to give time for the files to be pulled.
- Application Documentation Scanning (ECMS): LAAs will be evaluated on their ability to completely and accurately scan applications and documentation for OHEP into ECMS.
- All Components of Ongoing Monitoring: LAAs will be evaluated on their continued compliance and performance for all elements of ongoing monitoring noted above.
- 6. <u>Annual Fiscal Monitoring:</u> State OHEP staff will request documentation from the LAA to support grant expenditures, including a general ledger and payroll journal. After reviewing the submitted documents, specific expenditures will be selected for further review and request additional supporting documentation, such as copies of invoices, receipts, and time and effort records. If necessary, OHEP staff will inquire about specific aspects of a transaction, such as the source documentation and the business purpose of the transaction.

### **Determination of Areas of Concern and Findings**

LAAs are evaluated through a Case File Monitoring Tool, focused on review of individual case files, and a Monitoring Summary Report, focused on overall program management. Based off the results of the monitoring, LAAs may be found deficient in specific program areas. These deficiencies will be documented as either an "Area of Concern" or a "Finding." Areas of Concern indicate that the LAA must make improvement in the program area, but the issue does not constitute a material weakness. A Finding indicates that a material weakness has been identified and a corrective action plan must be executed to correct the problem. State OHEP has established a rubric establishing criteria for what issues constitute an Area of Concern versus a Finding.

### Exit Interview and Follow-Up

An Exit Interview will follow the completion of the monitoring visit. During the Exit Interview, the Quality Assurance Analyst will review preliminary observations from the monitoring visit with the local OHEP Director. A final report will be issued to the LAA within 45 days from the date of the monitoring visit. LAAs may choose to submit a formal response to the monitoring report within 45 days after it was issued.

LAAs that are issued Findings within the monitoring report will be required to submit a detailed Corrective Action Plan to the Quality Assurance Analyst within 45 days after the final monitoring report was issued. The Corrective Action Plan should outline the specific steps the LAA has taken to rectify any Findings from the monitoring process. The Quality Assurance Analyst, at his/her discretion, may mandate that the LAA submit periodic reporting, beyond the Corrective Action Plan, on progress to resolve Findings.

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

### Site Visits:

State OHEP annually monitors all LAAs under contract on a comprehensive basis.

Non-contractual LAAs (Local Departments of Social Services) are selected using a risk-based assessment. The risk-based assessment for non-contractual LAAs is based on the results of ongoing monitoring. Each LAA is assessed and given a score based on a set of risk factors. The agencies with the lowest score are found to be at the highest risk and will be monitored. However, monitoring is mandatory for any agency that has not been monitored by State OHEP within the last three years, regardless of its risk assessment score.

### Desk Reviews:

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

The State monitors all Local Administering Agencies under contract each year. Non-contractual Local Administering Agencies receive a comprehensive monitoring based on a risk determination. Every agency is monitored a minimum of once every three years.

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? 1

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

<u> </u>				
Section 11: Timely and Meanin	gful Public Participation,	2605(b)(12), 2605(C)(2)		
11.1 How did you obtain input from the public in the deve Select all that apply.	lopment of your LIHEAP plan?			
Tribal Council meeting(s)				
Public Hearing(s)				
Draft Plan posted to website and available for co	mment			
Hard copy of plan is available for public view an	d comment			
Comments from applicants are recorded				
Request for comments on draft Plan is advertise	d			
Stakeholder consultation meeting(s)				
Comments are solicited during outreach activities	es			
Other - Describe:				
Notice for comments is issued to stakeholders, including local agencies, bulk fuel vendors, utilities and advocates.  11.2 What changes did you make to your LIHEAP plan as a result of this participation?  No changes were made as a result of participation in advance of the 2021 plan.				
Public Hearings, 2605(a)(2) - For States and the Common	wealth of Puerto Rico Only			
11.3 List the date and location(s) that you held public hearing(s) on the proposed use and distribution of your LIHEAP funds?				
	Date	Event Description		
1	05/15/2020	Public Hearing- Held virtually due to public health restrictions		
2	06/25/2020	Public Hearing- Held virtually due to public health restrictions		
11.4. How many parties commented on your plan at the h	earing(s)? 6			
11.5 Summarize the comments you received at the hearing(s).				

All comments focused on the additional LIHEAP funding made available through the CARES Act. These funds will be used to address the expected increase in demand for energy assistance over the next twelve months.

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

No changes were made as a result of participation in public hearings.

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

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

- 12.1 How many fair hearings did the grantee have in the prior Federal fiscal year? 46
- 12.2 How many of those fair hearings resulted in the initial decision being reversed? 2
- 12.3 Describe any policy and/or procedural changes made in the last Federal fiscal year as a result of fair hearings?

OHEP maintains a comprehensive Fraud, Repayment and Fair Hearing Rights Manual, that outlines the procedures for how local agencies handle all aspects of appeals and fair hearing processes. No changes have been made as a result of fair hearing outcomes.

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

Households that are denied may reapply after 30-days should the circumstances of their denial change. Should the applicant disagree with the reason for denial, they may choose to resolve the issue informally with the local office or submit a request within 30 days for a formal hearing through the Office of Administrative Hearings where an administrative law judge will hear the case and issue a ruling.

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

All benefit notices sent out also include instructions for requesting a Fair Hearing including details for how customers can appeal a program decision should they wish to do so.

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

If an applicant does not submit the required documentation within the stated time frame they are sent a letter which informs them of the case status and the outstanding documents needed. The application is placed in "pending" status and the client has 15 days to produce the documentation. If the documentation is not submitted within this time frame, the application is denied. The applicant will receive a denial notice that includes a Request for Fair Hearing form. The client may choose to informally resolve the missing documents with their local agency, reapply after 30-days, or request a formal hearing to review the matter in front of the Office of Administrative Hearings.

If an applicant does not submit the required documentation within the stated time frame they are sent a letter which informs them of the case status and the outstanding documents needed. The application is placed in "pending" status and the client has 15 days to produce the documentation. If the documentation is not submitted within this time frame, the application is denied. The applicant will receive a denial notice that includes a Request for Fair Hearing form. The client may choose to informally resolve the missing documents with their local agency, reapply after 30-days, or request a formal hearing to review the matter in front of the Office of Administrative Hearings.

If the applicant has processed the necessary documents but the agency has not processed the case in a timely manner and has been unresponsive to the applicant, a Request for Fair Hearing can be filed so that the case can be reviewed for an administrative law judge in the Office of Administrative Hearings.

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

Applicants are informed of these rights on client letters such as the "Request for Additional Information" and the "Denial Letter." Clients are also provided appeal rights information on the application and in posters made publicly available at local administering agencies.

If any of the above questions require further explanation or clarification that could not be made in

the fields provided, attach a document with said explanation here.						

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

# Section 13: Reduction of home energy needs, 2605(b)(16) - Assurance 16 13.1 Describe how you use LIHEAP funds to provide services that encourage and enable households to reduce their home energy needs and thereby the need for energy assistance? N/A 13.2 How do you ensure that you don't use more than 5% of your LIHEAP funds for these activities? N/A 13.3 Describe the impact of such activities on the number of households served in the previous Federal fiscal year. N/A 13.4 Describe the level ofdirect benefitsprovided to those households in the previous Federal fiscal year. N/A 13.5 How many households applied for these services? 0

# Section 14 - Leveraging Incentive Program ,2607A

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

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

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

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

C Yes O No

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

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

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

# **Section 15 - Training**

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

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Section 15: Training					
15.1 Describe the training you provide for each of the following groups:					
a. Grantee Staff:					
Formal training on grantee policies and procedures					
How often?					
Annually					
Biannually					
As needed					
Other - Describe:					
Employees are provided with policy manual					
Other-Describe:  Work group calls are held between the state office, local agencies, vendors and other stakeholders to review policy, technology and communications/outreach program updates on a regular basis. Action Transmittals are issued as needed, providing pertinent updates on policy directives.					
b. Local Agencies:					
Formal training conference					
How often?					
Annually					
Biannually					
As needed					
Other - Describe:					
✓ On-site training					
How often?					
Annually					
Biannually					
As needed					
Other - Describe:					
Employees are provided with policy manual					
Other - Describe  Work group calls are held between the state office, local agencies, vendors and other stakeholders to review policy, technology and communications/outreach program updates on a regular basis. Action Transmittals are issued as needed, providing pertinent updates on policy directives.					
c. Vendors					
Formal training conference					
How often?					
Annually					
Riannually					

As needed
Other - Describe:
Policies communicated through vendor agreements
Policies are outlined in a vendor manual
Other - Describe:  The State office attends quarterly and annual vendor meetings to provide pertinent program updates and information. Work group calls are held between the state office, local agencies, vendors and other stakeholders to review policy, technology and communications/outreach program updates on a regular basis. Action Transmittals are issued as needed, providing pertinent updates on policy directives.
15.2 Does your training program address fraud reporting and prevention?  • Yes • No

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

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

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

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

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

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

Maryland continues to refine its process for collecting performance measures. In 2019, OHEP worked with utilities to ensure that twelve-months usage is properly included in the data set. As a result of this review, the 2019 data set was limited to 49,368 households but the data set properly excluded all household records with less than twelve-months usage.

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Expiration Date: 09/30/2020

Section 17: Program Integrity, 2605(b)(10)								
17.1 Fraud Reporting Mechanisms								
a. Describe all mechanisms availab	ble to the public for reporting cases of	f suspected waste, fraud, and abuse. S	elect all that apply.					
Online Fraud Reportin	Online Fraud Reporting							
✓ Dedicated Fraud Repo	Dedicated Fraud Reporting Hotline							
Report directly to local	agency/district office or Grantee offi	ice						
Report to State Inspect	tor General or Attorney General							
Forms and procedures	in place for local agencies/district off	ices and vendors to report fraud, was	te, and abuse					
Other - Describe:	Other - Describe:							
b. Describe strategies in place for a	advertising the above-referenced reso	ources. Select all that apply						
Printed outreach mater	rials							
Addressed on LIHEAP	application							
Website								
Other - Describe:								
Maryland Office of H	Iome Energy Programs provides signs a	t the Local Administering Agency sites.						
17.2. Identification Documentation	n Requirements							
a. Indicate which of the following t	forms of identification are required o	r requested to be collected from LIHI	EAP applicants or their household					
members.	-	-						
	Collected from Whom?							
Type of Identification Collected	Concert from Whom.							
	Applicant Only	All Adults in Household	All Household Members					
Social Security Card is	Required	Required	Required					
photocopied and retained	<u> </u>							
	Requested	Requested	Requested					
	Required	Required	Required					
Social Security Number (Without		Kequired	Kequired					
actual Card)								
	Requested	Requested	Requested					
Government-issued identification	Required	Required	Required					
	<b>     </b>							

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card (i.e.: driver's license, state ID,		Requested		Dogwooted			Requested		
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 a	above	e policies.						
	Subject to guidance issued under LIHEAP Information Memorandum "HHS Guidance on the Use of Social Security Numbers and								
	Citizenship Status Verification," Maryland has adopted policies that reflect the federally-allowable definition of an eligible and ineligible household member. Accordingly, Maryland collects income for both eligible and ineligible household membes when considering eligibility, but								
	does not exclude an eligible household member from receiving a benefit due to an ineligible individual living in the unit.								
17.	3 Identification Verification								
Des	scribe what methods are used t	to vei	rify the authenticity	y of identification	documents pro	vided by clients or	hou	sehold members.	Select all that
	apply								
<u> </u>	Verify SSNs with Social Security Administration								
N	Match SSNs with death re	cord	s from Social Secur	ity Administrati	on or state agen	ey			
×	Match SSNs with state elig	gibili	ty/case managemen	t system (e.g., SN	NAP, TANF)				
	Match with state Departm	ent o	of Labor system						
N	Match with state and/or fe	dera	l corrections system	n					
	Match with state child sup	port	system						
	Verification using private	softv	vare (e.g., The Wor	k Number)					
	In-person certification by	staff	(for tribal grantees	only)					
	Match SSN/Tribal ID num	ıber	with tribal databas	e or enrollment 1	records (for trib	al grantees only)			
V	Other - Describe:								
	Tax and Assessments	s, Lex	is Nexis, MVA Sys	tem, Vitals Record	ds				
17.4	4. Citizenship/Legal Residency	Ver	ification						
_	nat are your procedures for en			embers are U.S.	citizens or alien	s who are qualifie	d to 1	receive LIHEAP	benefits? Select
all t	hat apply.								
닎	Clients sign an attestation	n of c	citizenship or legal	residency					
		cial S	Security cards is ac	cepted as proof o	f legal residency	7			
	Noncitizens must provide	doc	umentation of imm	igration status					
L	Citizens must provide a c	copy	of their birth certif	icate, naturalizat	ion papers, or p	assport			
	Noncitizens are verified t	hrou	gh the SAVE system	m					
	Tribal members are verif	fied t	hrough Tribal enro	ollment records/1	Tribal ID card				
	Other - Describe:								
17.	5. Income Verification								
Wh	at methods does your agency	utiliz	e to verify househo	ld income? Selec	t all that apply.				
	Require documentation of	inco	me for all adult ho	usehold member	S				
	✓ Pay stubs								
	Social Security award letters								
	Bank statements								
	Tax statements								
	Zero-income staten	nents	1						
	<b>✓</b> Unemployment Insurance letters								

Other - Describe:
Computer data matches:
Income information matched against state computer system (e.g., SNAP, TANF)
Proof of unemployment benefits verified with state Department of Labor
Social Security income verified with SSA
Utilize state directory of new hires
Other - Describe:
Verification using private software (The Work Number).
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
17.7. Verifying the Authenticity  What policies are in place for verifying vendor authenticity? Select all that apply.
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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:
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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  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.
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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  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 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  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  Payment history
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     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

Separation of duties between intake and payment approval	
Payments coordinated among other energy assistance programs to avoid duplication of payments	
Payments to utilities and invoices from utilities are reviewed for accuracy	
Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities	
Direct payment to households are made in limited cases only	
Procedures are in place to require prompt refunds from utilities in cases of account closure	
Vendor agreements specify requirements selected above, and provide enforcement mechanism	
Other - Describe:	
17.9. Benefits Policy - Bulk Fuel Vendors	
What procedures are in place for averting fraud and improper payments when dealing with bulk fuel suppliers of heating oil, propane, wood, 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	
<b>☑</b> Bulk fuel vendors are required to submit reports to the Grantee	
<b>V</b> endor 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 have committed fraud. Select all that apply.	to
Refer to state Inspector General	
Refer to local prosecutor or state Attorney General	
Refer to US DHHS Inspector General (including referral to OIG hotline)	
Local agencies/district offices or Grantee conduct investigation of fraud complaints from public	
Grantee attempts collection of improper payments. If so, describe the recoupment process	
If a client committed fraud and received under \$2,500 they are put on a monthly payment plan to reimburse the State. If a client receive over \$2,500 then the case is referred to the Attorney General's office for criminal prosecution.	d
Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned? 1-year for first offense, 2-years for second office, indefinitely for 3rd offense.	
Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated	
<b>Vendors found to have committed fraud may no longer participate in LIHEAP</b>	
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.	in

# 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)

311 West Saratoga Street  * Address Line 1					
Address Line 2					
Address Line 3					
Baltimore  * City	MD * State	21201  * Zip Code			

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

Alternate II. (Grantees Who Are Individuals)

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

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

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

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

#### Section 20: Certification Regarding Lobbying

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

- (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 energyrelated 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).					