

November 4, 2010

Mr. Nick St. Angelo, Director  
Division of Energy Assistance  
Office of Community Services, ACF, HHS  
370 L'Enfant Promenade, S.W.  
Washington, DC 20447

Dear Mr. St. Angelo:

Enclosed are the following documents related to the submission of Kansas' annual LIEAP State Plan:

- Detailed Model Plan
- Governor's Designee Letter
- Certification Regarding Lobbying
- Certification Regarding Debarment
- Certification Regarding Drug-free Workplace
- 2010 Household Report (final)
- Program Integrity Assessment Supplement
- Letter to United Tribes of Kansas and Southeast Nebraska, Inc.

If you have any questions regarding this submission, please contact me via e-mail at [Winona.Dickson@srs.ks.gov](mailto:Winona.Dickson@srs.ks.gov) or by telephone at 785.368.8122.

Sincerely,

*Winona Dickson*

Winona Dickson  
LIEAP Program Manager  
Economic and Employment Services  
Kansas Department of Social and Rehabilitation Services

Enclosures

November 4, 2010

Mr. Nick St. Angelo, Director  
Division of Energy Assistance  
Office of Community Services, ACF, HHS  
370 L'Enfant Promenade, S.W.  
Washington, DC 20447

Dear Mr. St. Angelo:

Enclosed are the following documents related to the submission of Kansas' annual LIEAP State Plan:

- Detailed Model Plan
- Governor's Designee Letter
- Certification Regarding Lobbying
- Certification Regarding Debarment
- Certification Regarding Drug-free Workplace
- 2010 Household Report (final)
- Program Integrity Assessment Supplement

If you have any questions regarding this submission, please contact me via e-mail at [Winona.Dickson@srs.ks.gov](mailto:Winona.Dickson@srs.ks.gov) or by telephone at 785.368.8122.

Sincerely,

Winona Dickson  
LIEAP Program Manager  
Economic and Employment Services  
Kansas Department of Social and Rehabilitation Services

Enclosures

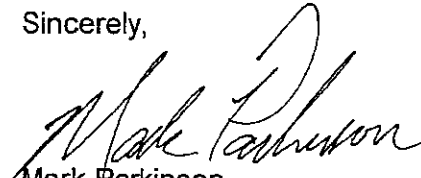
August 14, 2009

Mr. Nick St. Angelo, Director  
Division of Energy Assistance  
Office of Community Services, ACF, HHS  
370 L'Enfant Promenade, S.W.  
Washington, DC 20447

Dear Mr. St. Angelo:

I hereby designate Don Jordan, Secretary of the Department of Social and Rehabilitation Services, as the State's authorized representative to make assurance certifications on behalf of the Governor necessary to execute documents and implement the Low Income Home Energy Assistance Program until further notice.

Sincerely,

  
Mark Parkinson  
Governor

MP:LK:sv

**ATTACHMENT 3**

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP)**

**DETAILED MODEL PLAN**

**PUBLIC LAW 97-35, AS AMENDED**

**FISCAL YEAR (FY) 2011**

**GRANTEE** State of Kansas

**EIN:** 48-6029925

**ADDRESS** 915 SW Harrison; Suite 580

Docking State Office Building

Topeka, KS 66612

**NAME OF LIHEAP COORDINATOR** Winona Dickson

**EMAIL:** Winona.Dickson@srs.ks.gov

**TELEPHONE:** 785.368.8122 **FAX:** 785.296.6960

**PLEASE CHECK ONE: TRIBE**  **STATE**  **INSULAR AREA**

**Department of Health and Human Services  
Administration for Children and Families  
Office of Community Services  
Washington, DC 20447**

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

**OMB Approval No. 0970-0075**

**Expiration Date: 09/30/2011**

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.

GRANTEE State of Kansas

FFY 2011

Assurances

The Kansas Department of Social and Rehabilitation Services agrees to:  
(Grantee Name)

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

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

(B) intervene in energy crisis situations;

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

(D) plan, develop, and administer the State's program under this title including leveraging programs,

and the State agrees not to use such funds for any purposes other than those specified in this title;

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(8) provide assurances that,

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

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

(9) provide that--

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

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

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

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

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

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

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

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

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

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

Certification to the Assurances: As Chief Executive Officer, I agree to comply with the sixteen assurances contained in Title XXVI of the Omnibus Budget Reconciliation Act of 1981, as amended.\* By signing these assurances, I also agree to abide by the standard assurances on lobbying, debarment and suspension, and a drug-free workplace.

Signature of the Tribal or Board Chairperson or Chief Executive Officer of the State or Territory.\*\*

Signature: 

Title: Secretary, Kansas Department of Social and Rehabilitation Services

Date: 9-23-10

**\* Indian tribes/tribal organizations, and territories with annual regular LIHEAP allotments of \$200,000 or less, are not subject to assurance 15, and thus must only certify to 15 assurances.**

**\*\* If a person other than the Chief Executive Officer of the State or territory, or Tribal Chairperson or Board Chairperson of a tribal organization, is signing the certification to the assurances, a letter must be submitted delegating such authority. (PLEASE ATTACH DELEGATION of AUTHORITY.) The delegation must include authority to sign the assurances, not just to administer the program.**

**\*\*\* HHS needs the EIN (Entity Identification Number) of the State, territory or Tribal agency that is to receive the grant funds before it can issue the grant.**

In the above assurances which are quoted from the law, "State" means the 50 States, the District of Columbia, an Indian Tribe or Tribal Organization, or a Territory; "title" of the Act refers to Title XXVI of the Omnibus Budget Reconciliation Act of 1981 (OBRA), as amended, the "Low Income Home Energy Assistance Act"; "section" means Section 2605 of OBRA; and, "subsection" refers to Section 2605(b) of OBRA.

statutory references

2605(a)

2605(b)(1) → Please check which components you will operate under the LIHEAP program. (Note: You must provide information for each component designated here as requested elsewhere in this plan.)

(use of funds)		<u>Dates of Operation</u>
	<input checked="" type="checkbox"/> heating assistance	January 13, 2010- March 31,2010
	<input type="checkbox"/> cooling assistance	_____
	<input checked="" type="checkbox"/> crisis assistance	January 13, 2010- March 31,2010
	<input checked="" type="checkbox"/> weatherization assistance	April - March _____

2605(c)(1)(C) → Please 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%.**

(use of funds)	<input type="checkbox"/> heating assistance	_____ %
	<input type="checkbox"/> cooling assistance	_____ %
	<input type="checkbox"/> crisis assistance	_____ %
2605(k)(1)	<input type="checkbox"/> weatherization assistance	_____ %
	<input type="checkbox"/> carryover to the following fiscal year	_____ %
2605(b)(9)	<input type="checkbox"/> administrative and planning costs	_____ %
2605(b)(16)	<input type="checkbox"/> services to reduce home energy needs including needs assessment (assurance 16)	_____ %
	<input type="checkbox"/> used to develop and implement leveraging activities (limited to the greater of 0.08% or \$35,000 for States, the greater of 2% or \$100 for territories, tribes and tribal organizations).	_____ %
	<b><u>100</u> TOTAL</b>	

statutory references

2605(c)(1)(C)

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

(alternate use of crisis assistance funds)

heating assistance

cooling assistance

weatherization assistance

Other(specify):

→Do you accept applications for energy crisis assistance at sites that are geographically accessible to all households in the area to be served? (This is required by the statute.)

Yes  No

2605(b)(2)  
2605(c)(1)(A)

→What are your maximum eligibility limits?  
(Please check the components to which they apply.)

**Current year guidelines must be used.**

(eligibility)

150% of the poverty guidelines:  
heating  cooling  crisis  wx

125% of the poverty guidelines:  
heating  cooling  crisis  wx

110% of the poverty guidelines:  
heating  cooling  crisis  wx

60% of the State's median income:  
heating  cooling  crisis  wx

Other (specify for each component)

130% of the poverty guidelines for heating and crisis; 75% SMI wx

Households automatically eligible if one person is receiving  
 TANF,  SSI,  Food Stamps,  Certain means-tested veterans programs (heating  cooling  crisis  wx )



statutory  
references

2605(c)(1)(A)  
2605(b)(2)

→Do you have additional eligibility requirements for:  
**COOLING ASSISTANCE** (  Yes  No)

(eligibility)

→Do you use:	<u>Yes</u>	<u>No</u>
Assets test?	_____	_____
→Do you give priority in eligibility to:		
Elderly?	_____	_____
Disabled?	_____	_____
Young children?	_____	_____
Other: (If Yes, please describe)	_____	_____

statutory  
references

2604(c)  
2605(c)(1)(A)

→ Do you have additional eligibility requirements for:  
**CRISIS ASSISTANCE** ( Yes  No)

(eligibility)

	<u>Yes</u>	<u>No</u>
→ Do you use:		
Assets test?	_____	___ <b>x</b> ___
Must the household have received a shut-off notice or have an empty tank?	___ <b>x</b> ___	_____
Must the household have exhausted regular benefit?	_____	___ <b>x</b> ___
Must the household have received a rent eviction notice?	_____	___ <b>x</b> ___
Must heating/cooling be medically necessary?	___ <b>x</b> ___	_____
Other (Please explain):	_____	___ <b>x</b> ___

→ What constitutes a crisis? (Please describe)

Household has no heating fuel or no energy to operate the primary heating system.

statutory  
references

2605(c)(1)(A) → Do you have additional eligibility requirements for:  
**WEATHERIZATION** ( Yes  No)

(eligibility)

→ Do you use: Yes No

Assets test?              x  

Priority groups? (Please list)   x             

Elderly; Disabled; Children

→ Are you using Department of Energy (DOE) Low  
Income Weatherization Assistance Program  
(LIWAP) rules to establish eligibility or to establish  
priority eligibility for households with certain  
characteristics?   x             

→ If Yes, are there exceptions?              x    
Please list below.

statutory  
references

2605(b)(3) → Please check the outreach activities that you  
2605(c)(3)(A) conduct that are designed to assure that eligible households are made  
(outreach) aware of all LIHEAP assistance available:

x  provide intake service through home visits or by telephone for the physically infirm (i.e. elderly or disabled).

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

x  publish articles in local newspapers or broadcast media announcements.

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

x  make mass mailing to past recipients of LIHEAP.

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

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

x  other (Please specify):

A toll-free number is available for consumers. SRS also provides to weatherization, a list of all applicants for LIEAP sorted geographically to all weatherization to target services to those with potential need. SRS also has an online application process to allow consumers to access many of our benefit programs through the internet including LIHEAP.

A second mailing will be made to previous LIEAP recipients who have not submitted a current application.

statutory  
references

2605(b)(4) → Please describe how you will assure that LIHEAP is coordinated with similar and related programs. The description provided applies to all components unless specifically noted.  
  
(coordination)

Up to 15% of the LIHEAP block grant may be allocated to the low-income weatherization assistance program. LIHEAP applicant's name, address, and energy consumption data is shared with the weatherization program. LIHEAP eligibility information is shared with federal, state and local governments, utilities, vendors, and non-profit organizations. Agreements are entered into with local agencies for the provision of voluntary outreach and intake services. A mass mailing of LIHEAP information directing them to apply online is sent to public assistance and SNAP recipients, as well as prior LIHEAP recipient at the beginning of the application period. LIHEAP program information is also sent out to Medicaid and MediKan recipients during the LIHEAP application period.

2605(b)(5) → The statute requires that there be no difference in the treatment  
2605(b)(2) of households eligible because of their income and those eligible  
2605(b)(8A) because they receive benefits under TANF, Food Stamps, SSI, or certain means-tested veterans programs ("categorically eligible"). How do you ensure there is no difference when determining eligibility and benefit amounts? This applies to all components unless specifically noted below.  
  
(benefit  
levels)

For heating and crisis assistance, the state will provide, in a manner consistent with the efficient and timely payment of benefits, that the highest level of assistance will be furnished to those households which have the lowest incomes and the highest energy costs in relation to income, recognizing that the state may not differentiate between household in clauses (2)(A) and (2)(B) of this subsection. This assurance will be met by benefits which consider the following factors: energy type, local utility cost of energy type, and the income of all residents sharing the same heated space. Benefits are not contingent upon other forms of assistance the household receives. Timely and efficient payment of benefits will be assured by making an eligibility determination on each application in no more than 45 days after the date of receipt of the complete application.

Weatherization benefits are based upon automated energy audits conducted on each dwelling.

statutory  
references

### HEATING COMPONENT

2605(b)(5) → Please check the variables you use to determine your benefit levels (check all that apply):

(determination  
of benefits)

- income
- family (household) size
- home energy cost or need
  - fuel type
  - climate/region
  - individual bill
  - dwelling type
  - energy burden  
(% of income spent on home energy)
  - energy need
  - other (describe)

2605(b)(5) → Describe how you will assure that the highest benefits go to households  
2605(c)(1)(B) with the lowest incomes and the highest energy costs or needs in relation  
to income, taking into account family size.

(benefit  
levels) Please describe benefit levels or attach a copy of your payment matrix.

The Kansas LIHEAP benefit matrix considers several factors in determining the household benefit. The maximum benefit received by a household is based upon the cost of their local utility. In explanation, the cost of a common energy unit for each utility receiving a payment on behalf of a LIHEAP client are recorded from biannual surveys conducted by the department. The utility costs are then ranked into deciles. The household's base benefit is the midpoint of the cost decile into which their utility falls. Large households, defined as five or more persons, receive an approximate 22 percent increase in the base benefit, while smaller households receive approximately 98 percent of the base benefit. The resulting combination of utility cost and household size produces the maximum benefit available to a household. Household income is the next factor considered. Two income groups are determined, ranging from low (Group 1) to high (Group 2).

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

Yes  No If Yes, please describe.

statutory  
references

2605(b)(5)  
2605(c)(1)(B)

**COOLING COMPONENT**

➔Please check the variables you use to determine your benefit levels  
(check all that apply):

(determination  
of benefits)

- income
- family (household) size
- home energy cost or need
  - fuel type
  - climate/region
  - individual bill
  - dwelling type
  - energy burden  
(% of income spent on home energy)
  - energy need
  - other (describe)

2605(b)(5)  
2605(c)(1)(B)

➔Describe how you will assure that the highest  
benefits will go to households with the lowest  
incomes and the highest energy costs or needs  
in relation to income, taking into account family size. Please describe  
benefit levels or attach a copy of your payment matrix.

(benefit  
levels)

➔Do you provide in-kind (e.g. fans) and/or other forms of benefits?

Yes  No If Yes, please describe.

statutory  
references

2605(b)(5)  
2605(c)(1)(B)

**CRISIS COMPONENT**

(determination  
of benefits)

→How do you handle crisis situations?

\_\_\_\_\_ separate component  other (please explain)

The same factors used for heating assistance determine eligibility for crisis assistance during the LIHEAP heating season except that crisis applications are given priority in processing.

→If you have a separate component, how do you determine crisis assistance benefits?

\_\_\_\_\_ amount to resolve crisis, up to maximum

\_\_\_\_\_ other (please describe)

(benefit  
levels)

→Please indicate the maximum benefit for each type of crisis assistance offered.

heating \$ as per regular matrix maximum benefit

cooling \$ \_\_\_\_\_ maximum benefit

year-round \$ \_\_\_\_\_ maximum benefit

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

Yes  No If Yes, please describe.

statutory  
references

2605(b)(5)  
2605(c)(1)  
(B) & (D)

**WEATHERIZATION & OTHER ENERGY RELATED  
HOME REPAIR AND IMPROVEMENTS**

→What LIHEAP weatherization services/materials do you provide?  
(Check all categories that apply.)

(types of  
assistance)

- Weatherization needs assessments/audits.
- Caulking, insulation, storm windows, etc.
- Furnace/heating system modifications/repairs
- Furnace replacement
- Cooling efficiency mods/repairs/replacement
- Other (Please describe)

(benefit  
levels)

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

If Yes, what is the maximum amount? \$ \_\_\_\_\_

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

(types of  
rules)

- Entirely under LIHEAP (not DOE) rules
- Entirely under DOE LIWAP rules
- Mostly under LIHEAP rules with the following DOE LIWAP rule(s)  
where LIHEAP and LIWAP rules differ (Check all that apply):

Weatherize buildings if at least 66% of units (50% in 2- &  
4-unit buildings) are eligible units or will become eligible within  
180 days

Weatherize shelters temporarily housing primarily low  
income persons (excluding nursing homes, prisons, and similar  
institutional care facilities).

Other (Please describe)

Mostly under DOE LIWAP rules, with the following  
LIHEAP rule(s) where LIHEAP and LIWAP rules differ (Check  
all that apply.)

Weatherization not subject to DOE LIWAP maximum  
statewide average cost per dwelling unit.

Other (Please describe.)

Re-weatherization of a home is possible as long as no part of the  
costs were through use of DOE funds. DOE average cost per unit  
is used along with consideration of special allowances (through

written request by the sub-grantee) if there is a need to do certain measures. Those measures include small (measured by cost) amounts of repair that in normal instances would require the sub-grantee to “walk away” from the home until those minor repairs are completed. *(See attached Administrative Procedures- Kansas Weatherization Assistance Program)*

**1000****Administrative Procedures****1010: Grant Awards**

All subgrantee agencies receiving a grant award for providing weatherization services are bound by the grant award documents, payments, and financial reporting requirements. Specific procedures must be followed to initiate grant activities, receive payments or reimbursements for expenditures, and to report financial and program activities.

Three major sections include:

- Procedures and standards for initiation and approval of grant awards to subgrantees
- Procedures for payment of weatherization grant funds
- Procedures for financial and program reporting requirements for weatherization subgrantees.

The issuance of all grant awards for the weatherization program shall be governed by:

- DOE 10 CFR 440 - Weatherization Assistance for Low Income Persons/Final Rule
- DOE 10 CFR 600 - Financial Assistance Rules

Upon the subgrantees signing of the grant, the terms and conditions of the grant become the agreement between the subgrantee and the K-WAP, which sets forth the manner that the subgrantee shall operate the program.

Should a subgrantee decline an award or fail to acknowledge acceptance of an award, K-WAP shall release the funds obligated for the award. K-WAP shall provide the subgrantee with written notice of the intent to release funds. *"Release of Funds" is defined as de-obligating the funds from the encumbrance system in KHRC.* After a subgrantee has been notified and the grant is still not accepted, procedures to select a new subgrantee for that area may be implemented.

**1020: Grant Award Changes and Amendments**

Starting in 2009 K-WAP will allow the LIEAP average per home to be \$2,000 under the DOE average. K-WAP will also allow homes to be dual-funded using DOE and LIEAP funds. When homes are dual-funded, they will be reported in the Weatherization Management system in each of the grants identifying the measures and the amount funded for that particular grant.

The budget, budget narrative, and production schedule shall be used as the financial plan to operate the weatherization program. Grant expenditures shall be in accordance with the approved budget and detailed budget narrative.

- A. The subgrantee shall obtain prior written approval for budget line item changes.  
**EXCEPTION:** If the total changes do not exceed five percent (5%) \*\* of the total grant

Explain the inspection process, blower door testing and the instrumented furnace inspection to the client. These processes are technical procedures about which most clients will know very little. An explanation of the procedure – how it is done, what it tells us – can calm apprehensions that a client might have about the process and promote a spirit of cooperative effort which can make the pre-inspector's job much easier.

#### **4120: Instrumented Space and Water Heating System(s) Inspection**

The home can't be weatherized unless the inspection is completed and all space and water heating systems are determined to be safe.

The appropriate, documented inspection procedure must be followed for each combustion appliance.

Refer to appendix A... for appropriate forms with instructions

**K-WAP LIEAP** funds may be used for purchase of temporary electric space heater for emergency "no heats".

#### **4130: Exterior Measurement, Observation and Preparation**

Information about the actual dimensions of the dwelling are required for several reasons.

- Blower door test data is based on the volume and surface area of the structure.
- Computerized audits, including REM Design, require plan and elevation dimensions. Including data for above grade walls, foundations, slabs, and rough opening sizes for doors and windows.
- Crews and contractors need graphic illustrations of particular problem areas that they will address in a given structure.
- Detailed measurement information may be required for ordering specific materials.

#### **Exterior observation and measurement shall include:**

*Plan view*, illustrating the outline and dimensions of the structure. Many inspectors find it helpful to begin consistently at a given point (say, the northwest corner of a structure) and measure in a particular direction (say, clockwise). Thus, all sides are viewed in a given order, reducing potential for confusion and duplication. The plan page should indicate which way is North for easy reference.

*Elevation views*, showing the overall shape and the location of doors, windows, and other features of each side or face of a structure. Effort should be made to produce an illustration that is neat and provides a reasonably accurate representation of dwelling. Printed pictures may be included as elevation views. Pictures must show all four sides of the house and also clearly show any relevant items to be addressed in work specification forms.

*Door and window measurements* are written with the width first, then the height.

- Observation should be made during the measurement phase to determine whether additional weatherization work will be applied to doors and windows.

Kansas Weatherization Assistance Program

2010 Subgrantee Procedure Manual

- Forced air furnaces shall not be installed in homes without existing ducting systems. The owner or a non-weatherization funding source is expected to pay the cost of installing a duct system.
- Forced air furnaces shall not be installed in mobile homes without existing ducting systems unless the owner or a non-weatherization funding source pays the cost of the duct system installation.
- Duct work may be installed using **LIEAP** funds (after all other funding possibilities have been eliminated) when replacing a wall, or console heater deemed unsafe.
- Water heating systems can be replaced using weatherization funding if one of the following circumstances exist.

Audit Approval

Heat exchanger cracked, producing a high concentration of CO (Health & Safety)

Leaking and would prohibit the installation of an approved measure, or for the protection of a weatherization measure (Incidental Repair)

Minimum Replacement Guidelines:

**Electric:** A replacement electric water heater must have an energy factor of at least 0.91 and have at least 3" of internal foam insulation

**Gas:** A replacement gas water heater must have an energy factor of at least 0.61 or have 2" of internal foam insulation. Replacement water heaters shall be wrapped with an external blanket unless the manufacturer recommends against an external blanket or if the blanket measure is not REM Design audit approved.

The minimum efficiency requirements for replacement heating units shall be as set forth in the National Appliance Energy Conservation Act of 1987: Wall and console heaters must be replaced using 92% forced air furnace which includes the installation of ductwork unless conditions prohibit the installation.

Furnaces, forced air:	all capacities	92% AFUE
Boilers, hot water:	all capacities	90% AFUE
Boilers, steam:	all capacities	90% AFUE
Wall, fan type:	up to 42,000 Btu/hour	80% AFUE
	over 42,000 Btu/hour	80% AFUE
Wall, gravity type:	up to 10,000 Btu/hour	80% AFUE
	10,000 to 12,000 Btu/hour	80% AFUE
	12,000 to 15,000 Btu/hour	80% AFUE
	15,000 to 19,000 Btu/hour	80% AFUE

2605(b)(6) The state or tribe administers LIHEAP through the following local agencies:

(agency designation)

county welfare offices

community action agencies (weatherization component only)

community action agencies (heating, cooling or crisis)

charitable organizations

not applicable (i.e. state energy office)

tribal office

other, describe:

SRS established an agreement with this Contractor to provide a centralized clearinghouse and program management for more efficient and consistent processing of applications by assuming the following responsibilities: handling all LIEAP calls; application packet design, printing and mailing; receive and process all LIEAP applications; fulfillment of application requests and information; provide status reporting of all applications and call handling statistics; eligibility determination; and LIEAP marketing assistance.

→ Have you changed local administering agencies from last year?

Yes  No

If Yes, please describe how you selected them.

This particular Contractor was selected primarily due to SRS' experiences through an existing relationship with the Contractor for the provision of a customer call center and the Contractor's ability to provide similar services to other programs. The Child Support Enforcement department of our State agency has utilized this vendor with great success. The vendor has the ability to provide similar services to other programs. It was mutually desirous for this vendor to provide the LIEAP services based on this information.

→ What components are affected by the change?

Applications and customer inquiries are sent to a centralized location for eligibility determination and assistance with the LIEAP program. Applicants can still obtain and fill out applications at local SRS offices as well as hundreds of agencies throughout the State. After eligibility is determined by contractor, SRS will issue the payment. SRS LIEAP employees will be staffed in local offices and utilized as quality control reviewers. SRS will provide oversight of contractor.

2605(c)(1)(E) → Please describe any additional steps (other than those described elsewhere in this plan) that will be taken to target assistance to households with high home energy burdens. **(This applies to all components. If all steps to target households with high home energy burdens are described elsewhere in the plan, no further information is required here.)**

(targeting of assistance)

None

statutory  
references

2605(b)(7) (energy suppliers) → Do you make payments directly to home energy suppliers?

Heating  Yes  No

Cooling  Yes  No

Crisis  Yes  No

If Yes, are there exceptions?  Yes  No  
If Yes, please describe.

Small utilities and vendors are paid using checks payable to the vendor f/b/o the household. In addition, households whose heating costs are included in their rent or in their landlord's name are issued a one party check.

2605(b)(7)(A) → If you make payments directly to home energy suppliers, how do you notify the client of the amount of assistance paid? (Please describe)

A notice of eligibility is sent directly to the client indicating benefit level. The vendor also notes LIHEAP benefit paid on the customer's next monthly billing statement.

2605(b)(7)  
(B) & (C)

→ How do you make sure the home energy supplier performs what is required in this assurance? If vendor agreements are used, they may be attached. Indicate each component for which this description applies.

Vendor agreements identify expectations and procedures to be followed for heating and crisis assistance. Communication is ongoing between LIHEAP staff and energy suppliers throughout the program.

statutory  
references

2605(b)(8)(B)

→ Is there any difference in the way owners and renters are treated? If Yes, please describe.

(owners  
and  
renters)

**HEATING ASSISTANCE**

\_\_\_\_\_ Yes  x  No

**COOLING ASSISTANCE**

\_\_\_\_\_ Yes \_\_\_\_\_ No

Not Applicable

**CRISIS ASSISTANCE**

\_\_\_\_\_ Yes  x  No

**WEATHERIZATION**

x  Yes \_\_\_\_\_ No

Landlords are required to partially pay for furnace replacements. Exemptions are allowed for low-income landlords, public housing, and emergency shelters.

statutory  
references

2605(b)(10) → How do you ensure good fiscal accounting and tracking of LIHEAP funds? (Please describe. Include a description of how you monitor fiscal activities.)

(program, The State has established fiscal controls and fund accounting procedures in coordination with accounting and fiscal operations necessary to ensure the proper disbursement of, and accounting for, LIHEAP funds, including program expenditures and amounts transferred to carry out the purposes of this program. Monitoring for the assistance provided is being tracked through our eligibility data system, as well as through fiscal operations. Batch benefit printouts are monitored by the LIHEAP Program Manager on a regular basis.

fiscal  
monitoring,  
and audit)

→ How do you monitor program activities? (Please be sure to include a description of how you monitor eligibility and benefit determination.)

Contractor and local office responsibilities and procedures are in place to monitor the eligibility and benefit determinations, and to maintain necessary case records. The State utilizes its existing data processing systems, fiscal, research and statistical models and procedures to monitor the disbursement of funds and accounting of Federal funds, including the assistance provided under LIHEAP. The State will contract for independent annual audits of funding received and expended. The State will also require weatherization sub-grantees to obtain annual audits.

→ How is your LIHEAP program audited?

Under the Single Audit Act?  Yes  No

If not, please describe:

For States and Territories:

→ Is there an annual audit of local administering agencies?  Yes  No

If not, please explain.

statutory  
references

2605(b)(12)

➔How did you get timely and meaningful public participation in the development of the plan? (Please describe.)

(timely and  
meaningful  
public  
partici-  
pation)

A public hearing was held on September 8 to solicit public input regarding the administration of the LIHEAP program in Kansas. Any member of the general public, advocate, community service agency, etc. is encouraged to provide input at this time.

2605(a)(2)

➔Did you conduct public hearings on the proposed use and distribution of your LIHEAP funds? When and where?

X  Yes   No

**(Not required for Tribes and tribal organizations)**

(public  
hearings)

See above response

statutory  
references

2605(b)(13) → Describe your fair hearing procedures for households whose applications are denied or not acted on in a timely manner. When are applicants informed of these rights?

(fair  
hearings)

→ Denials

The State will provide all applicants and recipients opportunity for fair hearing. Applicants are informed of appeal rights on the application and also on the notice of action. Request for fair hearing must be submitted in writing. Fair hearing is held by teleconference or the applicant or recipient may elect to appear in person at the Administrative Hearing Office. Appellant may describe in writing and/or verbally the concern or objection. Decisions by an administrative hearing officer are made in writing and mailed to client.

The request must be made within 30 days of the eligibility notice if the issue is regarding denial or benefits. If a hearing is granted, a decision must be issued and resulting action carried out within 90 days after the written request for fair hearing has been submitted.

The State will assure that no persons shall, on grounds of race, color, national origin, religion, handicap, politics, or sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance. If any person feels he/she has been discriminated against on these grounds, he/she may make a complaint in writing to the Department of Social and Rehabilitation Services regarding energy assistance or to the sub-grantee agency for weatherization services.

→ Applications Not Acted On In a Timely Manner

Applications not acted on in a timely manner, for heating and crisis assistance, have the same right to appeal as state above, but the request for a hearing must be made within 90 days of the LIHEAP application date.

statutory  
references

2605(b)(15)

**For States and Puerto Rico only** (not applicable to Tribes and tribal organizations, or to territories whose annual regular LIHEAP allotments are \$200,000 or less):

→ Does the State agency that administers the following LIHEAP component also administer the State's welfare program?

(alternate  
outreach  
and intake)**HEATING ASSISTANCE**

Yes  No

If Yes, describe alternate process for outreach and intake:

Applications are mailed to all prior year recipients at the beginning of the application period. Cash and SNAP recipients are also mailed an application. Other interested persons may obtain an application, receive information, or assistance in completing the application by calling the toll-free number for the local LIHEAP office directly, utilize the available online application process or by calling the local SRS office.

**COOLING ASSISTANCE**

Yes  No  Not applicable

If Yes, describe alternate process for outreach and intake:

**CRISIS ASSISTANCE**

Yes  No

If Yes, describe alternate process for outreach and intake:

In addition to the above, additional outreach and intake services are provided for heating and crisis assistance by many volunteer agencies statewide. (e.g. Salvation Army, American Red Cross, Area Agencies on Aging, county health departments, local housing agencies, etc.)

statutory  
references

2605(b)(16)

→ Do 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? (This assurance refers to activities such as needs assessments, counseling, and assistance with energy vendors.)

Yes  No

If Yes, please describe these activities.

If Yes, how do you ensure that you don't use more than 5% (statutory ceiling) of your LIHEAP funds for these activities?

statutory  
references

2607A  
(leveraging)

→ Please describe leveraging activities planned for the fiscal year. **(This entry is optional.)\*** Complete this entry if you plan to apply for LIHEAP leveraging incentive funds and to include in your leveraging report resources/benefits provided to low income households this fiscal year under criterion (iii) in 45 CFR 96.87(d)(2). Provide the following information for each:

- (1) Identify and described each resource/benefit;
- (2) Identify the source(s) of each resource; and
- (3) Describe the integration/coordination of each resource/benefit with the LIHEAP program, consistent with 1 or more of conditions A-H in 45 CFR 96.87(d)(2)(iii).

\* Leveraged resources/benefits that are counted under criterion (iii) in 45 CFR 96.87(d)(2) must be identified and described in the grantee's LIHEAP plan and distributed as indicated in the plan. In addition, leveraging resources/benefits that are counted under criterion (ii) must be carried out under one or more components of the grantee's regular LIHEAP program.

statutory  
references

2605(b)

→ Please describe performance goals and measures planned for the fiscal year. **(This entry is optional.)**

(performance)  
goals and  
measures)

## ADDITIONAL CERTIFICATIONS AND REQUIREMENTS

Attached are additional certifications required as follows:

- \* **Lobbying certification**, which must be filed by all States and territories. If applicable, Form LLL, which discloses lobbying payments, must be submitted. **(Tribes and tribal organizations are EXEMPT.)**
- \* **Debarment and suspension certification**, which must be filed by all grantees.
- \* **Drug-free workplace requirement certification**, which must be filed by all grantees, unless the grantee has filed a statewide certification with the Department of Health and Human Services. **STATES ONLY:** If you have filed a statewide certification for the drug-free workplace requirement, please check here: \_\_\_\_\_
- \* One of the requirements included in the 1994 reauthorization of the statute is that state grantees must include in their annual application for funds a report on the number and income levels of households applying for and receiving LIHEAP assistance, and on the number of recipient households that have members who are elderly, disabled, or young children.

**All Tribes and those territories with allotments of less than \$200,000** need only submit data on the number of households served by each component (heating, cooling, weatherization and crisis). The approval for the collection of information contained in the **LIHEAP Household Report** is covered by OMB approval number 0970-0060.

- \* Though not a part of this application, the report on funds to be carried over or available for reallocation as required by section 2607(a) for the preceding year must be submitted by August 1 of each year. A grant award for the current fiscal year may not be made until the carryover/reallocation report is received. The approval for the collection of information contained in the **LIHEAP Carryover and Reallocation Report** is covered by OMB approval number 0970-0106.

## CERTIFICATION REGARDING LOBBYING

### Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned 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.

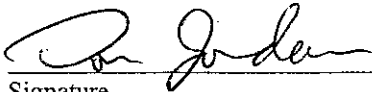
(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this 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.



Signature

Title

Organization

SECRETARY

SOCIAL & REHAB SERVICES

## **CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS**

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

#### Instructions for Certification

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

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

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

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

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

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

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

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

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

## CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

---

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

---

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

1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.
2. The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
3. For grantees other than individuals, Alternate I applies.
4. For grantees who are individuals, Alternate II applies.
5. Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.
6. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State

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

Grantee Name: State of Kansas

Contact Person: Winona Dickson

Phone: 785-368-8122

Date: 11/3/2010

The LIHEAP Household Report--Long Format is for use by the 50 States, District of Columbia, and the Commonwealth of Puerto Rico. This Federal Report provides data on both LIHEAP recipient and applicant households for Federal Fiscal Year (FFY) 2010, the period of October 1, 2009 - September 30, 2010. The Report consists of the following sections: (1) **Recommended Long Format for LIHEAP Assisted Households** and (2) **Recommended Format for LIHEAP Applicant Households**. Data on assisted households are included in the Department's annual LIHEAP Report to Congress. The data are also used in measuring targeting performance under the Government Performance and Results Act of 1993. As the reported data are aggregated, the information in this report is not considered to be confidential.

There are two types of data: (1) **required data** which must be reported under the LIHEAP statute and (2) **requested data** which are optional, in response to House Report 103-483 and Senate Report 103-251. Both the LIHEAP Household Report--Long Format (the Excel file name is *hhrspts.xls*) and the instructions on completing the Report (the Word file name is *hhrptns.doc*) can be downloaded in the Forms sections of the Office of Community Services' LIHEAP web site at: [www.acf.hhs.gov/programs/olifeap/grantees/forms.html#household\\_report](http://www.acf.hhs.gov/programs/olifeap/grantees/forms.html#household_report). The spreadsheet is page protected in order to keep the format uniform. The items requiring a response are not page protected. However, other areas of the spreadsheet cannot be entered. For example, the number of assisted and applicant households cannot be calculated automatically for each type of assistance by a formula when the poverty level data are entered.

Do the data below include estimated figures? No  Yes  Mark "X" in the second column below for each type of assistance that has at least one estimated data entry.

**1. RECOMMENDED LONG FORMAT FOR LIHEAP ASSISTED HOUSEHOLDS**

Type of assistance	Mark "X" to indicate estimated data	Number of assisted households	REQUIRED DATA						REQUESTED DATA				
			2009 HHS Poverty Guideline interval, based on gross income and household size	126%-150% poverty	101%-125% poverty	75%-100% poverty	50% poverty	Over 150% poverty	60 years or older	Disabled	Age 5 years or under	Age 2 years or under	Age 3 years through 5 years
Heating		50,946	Under 75% poverty	24,799	14,747	10,142	1,223	35	1,733	19,107	13,489	8,193	9,991
Cooling		0											
Winter/year round crisis		2,036	1,097	534			51	2	63	800	578	366	441
Summer crisis		0											
Other crisis (specify)		0											
Weatherization		1,442	620	231	288	101	242	387	286	360		115	245

**2. RECOMMENDED FORMAT FOR LIHEAP APPLICANT HOUSEHOLDS (regardless of whether assisted)**

Type of assistance	Mark "x" to indicate estimated data	Number of applicant households	REQUIRED DATA						
			2009 HHS Poverty Guideline interval, based on gross income and household size	75%-100% poverty	101%-125% poverty	126%-150% poverty	Over 150% poverty	Income data unavailable	
Heating		61,282	Under 75% poverty	29,446	15,852	11,040	2,175	2,769	
Cooling		0							
Winter/year round crisis		2,338	1,235	566	377	81	79		
Summer crisis		0							
Other crisis (specify)		0							
Weatherization		1,238	486	149	397	133	73		

**Note:** Include any notes below for section 1 or 2 (indicate which section, type of assistance, and item the note is referencing):

**ATTACHMENT 1**  
**PROGRAM INTEGRITY ASSESSMENT SUPPLEMENT**  
 Low Income Home Energy Assistance Program (LIHEAP)

**ABSTRACT:**

HHS is requiring further detail from States on their FY2011 plans for preventing and detecting fraud, abuse, and improper payments. HHS is also requiring that States highlight and describe all elements of this FY2011 plan which represent improvements or changes to the State's FY2010 plan for preventing and detecting fraud, abuse and improper payment prevention.

State, Tribe or Territory (and grant official): State of Kansas	Date/Fiscal Year: 2011		
<b>RECENT AUDIT FINDINGS</b>			
<p>Describe any audit findings of material weaknesses and reportable conditions, questioned costs and other findings cited in FY2010 or the prior three years, in annual audits, State monitoring assessments, Inspector General reviews, or other Government Agency reviews of LIHEAP agency finances.</p> <p><i>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</i></p> <p><b>No audit findings of material weaknesses or reportable conditions occurred in the past 3 years.</b></p>	<p>Please describe whether the cited audit findings or relevant operations have been resolved or corrected. If not, please describe the plan and timeline for doing so in FY2011.</p>	<p>If there is no plan in place, please explain why not.</p>	<p>Necessary outcomes from these systems and strategies</p>
	NONE	N/A	<p>The timely and thorough resolution of weaknesses or reportable conditions as revealed by the audit.</p>

**COMPLIANCE MONITORING**

<p>Describe the State's FY2010 strategies that will continue in FY2011 for monitoring compliance with State and Federal LIHEAP policies and procedures by the State and local administering agencies.</p> <p><i>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</i></p> <ol style="list-style-type: none"> <li>1) Eligibility staff training prior to case handling.</li> <li>2) Standardized training plan that includes policies and procedures, timelines, expectations and agency cultural values.</li> <li>3) Supervisory reviews to ensure policy is followed.</li> <li>4) Our system checks application data entered to ensure ineligible applications due to income or other policies are not approved.</li> <li>5) Agent calls are monitored and reviewed to ensure confidentiality.</li> </ol>	<p>Please highlight any strategies for compliance monitoring from your plan which will be newly implemented as of FY2011.</p>	<p>If you don't have a firm compliance monitoring system in place for FY11, please describe how the State is verifying that LIHEAP policy and procedures are being followed.</p>	<p>Necessary outcomes from these systems and strategies</p>
	<p>Sample pulls for quality assurance third party reviews of core data elements.</p>	<p>N/A</p>	<p>A sound methodology, with a schedule for regular monitoring and a more effective monitoring tool to gather information.</p>

**FRAUD REPORTING MECHANISMS**

<p>For FY2010 activities continuing in FY2011, please describe all (a) mechanisms available to the public for reporting cases of suspected LIHEAP fraud, waste or abuse? [These may include telephone hotlines, websites, email addresses, etc.] (b) strategies for advertising these resources.</p>	<p>Please highlight any tools or mechanisms from your plan which will be newly implemented in FY2011, and the timeline for that implementation.</p>	<p>If you don't have any tools or mechanisms available to the public to prevent fraud or improper payments, please describe your plan for involving all citizens and stakeholders involved with your program in detecting fraud.</p>	<p>Necessary outcomes of these strategies and systems</p>
<p><i>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</i></p> <p><i>Fraud reporting options available to the public include: 2 published toll-free telephone numbers, access to any of our SRS offices to report suspected fraud to a caseworker or fraud investigator and the LIHEAP program manager's number and email address are also public information.</i></p> <ol style="list-style-type: none"> <li>1) Fraud hotline</li> <li>2) Customer Service Toll-free telephone number</li> <li>3) LIEAP toll free number</li> <li>4) If reported, a local fraud investigator will look into the case and the appropriate action will be taken.</li> </ol>	<p>None</p>	<p>N/A</p>	<p><i>Clear lines of communication for citizens, grantees, clients, and employees to use in pointing out potential cases of fraud or improper payments to State administrators.</i></p>

**VERIFYING APPLICANT IDENTITIES**

<p>Describe all FY2010 State policies continuing in FY2011 for how identities of applicants and household members are verified.</p>	<p>Please highlight any policy or strategy from your plan which will be newly implemented in FY2011.</p>	<p>If you don't have a system in place for verifying applicant's identities, please explain why and how the State is ensuring that only authentic and eligible applicants are receiving benefits.</p>	<p>Necessary outcomes from these systems and strategies</p>
<p><i>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</i></p> <p>The state of Kansas utilizes a number of tools to verify identification and HH comp.</p> <p>Address verification checks will be run through a software product purchased through a company called "Melissa Data." The product is used to clean up potentially bad addresses. The "Melissa Data" system will allow us to verify the accuracy and validity of addresses provided on each application. It will also find inaccurate of missing elements in an address.</p> <p>Other tools used include but are not limited to cross-referencing against data in legacy systems to verify HH comp, income, ID and address. In addition, we cross reference with</p>	<p>NONE</p>	<p>N/A</p>	<p>Income and energy supplier data that allow program benefits to be provided to eligible individuals.</p>

major utilities to assure ownership of the utility account, SSN, address match with our case information.

We utilize SAVE system for verification of citizenship when appropriate. Our system also performs checks with the Social Security databases.

**SOCIAL SECURITY NUMBER REQUESTS**

Describe the State's FY2011 policy in regards to requiring Social Security Numbers from applicants and/or household members applying for LIHEAP benefits.

*\* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents*

State of Kansas does not require an SSN but we do strongly encourage the consumer providing it. If not provided, we utilize a pseudo number.

Please describe whether the State's policy for requiring or not requiring Social Security numbers is new as of FY2011, or remaining the same.

N/A

If the State is not requiring Social Security Numbers of LIHEAP applicants and/or household members, please explain what supplementary measures are being employed to prevent fraud.

If consumer does not provide SSN, the State utilizes a pseudo number for identification. We still cross reference against legacy systems to verify as well as cross-match with utility accounts to confirm SSN, address, acct #, names.

Necessary outcomes from these systems and strategies

All valid household members are reported for correct benefit determination.

**CROSS-CHECKING SOCIAL SECURITY NUMBERS AGAINST GOVERNMENT SYSTEMS/DATABASES**

<p>Describe if and how the State used existing government systems and databases to verify applicant or household member identities in FY2010 and continuing in FY2011. (Social Security Administration Enumeration Verification System, prisoner databases, Government death records, etc.)</p>	<p>Please highlight which, if any, existing government databases will be newly implemented in FY2011.</p>	<p>If the State won't be cross checking Social Security Numbers and ID information with existing government databases, please describe how the State will supplement this fraud prevention strategy.</p>	<p>Necessary outcomes from these systems and strategies</p>
<p><i>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</i>                  State of Kansas utilizes EATSS system to verify SSN and also relies upon cross-reference to other legacy benefit systems to verify and confirm SSN accuracy. As a secondary match we also cross match with utility account information to confirm SSN on acct. owner.</p>	<p>NONE</p>	<p>N/A</p>	<p>Use of all available database systems to make sound eligibility determination.</p>

**VERIFYING APPLICANT INCOME**

<p>Describe how the State or designee used State Directories of new hires or similar systems to confirm income eligibility in FY2010 and continuing in FY2011.</p>	<p>Please highlight any policies or strategies for using new hire directories which will be newly implemented in FY2011.</p>	<p>If the State won't be using new hire directories to verify applicant and household member incomes how will the State be verifying the that information?</p>	<p>Necessary outcomes from these systems and strategies</p>
<p><i>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</i></p> <p>The State utilizes a number of verification options for income. These include but are not limited to manual review of paystubs, verification against income information in legacy benefit systems, verification utilizing the TALX "Work Number" data base, state tax withholding data bases, etc. If conflicting or incomplete income data is received the State will investigate to resolve inconsistencies. The State contacts employers directly, ask for additional customer information or uses fraud investigators.</p>	<p>NONE</p>	<p>N/A</p>	<p>Effective income determination achieved through coordination across program lines.</p>

**PRIVACY-PROTECTION AND CONFIDENTIALITY**

Describe the financial and operating controls in place in FY2010 that will continue in FY2011 to protect client information against improper use or disclosure.	Please highlight any controls or strategies from your plan which will be newly implemented as of FY2011.	If you don't have relevant physical or operational controls in place to ensure the security and confidentiality of private information disclosed by applicants, please explain why.	Necessary outcomes from these systems and strategies
<p><i>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</i></p> <p>Access to client specific information in the eligibility system is controlled via the use of "profiles" that define both what staff can access to view and to alter. In addition, use of EATSS system is closely monitored to assure proper use and this monitoring includes validation of the appropriateness of inquiries related to SSN information.</p> <p>Agent staff receives training and acknowledge and sign our confidentiality rules. In addition, customer calls are monitored randomly to review and ensure confidentiality rules are being followed.</p>	<p>NONE</p>	<p>N/A</p>	<p>Clear and secure methods that maintain confidentiality and safeguard the private information of applicants.</p>

**LIHEAP BENEFITS POLICY**

<p>Describe FY2010 State policies continuing in FY2011 for protecting against fraud when making payments, or providing benefits to energy vendors on behalf of clients.</p>	<p>Please highlight any fraud prevention efforts relating to making payments or providing benefits which will be newly implemented in FY2011.</p>	<p>If the State doesn't have policy in place to protect against improper payments or when making payments or providing benefits on behalf of clients, what supplementary steps is the State taking to ensure program integrity.</p>	<p>Necessary outcomes from these systems and strategies</p>
<p><i>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</i></p> <p>The state of Kansas uses a 2-step eligibility process. One person registers the application and a different person determines eligibility. We require verification of utility accounts either by having the consumer provide a copy of a recent billing or in the case of the major utilities, we have access to utility websites to verify account information.</p> <p>In the case of our two primary utilities, we use a process of electronic verification that allows the utility to confirm the accuracy of the information submitted and validate the existence of a utility account in the applicant's name.</p>	<p>NONE</p>	<p>N/A</p>	<p>Authorized energy vendors are receiving payments on behalf of LIHEAP eligible clients.</p>

**PROCEDURES FOR UNREGULATED ENERGY VENDORS**

<p>Describe the State's FY2010 procedures continuing in FY2011 for averting fraud and improper payments when dealing with bulk fuel dealers of heating oil, propane, wood and other un-regulated energy utilities.</p> <p><i>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</i></p> <p><b>We will reference any vendor against the Kansas vendor association lists. When no match is found, the State will investigate further to assure existence. We also require unregulated companies to provide proof of advertisement.</b></p>	<p>Please highlight any strategies policy in this area which will be newly implemented in FY2011.</p>	<p>If you don't have a firm plan for averting fraud when dealing with unregulated energy vendors, please describe how the State is ensuring program integrity.</p>	<p>Necessary outcomes from these systems and strategies</p>
	<p>NONE</p>	<p>N/A</p>	<p>Participating vendors are thoroughly researched and inspected before benefits are issued.</p>

**VERIFYING THE AUTHENTICITY OF ENERGY VENDORS**

<p>Describe State FY2010 policies continuing in FY2011 for verifying the authenticity of energy vendors being paid under LIHEAP, as part of the State's procedure for averting fraud.</p> <p><i>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</i></p> <p>The State of Kansas utilizes two primary methodologies. First for the major utilities, we have access to websites (provided by the utilities) to verify account information including address, names, SSN's and acct. status.</p> <p>For the other vendors, we require the consumer to provide a current copy of a billing from the utility vendor. If the consumer pays their utilities as part of their rent payment, we require a letter of confirmation submitted separately by the landlord that the utilities are included in the rent and that the consumer is current on their rent payments.</p>	<p>Please highlight any policies for verifying vendor authenticity which will be newly implemented in FY2011.</p> <p>NONE</p>	<p>If you don't have a system in place for verifying vendor authenticity, please describe how the State can ensure that funds are being distributed through valid intermediaries?</p> <p>N/A</p>	<p>Necessary outcomes from these systems and strategies</p> <p>An effective process that effectively confirms the existence of entities receiving federal funds.</p>
--	---	--	--

**TRAINING AND TECHNICAL ASSISTANCE**

<p>In regards to fraud prevention, please describe elements of your FY2010 plan continuing in FY2011 for training and providing technical assistance to (a) employees, (b) non-governmental staff involved in the eligibility process, (c) clients, and (d) energy vendors</p>	<p>Please highlight specific elements of your training regimen and technical assistance resources from your plan which will represent newly implemented in FY2011.</p>	<p>If you don't have a system in place for anti-fraud training or technical assistance for employees, clients or energy vendors, please describe your strategy for ensuring all employees understand what is expected of them and what tactics they are permitted to employ.</p>	<p>Necessary outcomes from these systems and strategies</p>
<p>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</p> <p><u>Available Resources</u></p> <ul style="list-style-type: none"> <li>• Fraud hotline</li> <li>• Customer Service Toll-free telephone number</li> <li>• LIEAP toll free number</li> <li>• If reported, a local fraud investigator will look into the case and the appropriate action will be taken.</li> </ul>	<p>NONE</p>	<p>N/A</p>	<p>The timely and thorough resolution of weaknesses or reportable conditions as revealed by the audit.</p>

**AUDITS OF LOCAL ADMINISTERING AGENCIES**

<p>Please describe the annual audit requirements in place for local administering agencies in FY2010 that will continue into FY 2011.</p>	<p>Please describe new policies or strategies to be implemented in FY2011.</p>	<p>if you don't have specific audit requirements for local administering agencies, please explain how the Grantee will ensure that LIHEAP funds are properly audited under the Single Audit Act requirements.</p>	<p>Necessary outcomes from these systems and strategies</p>
<p>* please provide full descriptions of the State's plans and strategy in this area, and attach/reference excerpts from relevant policy documents</p> <p><b>Not applicable. The State of Kansas does not utilize local administration.</b></p>	<p>NONE</p>	<p>N/A</p>	<p>Reduce improper payments, maintain local agency integrity, and benefits awarded to eligible households.</p>

**Additional Information**

Please attach further information that describes the Grantee's Program Integrity Policies, including supporting documentation from program manuals, including pages/sections from established LIHEAP policies and procedures.

November 3, 2010

Mr. Cory Cheek  
United Tribes  
3301 Thrasher Road  
White Cloud, KS 66094

Dear Mr. Cheek:

The State of Kansas, Department of Social and Rehabilitation Services, has decided to not renew the LIEAP agreement between our agency and the United Tribes of Kansas and Southeast Nebraska, Inc. for 2011. We made numerous attempts to communicate with you and obtain your 2010 caseload data and were unable to do so. We will be open to discussing working with your tribe next year for the 2012 LIEAP if the tribe has an interest at that time.

We have notified Health and Human Services of our decision and will provide them with a copy of this letter as official notification. If you have any questions, please contact me at 785.368.8122 or via e-mail at [Winona.Dickson@srs.ks.gov](mailto:Winona.Dickson@srs.ks.gov).

Sincerely,



Winona Dickson  
LIEAP Program Manager