

## DETAILED MODEL PLAN (LIHEAP)

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

**Grantee Name:** Nebraska

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

**Report Period:** 10/01/2022 to 09/30/2023

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

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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: 12/31/2023

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

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

**7. APPLICANT INFORMATION**

<b>* a. Legal Name:</b> State of Nebraska			
<b>* b. Employer/Taxpayer Identification Number (EIN/TIN):</b> 470491233		<b>* c. Organizational DUNS:</b> 808819957	
<b>* d. Address:</b>			
<b>* Street 1:</b>	P.O. BOX 95026	<b>Street 2:</b>	301 CENTENNIAL MALL SOUTH, 3RD FLOOR
<b>* City:</b>	LINCOLN	<b>County:</b>	
<b>* State:</b>	NE	<b>Province:</b>	
<b>* Country:</b>	United States	<b>* Zip / Postal Code:</b>	68509 - 5026

**e. Organizational Unit:**

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

<b>Prefix:</b> Mr	<b>* First Name:</b> Matt	<b>Middle Name:</b>	<b>* Last Name:</b> Thomsen
<b>Suffix:</b>	<b>Title:</b> LIHEAP,LIHWAP,CSBG,NHAP Manager	<b>Organizational Affiliation:</b>	
<b>* Telephone Number:</b> 402-417-9435	<b>Fax Number:</b> 402-471-9286	<b>* Email:</b> Matt.Thomsen@nebraska.gov	

**\* 8a. TYPE OF APPLICANT:**  
A: State Government

**b. Additional Description:**

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

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


**11. Descriptive Title of Applicant's Project**  
2023 Nebraska State Plan

**12. Areas Affected by Funding:**  
DHHS LIHEAP and Weatherization

**13. CONGRESSIONAL DISTRICTS OF:**

<b>* a. Applicant</b> 01	<b>b. Program/Project:</b> Statewide
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Attach an additional list of Program/Project Congressional Districts if needed.

<b>14. FUNDING PERIOD:</b>		<b>15. ESTIMATED FUNDING:</b>	
<b>a. Start Date:</b> 10/01/2022	<b>b. End Date:</b> 09/30/2023	<b>* a. Federal (\$):</b> \$0	<b>b. Match (\$):</b> \$0
<b>* 16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?</b>			
a. This submission was made available to the State under the Executive Order 12372			
Process for Review on :			
b. Program is subject to E.O. 12372 but has not been selected by State for review.			
c. Program is not covered by E.O. 12372.			
<b>* 17. Is The Applicant Delinquent On Any Federal Debt?</b>			
<input type="radio"/> YES <input checked="" type="radio"/> NO			
<b>Explanation:</b>			
18. By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001) <b>**I Agree</b> <input checked="" type="checkbox"/>			
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.			
<b>18a. Typed or Printed Name and Title of Authorized Certifying Official</b>		<b>18c. Telephone (area code, number and extension)</b>	
		<b>18d. Email Address</b>	
<b>18b. Signature of Authorized Certifying Official</b> 		<b>18e. Date Report Submitted (Month, Day, Year)</b> 09/19/2022	
<b>Attach supporting documents as specified in agency instructions.</b>			

## Section 1 - Program Components

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

August 1987, revised 05/92,02/95,03/96,12/98,11/01  
OMB Clearance No.: 0970-0075  
Expiration Date: 12/31/2023

### 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: 12/31/2023

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)

I.1 Check which components you will operate under the LIHEAP program. (Note: You must provide information for each component designated here as requested elsewhere in this plan.)		Dates of Operation	
		Start Date	End Date
<input checked="" type="checkbox"/>	Heating assistance	10/01/2022	03/31/2023
<input checked="" type="checkbox"/>	Cooling assistance	06/01/2023	08/31/2023
<input checked="" type="checkbox"/>	Crisis assistance	10/01/2022	09/30/2023
<input checked="" type="checkbox"/>	Weatherization assistance	10/01/2022	09/30/2023

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

The Nebraska Department of Health and Human Services (DHHS) provides heating assistance to eligible households during the heating season (October through March).

- DHHS may determine a household's eligibility for heating assistance after the heating season if a household applied for/requested LIHEAP assistance during the heating season and eligibility was not determined, eligibility was incorrectly determined, or a household had a current application (a pending or active economic assistance program case) during the heating season and eligibility was not determined.
- DHHS may begin determining eligibility for heating assistance prior to the beginning of the heating season. If this occurs, heating assistance payments will not be issued until the beginning of the heating season. DHHS will make this decision based on operational and technical capabilities. Eligibility Staff will be notified via guidance if eligibility will be determined prior to the begin date for the heating season.

DHHS currently provides a year-round crisis assistance program. For each program year (October through September), DHHS accepts and processes applications and crisis assistance requests according to the earliest application date until DHHS determines that pending payments will exhaust available funds for the program year. Upon making this determination, DHHS will accept no more applications for crisis assistance for the program year.

DHHS contracts with the Nebraska Department of Environment and Energy (NDEE) to administer the weatherization assistance program.

The availability of the cooling assistance program and the variables used to determine eligible households will depend on the LIHEAP funding received and available for the current federal fiscal year. DHHS typically provides cooling assistance to eligible households during the cooling season (June through August).

- DHHS may determine a household's eligibility for cooling assistance after the cooling season in certain situations, such as eligibility for a timely application or request was not determined by the end of the cooling season, or eligibility was incorrectly determined.
- DHHS may determine a household's eligibility for cooling assistance prior to the beginning of the cooling season. If this occurs, cooling assistance payments will not be issued until the beginning of the cooling season. DHHS will make this decision based on operational and

technical capabilities. Eligibility staff will be notified via guidance if eligibility will be determined prior to the begin date for the cooling season.

For heating or cooling eligible households, an extra payment may be made in the form of a supplemental payment or an increase in the regular season's payment during the current energy year. The supplemental payments may be processed and issued at any time during the current LIHEAP program year (October through September). The need for a supplemental payment for households that received heating and/or cooling assistance may be identified during or following the heating or cooling season, as the reason for the supplemental issuance may be due to circumstances including but not limited to: high energy costs; extreme weather; disasters; pandemics; an excess or additional funding.

For example, a supplemental payment may be issued in September (or any month of the year) for LIHEAP eligible households that received heating assistance or for LIHEAP eligible households that received cooling assistance if it identified excess funds exist. Processing and issuing the supplemental payments late in the program year allows DHHS to more easily project the number of households that will receive the supplemental payment. These payments may be issued to either a provider or to the household. Supplemental payments are typically issued to the utility provider; however, below are some situations in which a supplemental payment would be issued to the household:

- The utility provider does not cooperate with DHHS in accepting payments; or,
- An economically vulnerable household's utilities are included in rent.

A copy of Nebraska's current LIHEAP regulations (Title 476) are attached. We are currently in the process of making regulation updates.

**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	58.00%
Cooling assistance	19.00%
Crisis assistance	2.00%
Weatherization assistance	10.00%
Carryover to the following federal fiscal year	2.00%
Administrative and planning costs	9.00%
Services to reduce home energy needs including needs assessment (Assurance 16)	0.00%
Used to develop and implement leveraging activities	0.00%
<b>TOTAL</b>	<b>100.00%</b>

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

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

<input type="checkbox"/>	Heating assistance	<input checked="" type="checkbox"/>	Cooling assistance
<input type="checkbox"/>	Weatherization assistance	<input checked="" type="checkbox"/>	<b>Other (specify:)</b> DHHS runs a year-round crisis assistance program at this time. DHHS provides year-round deposit assistance. DHHS may utilize additional funds for cooling assistance. DHHS may utilize additional funds for repair and replacement assistance. DHHS may utilize additional funds for window air conditioner assistance. DHHS may utilize additional funds for heating assistance for households that were eligible for heating assistance (within the rules of the program). DHHS may provide supplemental payments for heating and/or cooling eligible households depending on whether there are additional funds, disasters, pandemics, etc. DHHS may utilize additional funds for weatherization services.

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

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

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

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

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

If Yes, explain:

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

<b>SNAP Nominal Payments</b>	
1.7a Do you allocate LIHEAP funds toward a nominal payment for SNAP households? <input type="radio"/> Yes <input checked="" type="radio"/> No	
If you answered "Yes" to question 1.7a, you must provide a response to questions 1.7b, 1.7c, and 1.7d.	
1.7b Amount of Nominal Assistance: \$0.00	
1.7c Frequency of Assistance	
<input type="checkbox"/>	Once Per Year
<input type="checkbox"/>	Once every five years
<input type="checkbox"/>	Other - Describe:
1.7d How do you confirm that the household receiving a nominal payment has an energy cost or need?	
<b>Determination of Eligibility - Countable Income</b>	
1.8. In determining a household's income eligibility for LIHEAP, do you use gross income or net income ?	
<input checked="" type="checkbox"/>	Gross Income
<input type="checkbox"/>	Net Income
1.9. Select all the applicable forms of countable income used to determine a household's income eligibility for LIHEAP	
<input checked="" type="checkbox"/>	Wages
<input checked="" type="checkbox"/>	Self - Employment Income
<input checked="" type="checkbox"/>	Contract Income
<input type="checkbox"/>	Payments from mortgage or Sales Contracts
<input checked="" type="checkbox"/>	Unemployment insurance
<input checked="" type="checkbox"/>	Strike Pay
<input checked="" type="checkbox"/>	Social Security Administration (SSA ) benefits
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Including MediCare deduction
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Excluding MediCare deduction
<input checked="" type="checkbox"/>	Supplemental Security Income (SSI )
<input checked="" type="checkbox"/>	Retirement / pension benefits
<input type="checkbox"/>	General Assistance benefits
<input checked="" type="checkbox"/>	Temporary Assistance for Needy Families (TANF) benefits
<input type="checkbox"/>	Supplemental Nutrition Assistance Program (SNAP) benefits
<input type="checkbox"/>	Women, Infants, and Children Supplemental Nutrition Program (WIC) benefits
<input type="checkbox"/>	Loans that need to be repaid
<input checked="" type="checkbox"/>	Cash gifts
<input type="checkbox"/>	Savings account balance
<input type="checkbox"/>	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.

<input type="checkbox"/>	Jury duty compensation
<input checked="" type="checkbox"/>	Rental income
<input type="checkbox"/>	Income from employment through Workforce Investment Act (WIA)
<input type="checkbox"/>	Income from work study programs
<input checked="" type="checkbox"/>	Alimony
<input checked="" type="checkbox"/>	Child support
<input checked="" type="checkbox"/>	Interest, dividends, or royalties
<input checked="" type="checkbox"/>	Commissions
<input checked="" type="checkbox"/>	Legal settlements
<input checked="" type="checkbox"/>	Insurance payments made directly to the insured
<input type="checkbox"/>	Insurance payments made specifically for the repayment of a bill, debt, or estimate
<input checked="" type="checkbox"/>	Veterans Administration (VA) benefits
<input type="checkbox"/>	Earned income of a child under the age of 18
<input type="checkbox"/>	Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.
<input type="checkbox"/>	Income tax refunds
<input type="checkbox"/>	Stipends from senior companion programs, such as VISTA
<input checked="" type="checkbox"/>	Funds received by household for the care of a foster child
<input type="checkbox"/>	Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
<input checked="" type="checkbox"/>	Reimbursements (for mileage, gas, lodging, meals, etc.)
<input checked="" type="checkbox"/>	<p><b>Other</b></p> <p>For purposes of calculating and treating income for LIHEAP eligibility, DHHS applies the rules and regulations from the Supplemental Nutrition Assistance Program, Title 475 Nebraska Administrative Code (NAC).</p> <p>As a result, some of the aforementioned income types may be considered income in some circumstances but excluded as income in other circumstances. For example, the earned income of a child age 17 or younger and attending elementary or secondary school at least half-time is excluded. However, the income of a 16 or 17-year-old that is not attending school half-time must be counted. Some other examples include but are not limited to: General Assistance; VISTA; WIA; and reimbursements.</p> <p>DHHS does not deduct medical costs from gross income when determining eligibility. Thus, Medicare is not considered a deduction for LIHEAP. DHHS considers the gross amount of income a client is eligible for from Social Security to be countable unearned income, regardless of whether a portion of the Social Security is used to pay for a Medicare premium.</p> <p>DHHS applies an earned income disregard of 20% to gross countable earned income if a household passes the gross countable income test.</p> <p>Section 1.2: DHHS utilizes 10% of available funds for administrative and planning costs; however, a portion of the funds awarded to NDEE for weatherization are for administrative costs and planning costs. Thus, a portion of the expended administrative costs are considered in the amount for weatherization.</p>

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

## Section 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: 12/31/2023

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

### Section 2 - Heating Assistance

**Eligibility, 2605(b)(2) - Assurance 2**

**2.1 Designate the income eligibility threshold used for the heating component:**

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	HHS Poverty Guidelines	150.00%

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

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

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

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

- Renters?**  Yes  No
- Renters Living in subsidized housing ?**  Yes  No
- Renters with utilities included in the rent ?**  Yes  No

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

- Elderly?**  Yes  No
- Disabled?**  Yes  No
- Young children?**  Yes  No
- Households with high energy burdens ?**  Yes  No
- Other?**  Yes  No

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

For subsidized housing, the household must be responsible for a portion of the heating payment to be eligible for heating.

For renters with utilities included in the rent, the household must be responsible for a portion of the heating.

Eligibility and the benefit payment amount for heating assistance are determined based on factors such as income level, dwelling type, fuel type, and the number of household members. Thus, households with the lowest income receive the highest benefit amount.

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

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

DHHS reviews the household size, income, dwelling type, and the fuel type to determine the benefit payment amount. Households with the least income, receive a higher benefit payment amount.

See attached LIHEAP Heating Season Payment Table and LIHEAP Cooling Season Payment Table in the Low Income Home Energy Assistance Program (LIHEAP) Guidance Document 10.1.21.

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

- Income
- Family (household) size
- Home energy cost or need:
  - Fuel type
  - Climate/region
  - Individual bill
- Dwelling type



<input type="checkbox"/>	Energy burden (% of income spent on home energy)	
<input type="checkbox"/>	Energy need	
<input checked="" type="checkbox"/>	Other - Describe:	
<p>In the future, DHHS plans to utilize the previous season's LIHEAP Energy Burden data to evaluate whether the benefit levles are adequately reducing the energy burden for high energy burdened households.</p>		
<p><b>Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)</b></p>		
<p><b>2.6 Describe estimated benefit levels for the fiscal year for which this plan applies</b></p>		
<b>Minimum Benefit</b>	\$154	<b>Maximum Benefit</b>
		\$1,050
<p><b>2.7 Do you provide in-kind (e.g., blankets, space heaters) and/or other forms of benefits?</b> <input checked="" type="radio"/> Yes <input type="radio"/> No</p>		
<p><b>If yes, describe.</b></p>		
<p>2.6 The 2023 LIHEAP Heating Season Payment Table is attached in the LIHEAP Guidance Document 10.1.21. The amounts may be adjusted at the discretion of DHHS based upon a variety of factors, which could include but are not limited to: the amount of LIHEAP carry over funds; the amount of LIHEAP funds received for the program year; the projected number of households to be served; disasters; and pandemics.</p> <p>2.7 DHHS provides financial assistance for furnace (heating system) repair and replacement up to \$750 for eligible households. If extenuating circumstances exist, DHHS may exceed the \$750 maximum.</p>		
<p><b>If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.</b></p>		

## Section 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: 12/31/2023

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

### Section 3 - Cooling Assistance

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

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

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	HHS Poverty Guidelines	150.00%

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

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

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

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

<b>Renters?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>Renters Living in subsidized housing ?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Renters with utilities included in the rent ?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No

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

<b>Elderly?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Disabled?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>Young children?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Households with high energy burdens ?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Other? Medical necessity</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No

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

To qualify for cooling assistance, a household must qualify for LIHEAP and include a household member who is a child under age six who receives Aid to Dependent Children (ADC); is age 70 or older; has a severe illness or condition which is aggravated by extreme heat as verified by a medical statement signed by a licensed healthcare provider; or has received an air conditioner from DHHS within four years of the application date. Thus, DHHS gives priority to elderly individuals (70 and over), individuals with a severe illness or condition aggravated by extreme heat, and young children (5 years and under and ADC eligible) for cooling assistance purposes.

The medical necessity for cooling assistance is documented on the IM-55. A new IM-55 was implemented in 2020 to simplify and create a more efficient process. In 2021, an additional revision was made to the IM-55 to include an additional medical condition. In 2022, additional minor revisions were made to the form. See the attached IM-55 form.

For subsidized housing, the household must be responsible for a portion of the cooling utilities to be eligible for cooling.

For renters with utilities included in rent, the household must be responsible for a portion of the cooling utilities.

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

DHHS reviews the household size, income, and dwelling type to determine the benefit payment amount. Households with the least income receive higher benefit payment amounts. Additionally, as previously stated, to be eligible for cooling a household member must be age 70 or older; be a child under the age of six and receiving ADC; have received an air conditioner from DHHS within the four years of the application date; or have a severe illness or condition aggravated by extreme heat.

See the attached LIHEAP Heating Season Payment Table and LIHEAP Cooling Season Payment Table in the Low Income Home Energy Assistance Program (LIHEAP) Guidance Document 10.1.21.

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

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

<input checked="" type="checkbox"/>	Income
<input checked="" type="checkbox"/>	Family (household) size

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

The LIHEAP Cooling Season Payment Table (matrix) is subject to update later in the year (closer to the cooling season) depending on funding availability. The cooling season is June through August.

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

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

<b>Minimum Benefit</b>	\$273	<b>Maximum Benefit</b>	\$700
------------------------	-------	------------------------	-------

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

If yes, describe.

Fans are distributed through community action agencies with LIHEAP reimbursement for fans purchased and distributed. Expenditures for fans are included in the cooling assistance totals for reporting purposes. The receipt of a fan does not qualify a household for cooling assistance.

LIHEAP funds are utilized to provide financial assistance to households meeting the cooling assistance and other eligibility requirements to purchase window air conditioning units. In some instances, financial assistance is provided for a portable air conditioner rather than a stationary window air conditioner.

DHHS provides financial assistance to eligible households to assist with central air conditioner (cooling system) repair and replacement up to \$750. If extenuating circumstances exist, DHHS may exceed the \$750 maximum.

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

## Section 4 - CRISIS ASSISTANCE

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

August 1987, revised 05/92,02/95,03/96,12/98,11/01  
OMB Clearance No.: 0970-0075  
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### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

#### Section 4: CRISIS ASSISTANCE

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

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

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	HHS Poverty Guidelines	150.00%

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

DHHS defines a crisis situation as a household that is under immediate threat of loss of home energy because it has received a shutoff notice, had utilities discontinued, lacks energy service delivery, or anticipates removal from a provider's budget plan.

To qualify for crisis assistance, a household must be eligible for LIHEAP, be in a crisis situation, and have an unanticipated inability to pay home energy costs because within the most recent 90 days: the household experienced an unanticipated medical or household expense; a significant, permanent, and involuntary loss of work hours, wages, or employment; the departure of a primary wage earner; the inability of a primary wage earner to work because of illness or injury; or a significant loss because of the death of a household member. A household may also be eligible for an unspecified crisis related to a loss of income or inability to pay as determined at DHHS's discretion.

The criteria for crisis can be found at 476 NAC 2-004.01. Title 476 regulations are attached.

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

DHHS considers a crisis to be life-threatening if the household is experiencing loss of the ability to heat or cool their home and the household contains a member that: is frail (receives disability through the Social Security Administration/Social Security Income, Veteran's Administration, or other types of disability payment); has a medical condition aggravated by extreme heat or cold that is verified by a licensed medical provider; is elderly (60 or older); is a young child (under the age of 6 and does not have to be receiving Aid to Dependent Children); or must use a medical device that requires electricity.

**Crisis Requirement, 2604(c)**

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

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

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

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

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

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

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

**Elderly?**  Yes  No

**Disabled?**  Yes  No

**Young Children?**  Yes  No

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

**Other? Households with medical devices.**  Yes  No

**In Order to receive crisis assistance:**

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

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

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

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

received an eviction notice ?	
Must heating/cooling be medically necessary?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Must the household have non-working heating or cooling equipment?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Other? Dhhs considers anticipation of removal from a provider's budget plan to a crisis situation. DHHS also considers extenuating circumstances when determining eligibility for crisis assistance.	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Do you have additional / differing eligibility policies for:</b>	
Renters?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Renters living in subsidized housing?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Renters with utilities included in the rent?	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Explanations of policies for each "yes" checked above:</b>	
<p>A LIHEAP eligible household must be in a crisis situation, as per Title 476 NAC, to receive crisis assistance. A crisis situation is defined as a household that is under immediate threat of loss of home energy because it has received a shutoff notice, had utilities discontinued, lacks energy service delivery, or anticipates removal from a provider's budget plan. If the heating payment was issued to the household's utility provider and the crisis situation involves the heating source, the heating payment was utilized in full by the heating utility provider. Crisis assistance may also be requested for the cooling utility provider. Crisis assistance for the heating or cooling source may be requested year-round.</p> <p>If the household has a crisis situation, DHHS will determine whether the household has received a crisis payment in the same program year (October through September). If the household has not, DHHS determines whether the household meets the crisis criteria, as identified at 476 NAC 2-004. If the household meets the crisis criteria and all requested information is obtained, eligibility is determined. If the household does not meet the crisis eligibility criteria, DHHS determines whether the household has an unspecified crisis related to a loss of income or inability to pay that qualifies the household for crisis assistance. This is determined based on DHHS's discretion. If the household has already received a crisis payment and extenuating circumstances exist, per DHHS's discretion, the household may be eligible for crisis assistance.</p> <p>If the household qualifies for crisis assistance, DHHS makes crisis assistance payments for no more than the amount necessary to alleviate the crisis situation, up to \$500 per program year. In some instances, a household may be responsible for a portion of the payment before DHHS will pay the remainder of the amount needed to alleviate the crisis situation. The household may be responsible for a portion of the payment if the amount required to alleviate the crisis situation includes utilities that cannot be paid with LIHEAP funds. Additionally, if the amount required to alleviate the crisis situation exceeds \$500, the household may be responsible for a portion of the payment before DHHS will pay the remaining amount. If extenuating circumstances exist, per DHHS's discretion, DHHS may authorize a crisis assistance payment for more than \$500. When households are determined to be ineligible for a crisis payment, DHHS refers the household to another agency for potential assistance through other funding.</p> <p>DHHS may take into account the vulnerability of the household members when using discretion to determine whether an extenuating circumstance or an unspecified crisis-related reason for loss of income or an inability to pay applies. DHHS considers vulnerable household members to include the elderly, disabled, young children, those with high energy burdens, and those who require the energy source for essential medical devices. Thus, these populations may receive priority in this manner. DHHS also takes into account the household's income, ability to pay, and payment history for the most recent six months. This factors into what DHHS considers a "high energy burden". Households that are determined eligible, per DHHS's discretion, may be responsible for a portion of the bill before DHHS will pay the remainder of the amount needed to alleviate the shutoff, in some circumstances.</p> <p>For subsidized housing, the household must be responsible for a portion of the heating or cooling payment to be eligible for crisis assistance.</p> <p>If utilities are included in rent and there is an eviction notice, the eviction notice needs to be resolved prior to receiving crisis assistance through LIHEAP.</p>	
<b>Determination of Benefits</b>	
<b>4.8 How do you handle crisis situations?</b>	
<input checked="" type="checkbox"/>	Separate component
<input type="checkbox"/>	Fast Track
<input type="checkbox"/>	Other - Describe:
<b>4.9 If you have a separate component, how do you determine crisis assistance benefits?</b>	
<input checked="" type="checkbox"/>	Amount to resolve the crisis.
<input type="checkbox"/>	Other - Describe:
<p>For households eligible for crisis assistance, DHHS may provide financial assistance for no more than the amount necessary to alleviate the crisis situation, up to a maximum of \$500. If extenuating circumstances exist, per DHHS's discretion, DHHS may authorize a crisis assistance payment for more than \$500. Household's may also be required to pay a portion of the crisis prior to DHHS paying the remainder of the amount necessary to alleviate the crisis.</p>	
<b>Crisis Requirements, 2604(c)</b>	
<b>4.10 Do you accept applications for energy crisis assistance at sites that are geographically accessible to all households in the area to be served?</b>	
<input checked="" type="radio"/> Yes <input type="radio"/> No Explain.	
DHHS accepts online applications. Thus, households are able to apply for benefits from their homes. Households may also call DHHS's 1-	

800 number to request assistance. DHHS has the ability to take applications and requests via telephone.

**4.11 Do you provide individuals who are physically disabled the means to:**

**Submit applications for crisis benefits without leaving their homes?**

Yes  No If No, explain.

**Travel to the sites at which applications for crisis assistance are accepted?**

Yes  No If No, explain.

If you answered "No" to both options in question 4.11, please explain alternative means of intake to those who are homebound or physically disabled?

DHHS accepts online applications. In addition, households may also call the 1-800 number to request assistance. If the household has a pending or active LIHEAP program case, a new application is not needed. If the household does not have a pending or active LIHEAP program case but has a current application on file (pending or active economic assistance program case), a new application is not needed. If the household does not have a current application on file, DHHS can complete the application via telephone, can send an application via mail to the household, or can provide the website at which the household can complete the application online. Thus, individuals can submit applications or make LIHEAP requests without leaving their homes.

**Benefit Levels, 2605(c)(1)(B)**

**4.12 Indicate the maximum benefit for each type of crisis assistance offered.**

Winter Crisis	\$0.00 maximum benefit
Summer Crisis	\$0.00 maximum benefit
Year-round Crisis	\$500.00 maximum benefit

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

Yes  No If yes, Describe

4.12 - The maximum benefit for crisis assistance is \$500 unless extenuating circumstances exist. This is determined based on DHHS's discretion.

4.13 - DHHS provides deposit assistance and reconnection fee assistance to households meeting the eligibility criteria as identified at 476 NAC 2-004.04.

**4.14 Do you provide for equipment repair or replacement using crisis funds?**

Yes  No

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

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

	Winter Crisis	Summer Crisis	Year-round Crisis
Heating system repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heating system replacement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling system repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling system replacement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wood stove purchase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pellet stove purchase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solar panel(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utility poles / gas line hook-ups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Other (Specify):</b> DHHS does provide financial assistance with furnace (heating system) and central air conditioner (cooling system) repair and replacement up to \$750 for eligible households; however, this is not a function of the crisis assistance program. LIHEAP funds are also utilized for Weatherization to provide assistance with heating and cooling system repair and replacement; however, this is also separate from the crisis assistance program. DHHS provides eligible households with financial assistance to purchase window air conditioners upon request;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

however, this is not a function of the crisis assistance program either.			
<b>4.16 Do any of the utility vendors you work with enforce a moratorium on shut offs?</b>			
<input checked="" type="radio"/> Yes <input type="radio"/> No			
<b>If you responded "Yes" to question 4.16, you must respond to question 4.17.</b>			
<b>4.17 Describe the terms of the moratorium and any special dispensation received by LIHEAP clients during or after the moratorium period.</b>			
<p style="text-align: center;">Many of the utility providers in Nebraska have organization-specific guidelines regarding utility disconnection which account for factors, such as temperature, date (time of year), and emergency situations.</p>			
<p style="text-align: center;"><b>If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.</b></p>			

## Section 5 - WEATHERIZATION ASSISTANCE

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

August 1987, revised 05/92,02/95,03/96,12/98,11/01  
OMB Clearance No.: 0970-0075  
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### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

## Section 5: WEATHERIZATION ASSISTANCE

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

5.1 Designate the income eligibility threshold used for the Weatherization component

Add	Household Size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	HHS Poverty Guidelines	200.00%

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

5.3 If yes, name the agency. Nebraska Department of Environment and Energy

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

#### WEATHERIZATION - Types of Rules

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

- Entirely under LIHEAP (not DOE) rules
- Entirely under DOE WAP (not LIHEAP) rules
- Mostly under LIHEAP rules with the following DOE WAP rule(s) where LIHEAP and WAP rules differ (Check all that apply):
  - Income Threshold
  - Weatherization of entire multi-family housing structure is permitted if at least 66% of units (50% in 2- & 4-unit buildings) are eligible units or will become eligible within 180 days
  - Weatherize shelters temporarily housing primarily low income persons (excluding nursing homes, prisons, and similar institutional care facilities).
  - Other - Describe:
 

Weatherization is not subject to the NDEE WAP maximum health and safety cap. The NDEE NEAT (frame built/multi-family) and MHEA (mobile) audit tool approved by NDEE in June 2021 will be utilized to determine cost-effective measures that meet a savings to investment ratio of 1.0 or greater. NDEE guidance is used for this as described in the section of the attached WAP State Plan for July 1, 2022 through June 30, 2023.

Please see the attached Weatherization Program Bulletin regarding the procedures for augmenting LIHEAP and DOE funding.

Section 5.11 Information:

Weatherization operates a heating and cooling system repair and replacement assistance program that is separate from household weatherization.

In addition, there is the replacement of refrigerators, this is actually based on SIR.

The maximum income level for weatherization is 200% of the federal poverty level, which follows DOE rules. DOE rules are utilized for the purposes of calculating and treating income for weatherization.
- Mostly under DOE WAP rules, with the following LIHEAP rule(s) where LIHEAP and WAP rules differ (Check all that apply):
  - Income Threshold
  - Weatherization not subject to DOE WAP maximum statewide average cost per dwelling unit.
  - Weatherization measures are not subject to DOE Savings to Investment Ratio (SIR ) standards.
  - Other - Describe:

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

5.6 Do you require an assets test?  Yes  No



<b>5.7 Do you have additional/differing eligibility policies for :</b>	
Renters	<input checked="" type="radio"/> Yes <input type="radio"/> No
Renters living in subsidized housing?	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>5.8 Do you give priority in eligibility to:</b>	
Elderly?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Disabled?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Young Children?	<input checked="" type="radio"/> Yes <input type="radio"/> No
House holds with high energy burdens?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Other? High energy users	<input checked="" type="radio"/> Yes <input type="radio"/> No
<p>If you selected "Yes" for any of the options in questions 5.6, 5.7, or 5.8, you must provide further explanation of these policies in the text field below.</p> <p>5.6 NDEE sub-grantees get financial statements from clients to determine income eligibility. There is no resource test.</p> <p>5.7 Renters must have a landlord agreement to approve modifications to the household and to ensure the landlord will not raise the rent expense or sell the property in a 12-month period.</p> <p>5.8 These populations have a higher priority as weatherization services would be expedited to be completed prior to the households that do not contain these types of household members.</p> <p>NDEE gives priority to those that have high energy burden.</p>	
<b>Benefit Levels</b>	
5.9 Do you have a maximum LIHEAP weatherization benefit/expense per household? <input type="radio"/> Yes <input checked="" type="radio"/> No	
5.10 If yes, what is the maximum? \$0	
<b>Types of Assistance, 2605(c)(1), (B) &amp; (D)</b>	
5.11 What LIHEAP weatherization measures do you provide ? (Check all categories that apply.)	
<input checked="" type="checkbox"/> Weatherization needs assessments/audits	<input checked="" type="checkbox"/> Energy related roof repair
<input checked="" type="checkbox"/> Caulking and insulation	<input type="checkbox"/> Major appliance Repairs
<input checked="" type="checkbox"/> Storm windows	<input checked="" type="checkbox"/> Major appliance replacement
<input checked="" type="checkbox"/> Furnace/heating system modifications/ repairs	<input checked="" type="checkbox"/> Windows/sliding glass doors
<input checked="" type="checkbox"/> Furnace replacement	<input checked="" type="checkbox"/> Doors
<input checked="" type="checkbox"/> Cooling system modifications/ repairs	<input checked="" type="checkbox"/> Water Heater
<input type="checkbox"/> Water conservation measures	<input checked="" type="checkbox"/> Cooling system replacement
<input checked="" type="checkbox"/> Compact florescent light bulbs	<input checked="" type="checkbox"/> Other - Describe: Air Ventilation, Carbon Monoxide Detectors, LED Lighting, Fire Alarms, Smoke Detectors, and Health and Safety Measures
<p><b>If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.</b></p>	

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

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

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

**Section 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):

Nebraska has Community Support Specialists that work with community organizations, including the community action agencies, and clients to provide information and updates regarding LIHEAP. The Community Support Specialists attend different functions in the communities and set up booths for people to make applications, as well as to provide information to the public.

Energy providers also reach out to Nebraska residents with energy assistance needs. DHHS developed and provided flyers to partnering utility providers to distribute to their customers.

ACCESSNebraska has a website to inform the public of the program. Applications can be submitted via this website, as well. In addition, DHHS utilizes one application for all economic assistance programs. Thus, when a client applies for one program he or she is made aware of all available programs on the application.

LIHEAP Program Staff actively provide updates to various divisions and agencies within the State of Nebraska, as well as to community agencies. Below are some of the meetings the LIHEAP Program Staff facilitate or participate in to share and obtain information.: Executive Directors of the Community Action Agencies and Community Action of Nebraska meetings; monthly meetings with Community Action of Nebraska; monthly meetings with NDEE; regular meetings with Continuum of Care leadership and homeless service providers; Connect the Dots meeting; Statewide Central Navigation meetings (which include representatives from both government and community action agencies); Nebraska Partner Council meetings; Eligibility Operations meetings; Economic Assistance Program Management Meetings; and utility provider meetings.

LIHEAP staff provide updates throughout the year to energy utility providers via e-mail.

LIHEAP utilizes text messaging to inform prior recipients of the need to apply for or request assistance when the new LIHEAP season begins.

LIHEAP-specific information is provided on the automated message of the ACCESSNebraska phone line at the beginning of the program year, as well as on the ACCESSNebraska website banner.

Information regarding LIHEAP is shared on social media.

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

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

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

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SF - 424 - MANDATORY**

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

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

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

DHHS administers all low-income programs within the same unit through ACCESSNebraska. Households can complete one application to request all of the economic assistance programs offered.

DHHS also sends a list of all currently eligible LIHEAP households to the Weatherization Program Staff, as a referral for Weatherization.

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

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

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

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

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

<input checked="" type="checkbox"/>	Administration Agency
<input type="checkbox"/>	Commerce Agency
<input type="checkbox"/>	Community Services Agency
<input type="checkbox"/>	Energy / Environment Agency
<input type="checkbox"/>	Housing Agency
<input checked="" type="checkbox"/>	Welfare Agency
<input type="checkbox"/>	Other - Describe:

**Alternate Outreach and Intake, 2605(b)(15) - Assurance 15**

**If you selected "Welfare Agency" in question 8.1, you must complete questions 8.2, 8.3, and 8.4, as applicable.**

**8.2 How do you provide alternate outreach and intake for HEATING ASSISTANCE?**

DHHS administers low-income programs. Individuals can apply for economic assistance programs on one application. If an application is on file and is current (pending or active economic assistance program case), a new application is not required for LIHEAP.

Either prior to or during the heating season, the eligibility system (NFOCUS) conducts a "mass run" to determine eligibility for heating assistance for households the system identifies as having met the pre-determined eligibility factors.

In addition, LIHEAP Program Staff communicate regularly with home energy utility providers, community service providers, community action agencies, and other government departments to provide updated information.

DHHS provides updates on the public website and the ACCESSNebraska phone system throughout the year.

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

DHHS administers low-income programs. Individuals can apply for all economic assistance programs on one application. If an application is on file and is current (pending or active economic assistance program case, including LIHEAP), a new application is not required.

Either prior to or during the cooling season, the eligibility system (NFOCUS) conducts a "mass run" to determine eligibility for cooling assistance for households the system identifies as having met the pre-determined eligibility factors.

In addition, the LIHEAP Program Staff communicate regularly with home energy utility providers, community service providers, community action agencies, and other government departments to provide updated information.

DHHS provides updates on the public website and the ACCESSNebraska phone system throughout the year.

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

DHHS administers low-income programs. Individuals can apply for economic assistance programs on one application. A household can verbally request crisis assistance if a current application is on file (pending or active economic assistance program case). If the household does not have a current application on file (pending or active economic assistance program case, including LIHEAP), an application is required. A paper, online, or telephone application can be completed. An application can be completed to apply for multiple economic assistance programs or an application specific to LIHEAP can be completed (see attached).

In addition, LIHEAP Program Staff communicate regularly with home energy utility providers, community service providers, community action agencies, and other government departments to provide updated information.

DHHS provides updates on the public website and the ACCESSNebraska phone system throughout the year.

8.5 LIHEAP Component Administration.	Heating	Cooling	Crisis	Weatherization
8.5a Who determines client eligibility?	State Administration Agency State Welfare Agency	State Administration Agency State Welfare Agency	State Administration Agency State Welfare Agency	Community Action Agencies Non-profits
8.5b Who processes benefit payments to gas and electric vendors?	State Administration Agency State Welfare Agency	State Administration Agency State Welfare Agency	State Administration Agency State Welfare Agency	
8.5c who processes benefit payments to bulk fuel vendors?	State Administration Agency State Welfare Agency	State Administration Agency State Welfare Agency	State Administration Agency State Welfare Agency	
8.5d Who performs installation of weatherization measures?				Community Action Agencies Non-profits

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

8.6 What is your process for selecting local administering agencies?

LIHEAP is administered by the state office, DHHS, in Nebraska. The state office accepts applications, determines eligibility, and issues LIHEAP payments. No other agencies determine LIHEAP eligibility for Nebraska households.

Weatherization is administered through NDEE. This is the only agency that DHHS has contracted with to administer the weatherization component of LIHEAP. NDEE contracts with eight of the nine community action agencies in Nebraska and a non-profit agency (Habitat for Humanity) to perform the actual weatherization components. Since NDEE has contracts with these agencies and the resources to conduct the training and technical assistance, at this time, it reduces the duplication of work between the two state agencies.

8.7 How many local administering agencies do you use? 1

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

- Yes  
 No

8.9 If so, why?

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

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

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

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

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

**9.1 Do you make payments directly to home energy suppliers?**

Heating       Yes    No

Cooling       Yes    No

Crisis       Yes    No

Are there exceptions?    Yes    No

If yes, Describe.

DHHS issues the majority of LIHEAP payments directly to providers. However, some exceptions to paying the provider are identified below:

- Providers that do not cooperate with DHHS in accepting payments;
- Households whose utilities are included in rent but still meet economic vulnerability; and,
- Financial assistance for window air conditioners, furnace (heating system) repair or replacement, and central air conditioner (cooling system) repair or replacement.

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

A notice is generated by the NFOCUS eligibility system and sent to the household (see attached client notice of action) within one day of benefit determination. The household can also view the notice electronically by creating a 'My Account' on the State ACCESSNebraska website. Additionally, the provider that is receiving the payment is emailed an explanation of payment document. This ensures payments are made to the correct account for clients.

**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?**

Provider agreements are signed by all providers that receive direct payments from DHHS, which requires that the provider apply the payment amount appropriately.

See attached provider agreement.

DHHS is working on a revised LIHEAP Provider Agreement for home energy suppliers throughout Nebraska. The goal is to implement this agreement in FFY 2023. DHHS is developing a Provider Guidance Document to provide clarification of LIHEAP provider policies and procedures.

**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?**

A provider agreement is executed (copy attached) to assure that the LIHEAP households are treated in the same manner as private pay customers and to assure the utility supplier will comply with state statutes in regards to provisions and termination of utility services.

The LIHEAP Program Staff follow up on any complaints of adverse treatment by energy suppliers when reported. There are also reviews of LIHEAP payments submitted to home energy suppliers completed weekly.

DHHS is working on a revised LIHEAP Provider Agreement for home energy suppliers.

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

Yes  No

If so, describe the measures unregulated vendors may take.

Unregulated vendors also sign the aforementioned provider agreement.

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

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

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

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

LIHEAP expenditures are accounted for in Nebraska's Enterprise-One (E1) accounting system. Eligibility and authorization services are entered and tracked through the NFOCUS system. NFOCUS interfaces with E1 to issue payments.

Additionally, LIHEAP Staff have monthly meetings with the financial services unit and with NDEE to discuss and track LIHEAP funds.

E1 tracks LIHEAP funds (including funds awarded to NDEE) that are expended within the program year to ensure funds are not overspent. Refunds are tracked through On-Base using subsidiary codes. Subsidiary codes are also utilized for other components, such as: heating; cooling; crisis; deposit; and repair and replacement. This is also tracked via NFOCUS.

The DHHS Economic Assistance Program Accuracy Specialist Team tests a sample of LIHEAP Payments daily to ensure LIHEAP funds are expended according to State and Federal Regulations.

**Audit Process**

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

Yes  No

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

No Findings

Finding	Type	Brief Summary	Resolved?	Action Taken
1	other	DHHS lacked adequate procedures to ensure that LIHEAP applicants met eligibility requirements prior to issuing aid payments. DHHS also lacked adequate procedures to ensure the amount of aid provided was accurate and complied with rules and regulations.	In Progress	procedure/policy changes
2	reporting	DHHS lacked adequate procedures to ensure that required Federal Funding Accountability and Transparency Act (FFATA) reports were submitted, and program information reported was complete and accurate.	In Progress	procedure/policy changes

**10.4. Audits of Local Administering Agencies**

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

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

**Compliance Monitoring**

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

Grantee employees:



<input checked="" type="checkbox"/> Internal program review
<input checked="" type="checkbox"/> Departmental oversight
<input checked="" type="checkbox"/> Secondary review of invoices and payments
<input type="checkbox"/> Other program review mechanisms are in place. Describe:
DHHS is the grantee administering agency. DHHS strives to comply with federal laws and regulations. The DHHS Economic Assistance Program Accuracy Team completes reviews of a sample of payments to ensure compliance with Federal and State LIHEAP regulations, policies, and procedures. This team also completes reviews of LIHEAP eligibility determinations to ensure compliance with Federal and State regulations, policies, and procedures.
<b>Local Administering Agencies / District Offices:</b>
<input type="checkbox"/> On - site evaluation
<input type="checkbox"/> Annual program review
<input type="checkbox"/> Monitoring through central database
<input type="checkbox"/> Desk reviews
<input type="checkbox"/> Client File Testing / Sampling
<input checked="" type="checkbox"/> Other program review mechanisms are in place. Describe:
DHHS does not utilize a local administering agency or district office to distribute funds to eligible households.
<b>10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.</b>
DHHS does not utilize a local administering agency or district office to distribute funds to eligible households.
<b>10.7. Describe how you select local agencies for monitoring reviews.</b>
<b>Site Visits:</b> NDEE conducts reviews and provides oversight of the agencies that are contracted for weatherization services.
<b>Desk Reviews:</b> DHHS does not utilize a local administering agency to district office to distribute to eligible households.
<b>10.8. How often is each local agency monitored ?</b>
DHHS does not utilize a local administering agency to district office to distribute to eligible households.
<b>10.9. What is the combined error rate for eligibility determinations? OPTIONAL</b>
<b>10.10. What is the combined error rate for benefit determinations? OPTIONAL</b>
<b>10.11. How many local agencies are currently on corrective action plans for eligibility and/or benefit determination issues? 0</b>
<b>10.12. How many local agencies are currently on corrective action plans for financial accounting or administrative issues? 0</b>
<b>If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.</b>

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

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**Section 11: Timely and Meaningful Public Participation, 2605(b)(12), 2605(C)(2)**

**11.1 How did you obtain input from the public in the development of your LIHEAP plan?  
 Select all that apply.**

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

A press release was issued on social media informing of the LIHEAP State Plan public comment period. The notice for the public comment period and the hearing were posted on the public website. The notice for the public comment period and the hearing were sent out in the two largest newspapers in Nebraska (Omaha World Herald and Lincoln Journal Star). The notice for the public comment period and the hearing was emailed to partnering utility providers, partnering agencies, and community agencies. Please see attached LIHEAP State Plan Hearing Affidavit.

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

Nebraska received questions/comments from one organization regarding the state plan. The comments/questions addressed the following:

- Applications for LIHEAP should be approved in any month;
- Income determinations should utilize net income following medical expense deductions;
- Assurance 16 should be utilized to employ creative strategies to reduce energy burdens;
- LIHEAP should review, record, and publish error rates for eligibility decisions and benefit amounts;
- LIHEAP should increase outreach; and,
- The crisis assistance budget should not be reduced by 1%.

Nebraska has not implemented changes based upon the received comments, at this time. Nebraska will review the program and the received comments.

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

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

	Date	Event Description
1	08/15/2022	The public hearing was held at 10am Central Time in the Nebraska State Office Building at 301 Centennial Mall South Lincoln, NE. Participants were also able to call in to attend the hearing.

**11.4. How many parties commented on your plan at the hearing(s)?** 0

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

No comments were received at the hearing.

**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 no comments suggesting changes were received.

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

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

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

**12.1 How many fair hearings did the grantee have in the prior Federal fiscal year?** 14

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

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

A total of fourteen LIHEAP appeal decisions were made from 10/1/2021 through 5/25/2022. Four of the appeals resulted in the action of DHHS being affirmed. Ten of the appeals resulted in a dismissal. This number may change if additional appeal decisions are received between 5/26/2022 and 9/30/2022.

No policy or procedural changes have been made as a result of fair hearings, at this time.

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

Households must request an appeal in writing. DHHS utilizes form DA-6 (attached) for this. A fair hearing is held unless the situation can be alleviated prior to the hearing. Attached is the ACCESSNebraska Economic Assistance Guide for Client Appeals, which outlines the steps to the fair hearing process.

Note: Clients who are not satisfied with the determination on their application may also request an informal conference.

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

Applicants are informed of their rights to a fair hearing on the application forms utilized to determine LIHEAP benefits. See the attached EA-117 (paper application for economic assistance programs).

The EA-117, economic assistance recertification application (EA-RA), telephone application, and electronic application (E-app) are different types of applications utilized for multiple economic assistance programs, including LIHEAP. Each of these applications provides information regarding fair hearings that is similar to the language displayed on the attached EA-117. The EA-117 states, "If you disagree with any action taken by the Nebraska Department of Health and Human Services (DHHS) which affects your benefits, you may request a fair hearing in writing. Fair hearing for SNAP can be requested verbally by contacting DHHS. You may continue to receive your current level of assistance until a hearing decision is made IF (1) DHHS receives your request for a hearing within in 10 days from the mail date listed on the agency notice, and (2) for SNAP benefits only, your certification period has not expired. A fair hearing request must be made within 90 days of the action or inaction. You or your representative have the right to examine your case record. At the hearing, you may represent yourself or be represented by another person".

The notice of action that is sent to the client also contains the right to appeal information (see attached NFOCUS Notice).

In addition, Title 465 NAC also provides fair hearing information (see attached).

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

**The fair hearing procedures for failure to act with reasonable promptness are the same as those described for denials.**

**If an application is not acted on in a timely manner, it could result in a need for additional crisis assistance to remedy the household's situation. The timeliness of LIHEAP eligibility determinations is monitored by Economic Assistance Administration, the LIHEAP Program Unit, and Supervisors.**

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

Applicants are informed of the right to a fair hearing/the right to appeal in Title 465 NAC, on the application, and on the notice of action. For telephone applications, the rights and responsibilities are reviewed when the telephone application is completed.

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

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

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

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

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

DHHS does not utilize LIHEAP funds for Assurance 16, at this time.

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

DHHS does not utilize LIHEAP funds for Assurance 16, at this time.

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

DHHS does not utilize LIHEAP funds for Assurance 16, at this time.

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

DHHS does not utilize LIHEAP funds for Assurance 16, at this time.

13.5 How many households applied for these services? DHHS does not utilize LIHEAP funds for Assurance 16, at this time.

13.6 How many households received these services? DHHS does not utilize LIHEAP funds for Assurance 16, at this time.

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

**Section 14 - Leveraging Incentive Program ,2607A**

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

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

Yes  No

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

DHHS does not plan to submit an application for the leveraging incentive program.

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

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

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

## Section 15 - Training

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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: New hires receive LIHEAP training.

Employees are provided with policy manual

Other-Describe:

Refresher trainings can be conducted when needed. DHHS has an information sharing website that has helpful material available for staff to review when questions arise and for training needs. The LIHEAP Program Unit creates and maintains help tools and desk aids for staff to accurately and efficiently determine eligibility for LIHEAP households. The LIHEAP Program Unit creates and distributes policy and informational memos when needed.

**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

DHHS has some refreshers for workers to utilize. The LIHEAP Program Unit participates in statewide meetings to provide updated policy and procedure information regarding LIHEAP throughout the program year.

**c. Vendors**

Formal training conference

How often?

Annually

Biannually

As needed

Other - Describe:



Policies communicated through vendor agreements

Policies are outlined in a vendor manual

Other - Describe:

The LIHEAP Program Unit is creating a Provider Agreement Guide. LIHEAP is using a vendor manual for the LIHEAP Performance Measures to provide information on how to submit household energy consumption data (attached). LIHEAP Staff send emails to utility vendors to provide updated information throughout the year. In addition, LIHEAP Staff conduct meetings with utility vendors as needed. The LIHEAP Program Unit created a Performance Measures PowerPoint Presentation and held three separate trainings for partnering utility providers at the end of the federal fiscal year 2021 (FFY 2021). LIHEAP Staff plans to provide this training again in FFY 2022.

15.2 Does your training program address fraud reporting and prevention?

Yes

No

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

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

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

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

DHHS started collecting client energy usage from vendors in October 2016. Each year a data collection table is sent to all Nebraska utility vendors that have an agreement with DHHS. These utility vendors provide the requested energy consumption data for LIHEAP clients. DHHS issues a LIHEAP Performance Measures Handbook to vendors annually in an effort to receive accurate data and to continue to obtain increased participation. DHHS received a return rate of 99.68% for FFY 2021. In FFY 2023, DHHS will implement additional data reviews in order to better identify data outliers. This should assist in obtaining more accurate data. Attached is the guide provided to LIHEAP vendors throughout the State.

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

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

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

**17.1 Fraud Reporting Mechanisms**

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

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

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

- Printed outreach materials
- Addressed on LIHEAP application
- Website
- Other - Describe:  
  
Application and notice address the need to provide truthful and accurate information. An overpayment guide provides guidance for DHHS staff in regards to how to make a fraud referral.

**17.2. Identification Documentation Requirements**

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

Type of Identification Collected	Collected from Whom?						
		Applicant Only	Applicant Only	All Adults in Household	All Adults in Household	All Household Members	All Household Members
Social Security Card is photocopied and retained	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	
	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	
Social Security Number (Without actual Card)	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	<input checked="" type="checkbox"/>	Required	
	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	
Government-issued identification card (i.e.: driver's license, state ID, Tribal ID, passport, etc.)	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	
	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	
Other		Applicant Only	Applicant Only	All Adults in	All Adults in	All Household	All Household

		Required	Requested	Household Required	Household Requested	Members Required	Members Requested
1	Nebraska LIHEAP does not require verification of identity. DHHS accepts declaration of identity. DHHS requires client declaration of social security numbers, and the NFOCUS eligibility system interfaces with the Social Security Administration to validate the information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

b. Describe any exceptions to the above policies.

**17.3 Identification Verification**

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

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

**17.4. Citizenship/Legal Residency Verification**

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

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

Client attestation/declaration of citizenship is accepted, unless the information received is questionable. Verification of immigration status is required for non-citizens. LIHEAP applies the regulations for the Supplemental Nutrition Assistance Program (Title 475 NAC) in regards to citizenship and legal residency.

**17.5. Income Verification**

What methods does your agency utilize to verify household income? Select all that apply.

- Require documentation of income for all adult household members
- Pay stubs
- Social Security award letters
- Bank statements
- Tax statements
- Zero-income statements
- Unemployment Insurance letters
- Other - Describe:

DHHS requires self-employed individuals to provide a current tax return or ledgers that will provide income and expenses. DHHS utilizes collateral contacts directly to employers or the source of earned and unearned income to obtain verification of income. DHHS also utilizes the Work Number to verify earned income. DHHS utilizes award letters and income statements from organizations regarding unearned income.

<input checked="" type="checkbox"/> <b>Computer data matches:</b>
<input checked="" type="checkbox"/> <b>Income information matched against state computer system (e.g., SNAP, TANF)</b>
<input checked="" type="checkbox"/> <b>Proof of unemployment benefits verified with state Department of Labor</b>
<input checked="" type="checkbox"/> <b>Social Security income verified with SSA</b>
<input checked="" type="checkbox"/> <b>Utilize state directory of new hires</b>
<input checked="" type="checkbox"/> <b>Other - Describe:</b> DHHS also has a data match with Child Support Enforcement. Some of the aforementioned data matches require additional verification as the information received is considered a lead only.
<b>17.6. Protection of Privacy and Confidentiality</b>
<b>Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.</b>
<input checked="" type="checkbox"/> <b>Policy in place prohibiting release of information without written consent</b>
<input checked="" type="checkbox"/> <b>Grantee LIHEAP database includes privacy/confidentiality safeguards</b>
<input checked="" type="checkbox"/> <b>Employee training on confidentiality for:</b>
<input checked="" type="checkbox"/> <b>Grantee employees</b>
<input type="checkbox"/> <b>Local agencies/district offices</b>
<input checked="" type="checkbox"/> <b>Employees must sign confidentiality agreement</b>
<input checked="" type="checkbox"/> <b>Grantee employees</b>
<input type="checkbox"/> <b>Local agencies/district offices</b>
<input checked="" type="checkbox"/> <b>Physical files are stored in a secure location</b>
<input checked="" type="checkbox"/> <b>Other - Describe:</b> DHHS utilizes a release of information, signed by the household, to obtain information for the household from outside sources.
<b>17.7. Verifying the Authenticity</b>
<b>What policies are in place for verifying vendor authenticity? Select all that apply.</b>
<input checked="" type="checkbox"/> <b>All vendors must register with the State/Tribe.</b>
<input type="checkbox"/> <b>All vendors must supply a valid SSN or TIN/W-9 form</b>
<input type="checkbox"/> <b>Vendors are verified through energy bills provided by the household</b>
<input type="checkbox"/> <b>Grantee and/or local agencies/district offices perform physical monitoring of vendors</b>
<input checked="" type="checkbox"/> <b>Other - Describe and note any exceptions to policies above:</b> DHHS must verify the account name and account number through submission of the actual billing statement or verification from the utility provider. DHHS only makes payments to utility vendors that have signed the provider agreement with DHHS. Nebraska performs payment reviews to ensure payments are being made to vendors correctly. Nebraska reviews vendor refund information from utility vendors and addresses any vendor complaints from LIHEAP households.
<b>17.8. Benefits Policy - Gas and Electric Utilities</b>
<b>What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.</b>
<input checked="" type="checkbox"/> <b>Applicants required to submit proof of physical residency</b>
<input checked="" type="checkbox"/> <b>Applicants must submit current utility bill</b>
<input checked="" type="checkbox"/> <b>Data exchange with utilities that verifies:</b>
<input checked="" type="checkbox"/> <b>Account ownership</b>
<input checked="" type="checkbox"/> <b>Consumption</b>
<input checked="" type="checkbox"/> <b>Balances</b>
<input checked="" type="checkbox"/> <b>Payment history</b>
<input type="checkbox"/> <b>Account is properly credited with benefit</b>
<input checked="" type="checkbox"/> <b>Other - Describe:</b> Verification of physical residency is required if questionable. Households must submit current utility bills to verify account information or

the account information must be obtained from the utility provider.
<input checked="" type="checkbox"/> Centralized computer system/database tracks payments to all utilities
<input checked="" type="checkbox"/> Centralized computer system automatically generates benefit level
<input type="checkbox"/> Separation of duties between intake and payment approval
<input type="checkbox"/> Payments coordinated among other energy assistance programs to avoid duplication of payments
<input checked="" type="checkbox"/> Payments to utilities and invoices from utilities are reviewed for accuracy
<input checked="" type="checkbox"/> Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities
<input checked="" type="checkbox"/> Direct payment to households are made in limited cases only
<input checked="" type="checkbox"/> Procedures are in place to require prompt refunds from utilities in cases of account closure
<input checked="" type="checkbox"/> Vendor agreements specify requirements selected above, and provide enforcement mechanism
<input checked="" type="checkbox"/> Other - Describe: See attached provider agreement.
<b>17.9. Benefits Policy - Bulk Fuel Vendors</b>
What procedures are in place for averting fraud and improper payments when dealing with bulk fuel suppliers of heating oil, propane, wood, and other bulk fuel vendors? Select all that apply.
<input checked="" type="checkbox"/> Vendors are checked against an approved vendors list
<input checked="" type="checkbox"/> Centralized computer system/database is used to track payments to all vendors
<input checked="" type="checkbox"/> Clients are relied on for reports of non-delivery or partial delivery
<input type="checkbox"/> Two-party checks are issued naming client and vendor
<input checked="" type="checkbox"/> Direct payment to households are made in limited cases only
<input type="checkbox"/> Vendors are only paid once they provide a delivery receipt signed by the client
<input type="checkbox"/> Conduct monitoring of bulk fuel vendors
<input type="checkbox"/> Bulk fuel vendors are required to submit reports to the Grantee
<input checked="" type="checkbox"/> Vendor agreements specify requirements selected above, and provide enforcement mechanism
<input checked="" type="checkbox"/> Other - Describe: See attached provider agreement.
<b>17.10. Investigations and Prosecutions</b>
Describe the Grantee's procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients/staff/vendors found to have committed fraud. Select all that apply.
<input type="checkbox"/> Refer to state Inspector General
<input type="checkbox"/> Refer to local prosecutor or state Attorney General
<input type="checkbox"/> Refer to US DHHS Inspector General (including referral to OIG hotline)
<input checked="" type="checkbox"/> Local agencies/district offices or Grantee conduct investigation of fraud complaints from public
<input checked="" type="checkbox"/> Grantee attempts collection of improper payments. If so, describe the recoupment process  DHHS currently works with utility providers to collect improper payments when possible. The provider returns funds directly to DHHS.  DHHS withholds future benefits to LIHEAP households when the household has intentionally caused an inaccurate payment of LIHEAP heating, cooling, crisis, or repair and replacement assistance.  DHHS imposes a sanction for intentional program violations (IPV), which would include fraud on our NFOCUS eligibility system. DHHS tracks the individuals with overpayments to withhold benefits they would have normally received until the overpayment has been depleted.  LIHEAP overpayments are not collected on agency-caused errors, per Title 476 NAC. DHHS does not take action to collect on any overpayments less than \$100.
<input checked="" type="checkbox"/> Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned? For the first IPV, the individual is ineligible for the remainder of the program year and the next full program year. For the second IPV, the individual is ineligible for the remainder of the program year and the next three full program years. For the third IPV, the individual is permanently ineligible.
<input type="checkbox"/> Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated
<input checked="" type="checkbox"/> Vendors found to have committed fraud may no longer participate in LIHEAP
<input checked="" type="checkbox"/> Other - Describe:

Grantee employees who commit fraud will be reprimanded. This may include termination and the possibility of prosecution.

Clients who commit fraud will be sanctioned. Overpayment and IPV requirements are in the Title 476 NAC at 1-004.01, 1-004.10, 1-004.12, 1-004.13, 2-002.03(C), 2-004.02(B), 2-004.02(C), and 3-004.02

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

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

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

**Instructions for Certification**

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

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

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

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

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

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

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

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



voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

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

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

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

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

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

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

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

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

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

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

#### **Instructions for Certification**

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

2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later

determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

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

5. The prospective lower tier participant agrees by submitting this proposal that, [[Page 33043]] should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

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

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

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

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

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

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

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

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

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

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

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

1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.
2. The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
3. For grantees other than individuals, Alternate I applies.
4. For grantees who are individuals, Alternate II applies.
5. Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.
6. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).
7. If the workplace identified to the agency changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph five).
8. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

**Controlled substance** means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15);

**Conviction** means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

**Criminal drug statute** means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

**Employee** means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All direct charge employees; (ii) All indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) Temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

#### **Certification Regarding Drug-Free Workplace Requirements**

##### **Alternate I. (Grantees Other Than Individuals)**

The grantee certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an ongoing drug-free awareness program to inform employees about --

(1) The dangers of drug abuse in the workplace;

(2) The grantee's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

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

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

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

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

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

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

number(s) of each affected grant;  
 (f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted -(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or  
 (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;  
 (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).  
 (B) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

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

301 Centennial Mall South * <b>Address Line 1</b>		
Address Line 2		
Address Line 3		
Lincoln * <b>City</b>	NE * <b>State</b>	68508 * <b>Zip Code</b>

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

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

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

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

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

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

Section 20: Certification Regarding Lobbying

Section 20: Certification Regarding Lobbying

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

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

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

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

Statement for Loan Guarantees and Loan Insurance

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

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

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

## Assurances

### Assurances

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**(4) coordinate its activities under this title with similar and related programs administered by the Federal Government and such State, particularly low-income**



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

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

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

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

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

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

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

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

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

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

**(8) provide assurances that,**

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

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

**(9) provide that--**

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

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

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

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

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

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

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

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

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

**(16) use up to 5 percent of such funds, at its option, to provide services that encourage and enable households to reduce their home energy needs and**

**thereby the need for energy assistance, including needs assessments, counseling, and assistance with energy vendors, and report to the Secretary concerning the impact of such activities on the number of households served, the level of direct benefits provided to those households, and the number of households that remain unserved.**

## Plan Attachments

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