



AUG 08 2018

**United States
Department of
Agriculture**

Food and
Nutrition
Service

Northeast Region

10 Causeway St.
Room 501
Boston, MA 02222

Courtney Hawkins, Director
Department of Human Services
Louis Pasteur Building
57 Howard Avenue
Cranston, RI 02920

Dear Director Hawkins:

Enclosed is the Federal Fiscal Year (FFY) 2018 Food and Nutrition Service (FNS) combined review report on Supplemental Nutrition Assistance Program (SNAP) operations of the Rhode Island (RI) Department of Human Services (DHS). The combined review consisted of a Local Program Access Review (LPAR) and State Program Access Review (SPAR).

Onsite review activities were conducted at the Providence Local Office from March 26, 2018 to March 30, 2018. An exit conference was held on March 30th.

The enclosed report contains a formal assessment of program operations with a summary of work, findings and required corrective actions, observations, and suggestions. This report identifies corrective actions that must be implemented within 60 days to meet regulatory requirements per 7 Code of Federal Regulations 275.3 and 275.17.

Please find attached the Corrective Action Response (CAR) Tool. This must be completed for each finding and submitted to this office within 60 days from the date of this letter. The CAR Tool must outline specific corrective action steps that are proposed or that have been implemented and identify any long range corrective actions.

In addition to the new findings resulting from the FFY 2018 LPAR and SPAR, this correspondence also serves as FNS' response to the CAP submitted to FNS on March 27, 2018 for the FFY 2017 LPAR and SPAR conducted in June 2017. Although there were three new findings in the FFY 2018 review, many other findings observed in FFY 2017 were identified again during this review. These findings still require corrective action, and are listed as open findings in this report. Most open findings will be transitioned to the Semi-Annual CAP that will be due November 1, 2018. Please note that open findings from prior reviews must be addressed immediately to avoid further escalation. If you require technical assistance my staff is available to assist you.

The following findings are now considered closed by FNS:

- Finding LPAR17.3: Case file documentation does not support eligibility decisions and benefit-level determinations; and
- Finding SPAR15.1: Notice of Required Verification does not conform to Federal regulations.

FNS is required to report on any findings in other functional areas outside of the functional area being reviewed. This report reflects a finding in the functional area of Recipient Claims. While this finding is reflected in this report, there are many other claims issues not reflected here that are being handled through the Claims Workgroup that has been established.

We look forward to continuing our work in partnership with DHS to expand program access to every eligible household and ensure program integrity in RI. We would like to express our gratitude to all DHS staff that assisted in the review preparation and execution.

If you have any questions or concerns about the enclosed report or any aspect of this review, please contact Maria Volpe at 617-565-6390 or at Maria.Volpe@fns.usda.gov.

Sincerely,

A handwritten signature in black ink that reads "Bonnie A. Brathwaite". The signature is written in a cursive style with a large initial 'B'.

Bonnie Brathwaite, Director
Supplemental Nutrition Assistance Program
Northeast Region

Enclosure

cc: Iwona Ramian
Maureen Donnelly
Kimberly Nikolaidis
William O'Donnell

FFY 2018

Rhode Island Supplemental Nutrition Assistance Program



Supplemental
Nutrition
Assistance
Program

Putting Healthy Food
Within Reach

State Level Program Access,
Local Level Program Access

Management Evaluation Report

Conducted March 2018



Table of Contents

I. Executive Summary..... 2

II. Definitions..... 4

III. Acronyms..... 5

IV. Introduction 6

V. Objective..... 6

VI. Scope 6

VII. Methodology..... 7

VIII. Noteworthy Initiatives..... 9

IX. Findings and Required Corrective Actions..... 9

X. Observations and Suggestions 11

XI. Open Findings 13

XII. Corrective Action Response..... 28

I. Executive Summary

State Level Program Access and Local Level Program Access

Supplemental Nutrition Assistance Program (SNAP) Rhode Island

The Food and Nutrition Service (FNS) Northeast Regional Office (NERO) reviewed and evaluated Rhode Island (RI) Supplemental Nutrition Assistance Program (SNAP) operations from March 26, 2018 to March 30, 2018. The functional areas for the Federal Fiscal Year (FFY) 2018 review included the following: State Level Program Access (SPAR) and Local Level Program Access (LPAR).

The SNAP Management Evaluations (MEs) are ongoing assessments of your agency's administration of SNAP. The reviews provide the FNS Regional Office staff the opportunity to observe and evaluate the State agency's (SA) processes and procedures for complying with the requirements outlined in the FNS regulations, handbooks, and policy. Additionally, the reviews are an opportunity for regional staff to provide technical assistance regarding new regulations and policy interpretations that may be needed.

Information included in this report is the result of observations, interviews, case reviews, and assessment of documents provided to FNS. This report details the findings, required corrective actions, observations and recommendations of FNS. The review team also evaluated the State's progress in addressing findings from prior fiscal year MEs. Open findings, which are findings from previous fiscal years that have not been corrected by the State, warrant immediate attention and corrective action. Repeat findings are findings that are identical to previously cited (and subsequently closed) findings from prior reviews within a six-year period. Failure to address these findings within an acceptable amount of time may result in escalation, which could ultimately lead to administrative penalties for the State.

A written response to the corrective actions detailed in the report must be submitted within sixty (60) calendar days of the date of this report. The response must include a description of the corrective action plan steps proposed for each finding, including implementation timeframes and supporting documentation as necessary. Additional details on the requirements for the Corrective Action Response (CAR) can be found at the end of this report. Although not regulatory in nature, a written response to the suggestions for each observation is encouraged.

In addition to the new findings resulting from the FFY 2018 LPAR and SPAR, this correspondence also serves as FNS' response to the CAR submitted to FNS on March 27, 2018 for the FFY 2017 ME conducted in June 2017. FNS notes that in many of the corrective active responses, the State's scheduled releases are referenced as the corrective action. In order to close out these findings, FNS requires information regarding the successful rollout of each release, what defects were discovered, how the defects were mitigated or the plans to mitigate. In the open finding section below, the status update includes the information needed for FNS validation.

There were three new findings for FFY 2018, but many of the findings for FFY 2017 were observed again during this year's review. This report addresses findings from the FFY 2017 ME in the Open Findings section below. Once FNS determines the State's CAR is sufficient, these findings can transition to the Semi-Annual Corrective Action Plan (CAP). FNS will issue the State its next semi-annual CAP in October, but the State is welcome to provide updates before then. Prior years' open findings have already been transitioned to the June 2018 Semi-Annual CAP for monitoring and validation.

FNS would also like to acknowledge in this report that some of the findings from FFY 2017 and FFY 2018 overlap with the deficiencies that are being addressed in the Formal Warning sent by FNS on April 16, 2018 and the subsequent CAP, which was received by FNS on May 15, 2018. This overlap will be noted within the status section for each finding.

II. Definitions

Corrective Action Response (CAR): Actions that are proposed or taken by a State agency to respond to a finding of noncompliance with Federal regulations, FNS instructions, and/or policy memoranda. The term 'Required Corrective Action' is the element of the ME report that conveys the action(s) that must be taken by the State agency to correct the noncompliance with Federal regulations, FNS instructions, and/or policy memoranda prescribed by FNS for the State agency to move into compliance with Federal requirements and policy.

Finding: Identification of non-compliance with program regulations, FNS instructions, policy memoranda, and/or other authoritative documents that must be corrected by the State agency. Each finding is associated with a required corrective action.

Functional Areas: Specific areas or components of program operations and administration performed by the State agency that are examined and evaluated in a ME/FMR (Financial Management Review) such as certification and eligibility, program access, financial management, and local agency oversight.

Management Evaluation (ME): Periodic compliance assessment of State agency or local program operations and administration resulting in a report of findings, observations, and noteworthy initiatives.

ME Report: Formal, comprehensive report of the ME review that typically includes findings, required corrective actions, observations, suggestions, and noteworthy initiatives.

Noteworthy Initiatives: Projects, processes, and practices worthy of recognition and sharing with other State agencies for replication in an effort to improve program operations.

Observation: Identification of a weakness in program operations or management that is not in violation of program regulations, FNS instructions, policy memoranda, and/or other authoritative documents. Each observation is associated with a suggestion.

Open Finding: A finding in which the corrective action has not been implemented by the State agency and/or validated by FNS.

Repeat Finding: A finding that is identical to a previously cited, closed finding that is discovered at the same State agency in at least one of the reviews conducted within the continuous six-year period immediately preceding the ME.

Required Corrective Action: A statement in the ME report that conveys the action(s) that must be taken by the State agency to correct noncompliance with Federal regulations, FNS instructions, and/or policy memoranda. Required corrective actions are prescribed by FNS but may have input by the State agency. The State agency is required to provide a Corrective Action Response to FNS' required corrective action. All required corrective actions must be validated by FNS to ensure the State agency has implemented the corrective action and that the corrective action has addressed the violation prior to closing the applicable finding(s).

Suggestion: Recommendation that accompanies an observation.

III. Acronyms

ABAWD	Able-Bodied Adults without Dependents
CAP	Corrective Action Plan
CAR	Corrective Action Response
CCRU	Claims Collections and Recovery Unit
CFR	Code of Federal Regulations
DHS	Rhode Island Department of Human Services
FFY	Federal Fiscal Year. The FFY runs from October 1 st to September 30 th
FH	Fair Hearing
FNS	Food and Nutrition Service
IVRS	Interactive Voice Response System
LPAR	Local Program Access Review
ME	Management Evaluation
NERO	Northeast Regional Office
NOAA	Notice of Adverse Action
NOE	Notice of Expiration
NOMI	Notice of Missed Interview
RI	Rhode Island
RIBridges	DHS' integrated eligibility system that supports multiple program operations including SNAP eligibility
SA	State Agency
SNAP	Supplemental Nutrition Assistance Program
SPAR	State Program Access Review
TANF	Temporary Assistance for Needy Families
USDA	United States Department of Agriculture

IV. Introduction

FNS NERO conducted a combined review of the Rhode Island Department of Human Services (DHS) SNAP operations from March 26 to March 30, 2018.

An entrance conference was conducted on Monday, March 26th at the SNAP Administrative Office in Providence. The LPAR case file reviews, and interviews of eligibility staff and clients were conducted at the Providence Office. The SPAR consisted of a review of Fair Hearing (FH) files and a visit to the Call Center in the Pawtucket Office.

This report is based on the results of the on-site review of case files and interviews with staff members of the Providence Office, the Pawtucket Office and the DHS SNAP Administrative Office. An exit conference was held on Friday, March 30th to provide a summary of the work performed during the review and to discuss any additional documentation needed, anticipated findings, observations and required corrective actions. FNS provided DHS with the case review summary results for all cases that were reviewed and identified by FNS to have issues.

V. Objective

The main objective of this review was to determine State agency compliance with Federal law and implementing regulations, policies and directives applicable to the federally-funded SNAP. This combined SNAP ME focused on specific target areas identified in the FFY 2018 federal target memo along with procedures and tools for Program Access Reviews.

VI. Scope

- State Level Program Access Review
For the SPAR, FNS interviewed State staff responsible for language access, client complaints, call center operations, applications, FHs and timeliness. In addition, FNS conducted a FH case review and reviewed client notices.
- Local Program Access Review
FNS reviewers conducted the LPAR at the Providence Office on March 26 – 30, 2018. FNS observed policies and procedures in effect for SNAP applicants and recipients. FNS reviewers conducted case reviews of initial and recertification applications and interviewed local office staff including managers/directors, supervisors, receptionist/screener, and eligibility workers. FNS also interviewed SNAP clients at the Providence Office. Results of the case review were provided to the State on site for review and comment.

FNS reviewed data on cases that were terminated or denied from March through July 2017, plus an additional four months of data for each case, to assess if these households experienced churn. Churn is defined as participants who lose eligibility for SNAP then re-enter the program within 120 days. Analysis of data from this time period was used to

examine case files. In addition, FNS also reviewed a random sample of denied cases from October to December 2017. Results of the case reviews were provided to the State on site for review and comment.

VII. Methodology

The review was conducted in accordance with FNS ME Guidance and also utilized procedures and requirements set forth in the SNAP ME review guides for the SPAR and LPAR.

- Data Collection

In accordance with FNS ME guidance and a FFY 2018 LPAR memorandum, the FNS review team used data analytics to focus on churn as part of the LPAR. As part of the data request, FNS requested all statewide cases during the months of March 2017 through July 2017 that had both a negative action and a subsequent approval within four months of the negative action. Negative actions are defined as both denials and terminations. Cases were analyzed and selected for the review based on the “FY 2018 Data Analysis Questions for Data Analytics Review in the LPAR” guide. The sample consisted of 40 case files that were terminated during the certification period or at recertification, or were denied at recertification during the months listed above.

Additional case file data was requested for initial applications that were denied or withdrawn during the months of October 2017 through December 2017. Statistical random numerical sampling was used to identify cases for review. The sample consisted of 40 case files that were denied, withdrawn, approved, or closed from the months listed above.

The FNS review team worked with eligibility technicians to review the case files in the RIBridges eligibility system. The FNS review team utilized a protocol from the most recent ME guidance to ensure each case was reviewed in a consistent manner and that all areas of Federal SNAP requirements were reviewed.

- Interviews & Questionnaires

The FNS review team conducted interviews on site with State and local office staff. FNS used an interview protocol designed to elicit information on the SNAP certification process. The protocol contained general questions and State-specific questions based on State-selected SNAP policy options.

SNAP client interviews were also conducted as part of this review. The FNS review team interviewed three SNAP clients at the local office. The interviews assessed customer service and clarity of information provided by the local office.

Questionnaires for the SPAR were forwarded to the State prior to the review week and were used for follow-up questions with the State staff on March 29th. The questionnaires pertained to language access, FHs, client complaints, call center operations, applications, and timeliness.

- Observations

FNS utilized the Local Office Observation Checklist for the Providence Office. This included a review of the exterior of the building and the lobby/waiting areas for this location.

- Case File Reviews

The purpose of the case file review was to determine if the local office is processing cases in compliance with Federal program requirements and to verify processes and procedures identified during interviews and observations.

Type of Cases	Random Sample	Data Analytics	Total # of cases Reviewed
Initial applications approved	10		10
Initial applications denied	10		10
Terminations	5	18	23
Recertifications approved	5		5
Recertifications closed/denied	10	22	32
Total	40	40	80

- Fair Hearing Case File Reviews

The purpose and scope of the FH review is to examine whether appeal decisions are rendered timely and accurately and to ensure that household due process rights are upheld as required by Federal regulations. The FNS review team examined the State’s policies, procedures, and notices related to FHs to ensure they comply with regulatory requirements.

Prior to the review, FNS requested FH cases from October 2016 to September 2017. The request included cases that were denied, approved and withdrawn. The selection of cases was random. A total of 23 cases were reviewed.

Type of Cases	# of Cases Reviewed
Fair Hearing denied	4
Fair Hearing approved	5
Fair Hearing withdrawn	7
Fair Hearing abandoned	7
Total	23

VIII. Noteworthy Initiatives

Noteworthy Initiative 1: There is a DHS pilot currently underway in collaboration with West Bay Community Action. This pilot will provide real time information regarding the functionality of the client portal. This information will help the State enhance this tool to assist clients who prefer to apply online. This is noteworthy because of the emphasis on timely issuance of SNAP benefits through the online application portal. FNS encourages DHS to share the lessons learned from this pilot as soon as information becomes available.

Noteworthy Initiative 2: FNS received questionnaire responses back from several community agencies serving as advocates in the State. Advocates were asked to comment on any practices or processes being conducted by the SA or a particular local office that they considered to be effective in helping clients obtain SNAP. Their responses noted two changes with local offices that have helped to promote program access: 1) the addition of a greeter in the Providence office and 2) the extended hours in a few of the offices. Additionally, they noted that the policy change allowing for self-declaration of certain items requiring verification has been helpful in reducing the burden on clients.

IX. Findings and Required Corrective Actions

A. Local Program Access

Finding LPAR18.1 (New): The State failed to issue a notice of match results for prisoner matches.

Citation: 7 CFR 273.12(c)(3)(iii)

Background: FNS reviewers identified cases in which prisoner match information in the case record indicated that a household member may have been incarcerated, but the State failed to issue a notice of match results to the household. In speaking with eligibility workers, FNS determined that, at the time of the review, there were no procedures in place for eligibility workers to issue these notices in response to positive prisoner matches. Federal regulations at 7 CFR 273.12(c)(3)(iii) state, “*If a State receives match information from a match described in §272.13 or §272.14, the State shall follow up with a notice of match results as described in §272.13(b)(4) and §272.14 (c)(4). The notices must clearly explain what information is needed from the household and the consequences of failing to respond to the notice as explained in paragraphs (c)(3)(iii)(A) and (B) this section.*”

Required Corrective Action: The State must ensure that all prisoner match results for applicants and recipients of the SNAP program are properly acted upon. The SA’s corrective action should include the development of procedures and training of field staff to address matches through proper noticing. Procedures and training should also detail the actions that workers must take in accordance with 273.12(c)(3)(iii)(A) and 273.12(c)(3)(iii)(B) if a household fails to respond to the notice of match results.

Finding LPAR18.2 (New): Known system issues prevent workers from accurately processing cases involving foster care.

Citation: 7 CFR 273.1(b)(4)

Background: FNS reviewers observed a case in which the worker had removed and subsequently added foster care children back into the household. It was unclear to FNS reviewers whether or not the head of the household wanted to add the foster care children to the household. In reviewing the case, it became apparent that the eligibility worker was having difficulty with foster care functionality. Prior to the review, FNS was aware that rules governing the treatment of foster care were not functioning correctly in the system and that the State was planning to address this as part of an upcoming release.

Federal regulations at 7 CFR 273.1(b)(4) require the State to process cases involving foster care individuals in the following manner: *“Individuals placed in the home of relatives or other individuals or families by a Federal, State, or local governmental foster care program must be considered to be boarders. They cannot participate in the Program independently of the household providing the foster care services. Such foster care individuals may participate, along with a spouse or children living with them, as members of the household providing the foster care services, only at the request of the household providing the foster care.”*

Required Corrective Action: The State must ensure that RIBridges is programmed to properly handle cases involving individuals in foster care. FNS acknowledges that at the time of the review the State was planning to correct this functionality in an upcoming release. In its CAR, the State must confirm successful implementation of the system fix and identify whether any additional defects involving this functionality have been identified post release.

Finding LPAR18.3 (New): The State does not have procedures in place to detect and refer potential overpayments or trafficking violations.

Citation: 7 CFR 273.18(d)(2)(ii)(B)

Background: As part of the LPAR, FNS reviewers found that the State does not have procedures in place for field office staff to refer a potential claim to the Claims Collections and Recovery Unit (CCRU) or the fraud unit. In addition, there is no functionality in RIBridges for field staff to create a referral when a possible overpayment exists. The system does not allow a manual claims referral to be made by a worker in the field, the CCRU, or others responsible for referring potential claims. The system only generates referrals that are automatically created based on a case change. The State is uncertain as to whether these system-generated potential claims are accurate due to the challenges the State experienced since system go-live with overall implementation of SNAP policy.

Required Corrective Action: The State needs to create, implement, and train staff on procedures to refer potential claims to CCRU and the fraud unit. These procedures need to be

reflected in the State's Claims Management Plan (CMP), which should be submitted to FNS for review and approval. The State also needs to add the functionality in RIBridges to create manual claims referrals. Please submit the CMP and training manual for the procedures to create claims referrals. In addition, submit documentation to verify that the functionality will be added to RIBridges, has been tested, and the results of the tests that have been performed. The State must consider functionality to track and record claims referrals, and the system must also be designed to track and measure timeframes for establishment of claims referrals and identify backlogs. The State also needs to submit a plan for reviewing and addressing all the system-generated claims that currently exist in RIBridges for accuracy. The plan should include a timeframe for completion.

B. State Level Program Access - No new findings for this section.

X. Observations and Suggestions

A. Local Program Access Observations

Observation 1: FNS observed extremely long wait times for clients visiting the Providence Office. In addition, DHS only tracks wait times from when the customer is checked in by the greeters, even though clients often experience significant wait times prior to reaching the greeters.

Suggestion 1: The SA should develop a method to track clients' actual wait times from the time they arrive at the office. FNS acknowledges that the SA has begun an engagement with a vendor to look at lobby operations using reinvestment dollars. FNS is available to provide technical assistance to the SA as needed.

Observation 2: FNS reviewers noted that the Providence Office lobby entrance does not have an automatic door opener to assist individuals with wheelchairs, walkers, crutches and other mobility aids to get through the door.

Suggestion 2: The SA should consider modifications to the office's front lobby to accommodate individuals with these specific needs.

Observation 3: FNS reviewers observed that the greeter station located in the center of the front lobby was not set up in a way to accommodate client privacy.

Suggestion 3: The SA should ensure that confidentiality is considered a priority in this work area and make necessary modifications to ensure privacy while checking in clients using their social security numbers and or other personally identifiable information.

Observation 4: The review team noted that when eligibility is re-run subsequent to an initial eligibility determination, the “Authorized By” field on the Eligibility Determination Results page will be updated to reflect the most recent action. As a result, the “Authorized By” information for prior actions is overwritten, sometimes with a user profile that reflects a batch process (such as MUBEDBCDLY). This gives the appearance that batch processes are determining initial eligibility, as opposed to simply re-running eligibility as a result of automated changes (such as changes in SSA payment information). FNS is concerned about the traceability of specific case actions back to unique user profiles associated with eligibility workers.

Suggestion 4: The SA should ensure that the system is accurately tracking the user profile associated with a specific action taken at a specific time even when subsequent actions taken by other users or batch processes re-run eligibility at a later date.

Observation 5: FNS reviewers interviewed several clients in the lobby area of the Providence Local Office during the review. Clients indicated that they felt the need to come into the office in order to have their case processed because they were unable to reach anyone by phone in their local office and faced long wait times when contacting the call center.

Suggestion 5: The SA should implement a process that not only monitors the amount of time people wait but the reasons that brought them in to the office in the first place. This information should help the State better address the root causes contributing to the high volume of lobby traffic. FNS also notes that addressing the findings with regard to timely service both in the offices and through the customer portal will reduce unnecessary visits to the offices.

B. State Program Access Observations

Observation 1: Advocacy organizations are concerned about long wait times in the offices, difficulties reaching staff in the call center, and inability to reach anyone at any of the six field offices. In interviews with FNS, advocacy organizations identified a number of issues adversely impacting clients in addition to long wait times in the field offices and call center.

Their concerns included:

- confusing notices;
- missing applications and paperwork submitted by clients that workers are unable to locate because they have not been scanned and indexed;
- online applications that are not user friendly; and
- failure to send recertification applications and interim report forms to clients.

Suggestion 1: The SA should continue to engage advocacy organizations and community partners to identify and address program access issues impacting applicants and clients. In particular, we encourage the SA to continue to attend the monthly SNAP Advisory Meetings.

XI. Open Findings

The following are findings from previous FNS ME reviews that remain open. FNS cannot close a review until corrective actions have been implemented for all findings and FNS has validated the implementation of corrective actions. **If FNS has accepted the corrective action, this will be indicated in the open finding's status and the finding will be transitioned and tracked in the Semi-Annual CAP for monitoring and validation.** Please note that there are some open findings listed below that will require the State to provide updated information.

Finding LPAR 15.1 (*formerly finding #L.1 in the FFY 2017 review): Notice of Adverse Action does not comply with Federal regulations

Citation: 7 CFR 273.13(a)(2)

Background: FNS reviewers identified multiple cases in which the Notice of Adverse Action did not conform to Federal regulations. Federal regulations at 7 CFR 273.13(a)(2) state *“The notice of adverse action shall be considered adequate if it explains in easily understandable language: The proposed action; the reason for the proposed action; the household's right to request a fair hearing; the telephone number of the SNAP office (toll-free number or a number where collect calls will be accepted for households outside the local calling area) and, if possible, the name of the person to contact for additional information; the availability of continued benefits; and the liability of the household for any over issuances received while awaiting a fair hearing if the hearing official's decision is adverse to the household. If there is an individual or organization available that provides free legal representation, the notice shall also advise the household of the availability of the service.”*

FNS reviews identified multiple NOAAs that informed the household that it was closed for the incorrect reason including:

- Failure to return Recertification instead of Interim Report;
- Failure to return Interim Report instead of Recertification; and,
- Failure to provide documentation instead of over income.

Required Corrective Action: The SA must ensure the language included on the NOAA is compliant with 7 CFR 273.13(a)(2) by explaining in easily understandable language an accurate reason for the proposed action. System issues appear to account for the majority of the NOAA issues; however, in some instances the worker might have taken an incorrect action in the system that resulted in an inaccurate NOAA. The State must provide an update on system defects related to NOAAs and the State must provide a comprehensive training for all eligibility staff on correct notice procedures in RIBridges.

Status: This finding was identified again in several cases in the FFY 2018 ME. FNS has reviewed and accepts the State's response received March 27, 2018. The Semi-Annual CAP indicated that the State was working on updating and correcting notices in RIBridges. FNS is aware that the SA has developed new notice templates for RIBridges.

This finding was transitioned to the June 2018 Semi-Annual CAP for monitoring and validation. FNS will respond separately to the updates provided in that CAP.

LPAR 17.1 (formerly finding #A.1 in FFY 2017 review): Failure to follow appropriate interview scheduling procedures

Citation: 7 CFR 273.2(e)(3)

Background: FNS reviewers found multiple cases in which the SA failed to follow appropriate interview scheduling procedures. In one case, the household's interview was scheduled late, which prevented the household from participating within the 30-day application processing timeframe. In six other cases, the SA failed to document how the clients were notified of their appointment. Federal regulations at 7 CFR 273.2(e)(3) state, "*The State agency must schedule an interview for all applicant households who are not interviewed on the day they submit their applications...The State agency must schedule all interviews as promptly as possible to insure eligible households receive an opportunity to participate within 30 days after the application is filed.*"

Required Corrective Action: The SA must implement adequate procedures to ensure that all households that are not interviewed on the day they submit their application are scheduled for an interview within a timeframe that will provide those eligible an opportunity to participate within 30 days of the application being filed. The SA must document how it is informing households of the interview. The SA must also make sure that eligibility workers are assigning and taking the appropriate "action-based tasks" so that all interviews are conducted timely.

Status: FNS has reviewed and accepts the State's response received March 27, 2018 that described the Worker Inbox improvements and the current manual process directives to staff that have been implemented to address this. This finding will transition to the November 2018 Semi-Annual CAP for monitoring and validation.

Finding LPAR17.2 (formerly #A.2 in FFY 2017 review): Failure to appropriately issue the Notice of Missed Interview (NOMI)

Citation: 7 CFR 273.2(e)(3)

Background: FNS reviewers identified several cases where the SA's issuance of the NOMI did not follow appropriate procedures. This is a repeat finding from the FFY 2015 LPAR conducted at the Newport Office. Federal regulations at 7 CFR 273.2(e)(3) state, in part, "*The State Agency must notify each household that misses its interview appointment that it missed the scheduled interview and that the household is responsible for rescheduling a missed interview.*" FNS reviewers identified the following issues:

- NOMIs sent to households who had already completed their interviews;
- NOMIs sent to households before their scheduled interviews; and
- NOMIs never sent to households who missed their interviews.

Required Corrective Action: The SA must ensure that it is issuing NOMIs in accordance with

Federal regulations. The issues identified during the review appear to be a combination of both system-related errors and worker errors (which themselves are likely the result of workers learning to navigate the new system). The SA must investigate and address the root cause(s) of the system issues and provide targeted training to eligibility staff.

Status: During the FFY 2018 combined review, this finding was identified again in several cases. In addition to the NOMI issues noted from the prior review, there were also NOMIs that were sent after the interview was conducted and incorrect NOMI dates noted in the case reviews.

FNS has reviewed and accepts the State's response received March 27, 2018 that advised that updates to the NOMI functionality were implemented as part of the April 2018 release. This finding was transitioned to the June 2018 Semi-Annual CAP for monitoring and validation.

Finding LPAR17.3 (formerly #A.3 in FFY 2017 review): Case file documentation does not support eligibility decisions and benefit-level determinations

Citation: 7 CFR 273.2(f)(6)

Background: FNS reviewers identified numerous cases in which the case files insufficiently documented the details of a SNAP benefit determination or case processing action by the eligibility workers. The case files were missing initial applications, recertifications, verifications and case notes necessary to confirm the accuracy of statements or information provided. In some cases, the case record included documents that were improperly indexed and therefore not readily identifiable by the eligibility worker. For example, reviewers identified one recertification application that was indexed as an appeals-related document and, in a separate case a recertification application that was indexed as a birth certificate.

The level of detail found within the case notes also varied significantly from one case to the next. A few cases included detailed notes while the majority had no cases notes and several had very limited information. Federal regulations at 7 CFR 273.2(f)(6) state, "*Case files must be documented to support eligibility, ineligibility, and benefit level determination. Documentation shall be in sufficient detail to permit a reviewer to determine the reasonableness and accuracy of the determination.*" This includes documentation related to determinations made at initial certification, recertification, and any changes made during the certification period that affect the household's eligibility and/or benefit level. State agencies must be able to support the SNAP eligibility of all households with adequate case file documentation. Additionally, since DHS uses statewide task-based case processing, standardization of case notes will improve efficiency and accuracy as multiple workers handle different tasks pertaining to a case at different times. Detailed case notes are a critical piece of documentation to substantiate case actions.

Required Corrective Action: The SA must establish standard case management procedures to ensure the case files are consistently documented to support eligibility, ineligibility and/or benefit level. The SA must ensure that all case documentation is contained in RIBridges and properly indexed so that eligibility workers may act on changes or make eligibility determinations in a timely manner. The SA must ensure that workers use consistent, detailed case notation to support case actions. The State's CAR should include an example of a standard

case documentation and any guidance or training materials provided to eligibility workers.

Status: FNS has reviewed and accepts the State's response received March 27, 2018. FNS acknowledges receipt of the procedural memo 16-13 providing guidance to staff on the use of case notes in the new eligibility system and the receipt of several training modules created by the State. FNS considers this finding now closed.

Finding LPAR17.4 (formerly finding #A.4 in FFY 2017 review): Applications are not processed within 30 days

Citation: 7 CFR 273.2(g)(1)

Background: FNS reviewers identified five cases in which the State agency failed to process SNAP applications within the mandated 30-day processing timeframe. This is a repeat finding from the FFY 2015 LPAR conducted at the Newport Office. Federal regulations at 7 CFR 273.2(g)(1) state, "The State shall provide eligible households that complete the initial application process an opportunity to participate (as defined in 274.2(b)) as soon as possible, but no later than 30 calendar days following the date the application was filed."

Required Corrective Action: The SA must ensure that all applications are processed within 30 days as required. Eligible applicants have the right to receive benefits within 30 days under normal processing standards. Additionally, ineligible applicants must be notified of their ineligibility no later than 30 days after the date of application in accordance with 7 CFR 273.2(g)(3). According to weekly data reports that FNS receives from DHS, the SA has made progress over the last year in addressing the backlog of unprocessed initial applications. However, the timeliness of initial application processing remains below acceptable thresholds. In its CAR, the SA must submit a detailed plan of action for achieving a timeliness rate of 95% for both expedited and non-expedited applications within six months of receipt of this report.

Status: During the FFY 2018 combined review, this finding was identified again in several cases. FNS has reviewed and accepts the State's response received March 27, 2018 that advised that an interim process was put in to affect while the State prepared for the release of the new worker inbox. The interim process included the assembly of two teams to exclusively work SNAP applications. Due to this interim process and the scheduled release, this finding was transitioned to the June 2018 Semi-Annual CAP for monitoring and validation. FNS also notes that this finding is being addressed through the Formal Warning CAP process.

Finding LPAR 17.5 (formerly finding #A.5 in FFY 2017 review): Untimely expedited issuance

Citation: 7 CFR 273.2(i)(3)(i)

Background: During the case file review, FNS reviewers identified that the SA failed to issue expedited benefits to eligible households within the required timeframes. Federal regulations at 7 CFR 273.2(i)(3)(i) state, "*For households that are entitled to expedited service, the State agency shall post benefits to the household's EBT card and make them available to the household not*

later than the seventh calendar day following the date an application was filed.” Failure to process expedited applications timely puts the most vulnerable households at greater risk.

Required Corrective Action: The SA must take immediate corrective action to ensure all households eligible for expedited benefits receive them by the seventh calendar day following the date of application. Weekly data reports indicate that the SA has made progress over the last year in addressing the backlog of unprocessed initial applications; however, the timeliness of initial application processing remains below acceptable thresholds. In its CAR, the SA must submit a detailed plan of action for achieving a timeliness rate of 95% for both expedited and non-expedited applications within six months of receipt of this report.

Status: During the FFY 2018 combined review, this finding was identified again in several cases. FNS has reviewed and accepts the State’s response received March 27, 2018. This finding will transition to the November 2018 Semi-Annual CAP for monitoring and validation. This finding is also being addressed through the Formal Warning CAP.

Finding LPAR 17.6 (formerly finding #A.6 in FFY 2017 review): Failure to meet requirements for providing bilingual program materials

Citation: 7 CFR 272.4(b)(1), 7 CFR 272.4(b)(3)(ii)(A)

Background: FNS identified four instances in which clients whose primary language was indicated as Spanish received notices that were sent in Spanish but all the variable fields were in English. Federal regulations at 7 CFR 272.4(b)(1) establishes the requirements for providing non-English language certification materials to households. 7 CFR 272.4(b)(3)(ii)(A) further specifies that “certification materials” include “the SNAP application form, change report form and notices to households.”

Required Corrective Action: The SA must ensure that bilingual certification materials are provided to relevant households in accordance with 7 CFR 272.4(b)(1) and that notices provided to households in non-English languages are completely and accurately translated into that language. As part of the CAP, the SA must send copies of the notices to FNS for review prior to implementation.

Status: FNS has reviewed the State’s response received on March 27, 2018 and has determined that the finding will remain open until the State provides revised copies of all notices related to this finding. FNS acknowledges the State’s report that the Notice Leads team is in process of reviewing and updating all notices for accuracy. This finding will be moved to the November 2018 Semi-Annual CAP for monitoring and validation.

Finding LPAR 17.7 (formerly finding #A.7 in FFY 2017 review): Failure to calculate income correctly

Citation: 7 CFR 273.10(e)(1)(i)

Background: FNS reviewers identified seven cases in which RIBridges failed to correctly

determine the household's benefit level. Federal regulations at 7 CFR 273.10(e)(1)(i) describe the procedures for calculating net income and benefit levels. The cases identified had incorrect benefit levels for the following reasons:

- Income calculated twice;
- Income was deleted from eligibility screens;
- Unemployed client but eligibility calculation included income with no discernible source; and
- Income not included in benefit calculation.

Required Corrective Action: The SA must follow the procedures outlined in 7 CFR 273.10(e)(1)(i) for determining a household's net monthly income. The SA must provide training for all eligibility workers on the proper procedures for determining income to ensure that eligibility workers are able to identify inaccuracies in benefit calculations. The State must also conduct a comprehensive review of system functionality to identify defects that could be resulting in the incorrect benefit calculation. In its CAR, the SA must provide copies of the training material and the results of the review of system functionality.

Status: FNS has reviewed and accepts the State's response received March 27, 2018. This finding will transition to the November 2018 Semi-Annual CAP for monitoring and validation. FNS also requests that the State provide documentation of training and results of the review verifying that all known defects have been addressed.

Finding LPAR 17.8 (formerly finding #A.8 in FFY 2017 review): Improper assignment of certification periods

Citation: 7 CFR 273.10(f)(1)

Background: FNS reviewers identified four cases in which RIBridges listed the incorrect certification period. In one case the certification period was extended beyond the 12 month maximum for non-elderly/disabled households. Federal regulations at 7 CFR 273.10(f) state, *"The State must certify each eligible household for a definite period of time...The certification period cannot exceed 12 months except to accommodate a household's transitional benefit period and as specified in paragraphs (f)(1) and (f)(2) of this section."* In three other cases, in which all the household members were elderly or disabled, RIBridges had assigned a four year certification period, extending the certification period beyond the maximum. Federal regulations at 7 CFR 273.10(f)(1) state, *"The State agency may certify for up to 24 months households in which all adult members are elderly or disabled."*

Required Corrective Action: The SA must meet all regulatory requirements by assigning the correct certification periods to appropriate SNAP households. The State's CAR must outline strategies, including training and/or system enhancements, to ensure the correct assignment of SNAP certification periods for all households.

Status: During the FFY 2018 combined review, this finding was identified again in several cases. FNS has reviewed and accepts the State's response received March 27, 2018. This finding will transition to the November 2018 Semi-Annual CAP for monitoring and validation. The SA

must provide confirmation that the 20 open tickets referenced in the March 27th response, as well as any additional defects identified in relation to this finding, have been addressed.

Finding LPAR 17.9 (formerly finding #A.9 in FFY 2017): Notice of Eligibility does not conform to Federal regulations

Citation: 7 CFR 273.10(g)(1)(i)(A)

Background: FNS reviewers identified four cases in which the Notice of Eligibility did not conform to Federal regulations. Federal regulations at 7 CFR 273.10(g)(1)(i)(A) state, “*If an application is approved, the State agency shall provide the household with written notice of the amount of the allotment and the beginning and end dates of the certification period.*” In three of the cases, the Notice of Eligibility listed the wrong certification period and in the fourth case, the Notice of Eligibility listed the incorrect benefit level.

Required Corrective Action: The SA must ensure that clients who are found eligible receive a Notice of Eligibility that accurately reflects their correct certification period and benefit allotment. In its CAP, the State must identify the root cause(s) of these issues. The fields pertaining to the certification period and benefit level in the notice should be auto-populated by the system. The State must identify and address any system-related issues that could be causing the notice errors.

Status: FNS has reviewed the State’s response received on March 27, 2018 and has determined that the finding will remain open and will be transitioned to the November 2018 Semi-Annual CAP for monitoring and validation. In order to close out this finding, FNS requires the SA to provide revised copies of all notices related to this finding, including the interim notice referenced in the March response and the final notice.

Finding LPAR 17.10 (formerly finding #A.10 in FFY 2017 review): Untimely processing of interim reports resulting in invalid closures

Citation: 7 CFR 273.12(a)(5)(iii)(B)

Background: FNS reviewers found cases in which the interim reports were submitted timely by the client, but the cases were subsequently closed due to delays in case processing. Federal regulations at 7 CFR 273.12(a)(5)(iii)(B) state, in part, “*In selecting a due date for the periodic report, the State agency must provide itself sufficient time to process reports so that households that have reported changes that will reduce or terminate benefits will receive adequate notice of action on the report in the first month of the new reporting period.*” FNS is aware through weekly CAP calls and data reports that the State currently has a backlog of unprocessed interim reports.

Required Corrective Action: The SA must ensure that all interim reports are processed within the required timeframes. If eligible, recipients have the right to receive their benefits on their regularly scheduled issuance date. Similarly, households must be sufficiently notified of a decrease of benefits or ineligibility. According to the most recent weekly data provided by DHS

(dated August 28, 2017), there are a total of 11,353 unprocessed interim reports pertaining to SNAP. In its CAR, the SA must submit a detailed plan of action describing steps that it will take to decrease its backlog of unprocessed interim reports by 50% within three months of receipt of this report and to eliminate the backlog within six months.

Status: During the FFY 2018 combined review, this finding was identified again in several cases. FNS has reviewed the State's response received March 27, 2018 and has determined that the finding will remain open and will be transitioned to the November 2018 Semi-Annual CAP for monitoring and validation. FNS notes that this finding is also being addressed through the Formal Warning CAP.

Finding LPAR 17.11 (formerly finding #A.11 in FFY 2017 review): Failure to appropriately issue a Notice of Adverse Action (NOAA)

Citation: 7 CFR 273.13(a)

Background: FNS identified multiple cases in which the SA failed to appropriately issue a NOAA. In four cases, households were not sent a NOAA prior to a reduction or termination of the households' benefits. In one case, the NOAA was sent May 11, but the effective date was March 1. Federal regulations at 7 CFR 273.13(a) state "*Prior to any action to reduce or terminate a household's benefits within the certification period, the SA shall...provide a timely and adequate notice of adverse action.*" Additionally, Federal regulations at 7 CFR 273.13(a)(1) state, "*The notice of adverse action shall be considered timely if the advance notice period conforms to that period of time defined by the State agency as an adequate notice period for its public assistance caseload, provided that the period includes at least 10 days from the date the notice is mailed to the date upon which the action becomes effective.*" FNS reviewers were able to identify the cause in only one case; the notice failed to pass internal quality control.

Required Corrective Action: The SA must ensure that NOAAs are sent to clients at least 10 days prior to when the proposed action becomes effective. The SA must develop procedures to ensure that prior to any action to reduce or terminate a household's benefits, the client is provided with a timely and adequate notice of adverse action in accordance with Federal regulations. Internal quality control processes can be effective to ensure that client notices are accurate before they are mailed. However, a process that prevents notices from being issued to households at all can have a detrimental impact on households. The State must revise its notice review practices to ensure that there is sufficient time to review notices and address any deficiencies, and still provide the household with timely and accurate notification of adverse actions.

Status: During the FFY 2018 combined review, this finding was identified again in some cases. However, FNS has reviewed and accepts the State's response received March 27, 2018 regarding the revisions made to the NOAA for use with recertifications. This finding will be transitioned to the November 2018 Semi-Annual CAP pending validation that the revised NOAA has been implemented and that NOAAs are being issued timely to households.

Finding LPAR17.12 (formerly finding #A.12 in FFY 2017 review): Failure to properly close households at the end of the certification period

Citation: 7 CFR 273.14(a)

Background: FNS reviewers identified at least two cases where the households continued to participate beyond their assigned certification period without an eligibility determination. Federal regulations at 7 CFR 273.14(a) state, “*No household may participate beyond the expiration of the certification period assigned in accordance with 7 CFR 273.10(f) without a determination of eligibility for a new period. The State agency must establish procedures for notifying households of the expiration date, providing application forms, scheduling interviews and recertifying eligible households prior to the expiration of certification periods.*” In one case, the application was processed without a recertification on file, and in the other, the household continued to receive benefits beyond its certification period. FNS is aware, through our weekly CAP calls, that the State has systematically kept households open with unprocessed recertifications and that there is a backlog of unprocessed recertification applications.

Required Corrective Action: The SA must develop procedures to ensure that no households participate beyond the expiration of their assigned certification period. According to the most recent weekly data provided by DHS (dated August 28, 2017), there are a total of 12,919 unprocessed applications for recertification pertaining to SNAP. It is FNS’ understanding that the majority of these households have continued to receive benefits beyond the expiration of their certification periods. In its CAR, the SA must submit a detailed plan of action describing steps that it will take to decrease its backlog of unprocessed recertification applications by 50% within three months of receipt of this report and to eliminate the backlog within six months. The SA should also identify steps that it has taken or will take to ensure the timely processing of recertification applications so that backlogs do not arise in the future. DHS should also detail any procedures or system changes that have been implemented to ensure that households do not participate beyond the end of their certification periods without an eligibility determination.

Status: This finding was identified again in several cases in the FFY 2018 ME. FNS has reviewed the State’s response received March 27, 2018 and has determined that the finding will remain open. This finding will be transition to the November 2018 Semi-Annual CAP for monitoring and validation. FNS notes that this finding is also being addressed through the Formal Warning CAP.

Finding LPAR17.13 (formerly finding #A.13 in FFY 2017 review): Notices of Expiration (NOE) are not sent within the required timeframe

Citation: 7 CFR 273.14(b)(1)(i)

Background: FNS reviewers identified six cases where the NOE did not conform to Federal regulations. Federal regulations at 7 CFR 273.14(b)(1)(i) state, “*The State Agency shall provide other households the Notice of Expiration before the first day of the last month of the certification, but not before the first day of the next to the last month.*” In four of these cases the NOE was sent too early, in one case the NOE was sent too late, and in another case the NOE was never sent.

Required Corrective Action: The SA must ensure that all households due for recertification are sent a NOE within the required timeframes. Issuance of the NOE should be an automated process within RIBridges, but the State must establish and adhere to consistent timeframes for running batch processes and printing and mailing notices.

Status: This finding was identified again in several cases in FFY 2018 ME. FNS has reviewed the State's response received March 27, 2018 and has determined that the finding will remain open but will transition to the November 2018 Semi-Annual CAP for monitoring and validation. FNS requests that the SA confirm that JIRA ticket RIB-6255 was successfully implemented through the April 2018 release.

Finding LPAR17.14 (formerly finding #A.14 in FFY 2017 review): Failure to follow appropriate interview procedures at recertification

Citation: 7 CFR 273.14(b)(3)

Background: FNS reviewers found two cases where the SA processed recertification applications without conducting an interview. Federal regulations at 7 CFR 273.14(b)(3) requires the State to conduct an interview at least every 12 months with households certified for 12 months or less.

Required Corrective Action: The SA must implement procedures to ensure that interviews are conducted during the recertification process. Eligibility workers must also be provided with training on how to adequately and consistently document completion of the interview.

Status: During the FFY 2018 combined review, this finding was identified again in several cases. FNS has reviewed and accepts the State's response received on March 27, 2018 and has determined that the finding will remain open until the State provides copies of the procedural memo and step-by-step guide related to interview procedures planned for completion by June 2018. This finding will transition to the November 2018 Semi-Annual CAP for monitoring and validation.

Finding LPAR17.15 (formerly finding #A.15 in FFY 2017 review): Applications for recertification are not processed timely

Citation: 7 CFR 273.14(d)(2)

Background: FNS reviewers identified ten cases in which applications for recertification were not processed timely. Federal regulations at 7 CFR 273.14(d)(2) state, *“Other households that have met all application requirements shall be notified of their eligibility or ineligibility by the end of their current certification period. In addition, the State agency shall provide households that are determined eligible an opportunity to participate by the household's normal issuance cycle in the month following the end of its current certification period.”* In several of these cases, the SA did not begin processing the case until after the end of the certification period, which resulted in a delay of benefit issuance. These households were automatically closed and, in some

of these cases, the households received NOAs stating they failed to complete the review process.

Required Corrective Action: The SA must ensure that all applications for recertification are processed within required timeframes. This includes notifying households of eligibility determinations prior to the end of their certification period and issuing benefits to eligible households on the normal benefit issuance date. According to the most recent weekly data provided by DHS (dated August 28, 2017), there are a total of 12,919 unprocessed applications for recertification pertaining to SNAP. It is FNS' understanding that a portion of these households might have been closed at the end of their certification periods (as opposed to the households described in LPAR 17.12). In its CAR, the SA must submit a detailed plan of action describing steps that it will take to decrease its backlog of unprocessed recertification applications by 50% within three months of receipt of this report and to eliminate the backlog within six months. The SA should also identify steps that it has taken or will take to ensure the timely processing of recertification applications so that backlogs do not arise in the future.

Status: During the FFY 2018 combined review, this finding was identified again in several cases. FNS has reviewed the State's response received March 27, 2018 and has determined that the finding will remain open and will transition to the November 2018 Semi-Annual CAP for monitoring and validation. FNS notes that this finding is also being addressed through the Formal Warning CAP.

Finding LPAR 17.16 (formerly finding #A.16 in FFY 2017 review): Failure to provide a full month's allotment for State-caused delays in processing recertifications

Citation: 7 CFR 273.14(e)(1)

Background: FNS reviewers identified two cases in which the recertification applications were submitted prior to the end of the certification period but not acted on timely by the SA, and once the SA acted on the recertification application, the households were not provided with a full month's allotment for the first month of their new certification periods. Federal regulations at 7 CFR 273.14(e)(1) state, "*If an eligible household files an application before the end of the certification period but the recertification process cannot be completed within 30 days after the date of application because of State agency fault, the State agency must continue to process the case and provide a full month's allotment for the first month of the new certification period. The State agency shall determine the cause for any delay in processing a recertification application in accordance with the provisions of 7 CFR 273.3(h)(1).*" Determining the appropriate recertification date, and whether it was agency or client fault, is critical to ensuring clients are given the full benefits to which they are entitled.

Required Corrective Action: The SA must ensure that all recertifications are processed within required timeframes and clients are provided with the correct allotment for the first month of the new certification period. The SA must conduct additional trainings with eligibility staff to ensure these tasks are completed correctly.

Status: FNS has reviewed the State's response received March 27, 2018 and has determined that

the finding will remain open and will transition to the November 2018 Semi-Annual CAP for monitoring and validation.

Finding LPAR 17.17 (formerly finding #A.17 in FFY 2017 review): Failure to issue a periodic report form

Citation: 7 CFR 273.12(a)(5)(iii)(B)

Background: FNS identified four cases in which the SA failed to issue a six-month periodic report form to households, resulting in invalid terminations. Federal regulations at 7 CFR 273.12(a)(5)(iii)(B) state, “*Households that are certified by longer than 6 months, except those households described in 7 CFR 273.12(a)(5)(iii)(A), must file a periodic report between 4 and 6 months, as required by the State agency...In selecting a due date for the periodic report, the State agency must provide itself sufficient time to process reports so that households that have reported changes that will reduce or terminate benefits will receive adequate notice of action on the report in the first month of the new reporting period.*”

Required Corrective Action: The SA must develop procedures to ensure that all clients are provided with a timely periodic report form. This should include establishment and adherence to a consistent timeframe for running batches and printing and mailing forms and notices.

Status: FNS has reviewed the State’s response received March 27, 2018 and has determined that the finding will remain open. FNS acknowledges the SA’s response addressing the efforts underway to reduce the backlog of work. This finding will transition to the November 2018 Semi-Annual CAP for monitoring and validation. This finding is also being addressed through the Formal Warning CAP.

Finding SPAR15.1 (formerly finding #S.1)

Notice of Required Verification does not conform to Federal regulations

Citation: 7 CFR 273.2(c)(5)

Background: FNS identified that the SA’s Notice of Required Verification does not provide an explanation of the period of time the verifications should cover. Federal regulations at 7 CFR 273.2(c)(5) state in part “*The State agency shall provide each household at the time of application for certification and recertification with a notice that informs the household of the verification requirements the household must meet as part of the application process...At a minimum, the notice shall contain examples of the types of documents the household should provide and explain the period of time the documents should cover.*”

Required Corrective Action: The SA must revise its Notice of Required Verification to provide an explanation of the period of time that the requested verifications should cover. As part of the SA’s CAR please provide a copy of the revised notice prior to production.

Status: This is an open finding from the FFY 2015 SPAR. FNS has reviewed and accepts the State’s response received March 27, 2018. FNS considers this finding now closed.

Finding SPAR15.2 (formerly finding #S.2): Fair Hearings exceed federally mandated time limits

Citation: 7 CFR 273.15(c)(1)

Background: Federal regulations at 7 CFR 273.15(c)(1) state “*Within 60 days of receipt of a request for fair hearing, the State agency shall assure that the hearing is conducted, a decision is reached, and the household and local agency are notified of the decision.*” Of the 40 FH cases reviewed in FFY 2017, seven cases either exceeded the federally mandated timeframes or did not contain enough information for the reviewer to determine whether the local agency was notified within the required timeframes.

FNS found the following:

- A hearing was scheduled outside of the 60 day timeframe;
- The written FH decision exceeded the 60 day timeframe; and
- No documentation to support when the local agency was notified of the decision.

Required Corrective Action: The SA must ensure that all FHs are scheduled, conducted, decided and all parties involved are notified of the hearing decision within 60 days from the date of the request. The SA must also ensure that the FH case files are adequately documented to indicate when all parties are notified of the hearing decisions.

Status: This was an open finding from the FFY 2015SPAR; however, FNS is aware of a backlog of FH cases that has accrued since implementation of RIBridges. FNS has reviewed and accepts the State’s response received March 27, 2018, but is unable to validate that the finding has been adequately addressed. This finding was transitioned to the June 2018 Semi-Annual CAP for monitoring and validation. FNS will respond separately to the updates provided in that CAP.

Finding SPAR17.1 (formerly finding #B.1 in FFY 2017 review): Failure to conduct client complaint analysis

Citation: 7 CFR 271.6(a)(3)

Background: The State does have a complaint tracking spreadsheet and written procedures for handling complaints, but the SA is not conducting an analysis of client complaints to identify patterns of problems. Federal regulations at 7 CFR 271.6(a)(3) state, in part “*The State agency shall maintain a record of complaints received and their disposition, and shall review records at least annually to assess whether patterns of problems may be present in local offices, project areas or throughout the State.*”

Required Corrective Action: The SA must ensure that complaint records are maintained and must complete an analysis of all client complaints annually, at a minimum. The SA must develop clear written procedures for analyzing the complaints and must provide adequate training to all agency staff members that would have a role in the complaints process. The SA written procedures must address the following:

- How often the SA will complete an analysis of its client complaints;
- Who will be responsible for the analysis;
- How the data will be analyzed; and
- Who will be responsible for developing and providing training to agency staff.

The SA must also provide FNS with a copy of the completed analysis and what actions were taken to address any patterns of problems indicated by the analysis.

Status: FNS conducted interviews with the State’s complaint liaison regarding the current complaint structure during the FFY 2018 review. There has been significant improvement in addressing this requirement; however, it is still considered in process. FNS reviewed the State’s response received March 27, 2018 and has determined that the finding will remain open until the State can provide an update on the improvements planned by the State to ensure proper tracking of client complaints. FNS will transition this finding to the November 2018 Semi-Annual CAP. In order to validate this finding, the SA is required to provide to FNS the updated guidance that was scheduled to be sent to FNS by June 30, 2018. To date, FNS has not yet received the updated guidance for the complaint process.

Finding SPAR17.2 (formerly finding #B.2 in FFY 2017 review): DHS does not have effective procedures in place to provide timely service to clients

Citation: 7 CFR 273.2(a)

Background: FNS remains concerned that DHS is not providing timely service to clients. Federal regulations at 7 CFR 273.2(a) state, in part “*State agencies must establish procedures governing the operations of SNAP offices that the State agency determines best serve households in the State...The State agency must provide timely, accurate, and fair service to applicants for, and participants in, SNAP.*” FNS has identified several areas where DHS operations have created significant barriers to program access. Clients are waiting in DHS field offices for several hours and sometimes are turned away from offices because of overcrowding. Clients calling the call center frequently experience long wait times. Challenges with the implementation of the online customer portal have created additional barriers for clients seeking service via the internet.

FNS recognizes the steps that DHS has taken to improve call center operations, including hiring 30 additional eligibility workers for the call center operations. As noted under Noteworthy Initiatives above, weekly data reports indicate that call center wait times have decreased over the last few months. However, office overcrowding persists and submission of online applications remains extremely low (roughly 30-40 applications per week since July according to weekly data from DHS).

Required Corrective Action: The SA must ensure that clients have timely access to service whether they seek assistance through the call center, the online portal, in-person at a local office, or through any other means offered by DHS. The CAR must provide details on how the SA will bring down wait times at the call center as well as a plan to address field office wait times and overcrowding. The CAR must also provide an update on online portal functionality and any actions that are being taken to increase its utilization.

Status: FNS has reviewed the State's response received March 27, 2018 and has determined that the finding will remain open until the State can provide an update on the improvements planned by the State to address this finding. This would include the recommendations forthcoming by the vendor performing business process redesign efforts in the field offices and the vendor services planned to assist with the backlog of work with regard to the call center operations. The State must ensure that applicants and recipients contacting the agency via the call center are provided with timely and accurate service. FNS recognizes that the State is in the process of increasing the number of staff members for this unit and providing requisite training. This finding will transition to the November 2018 Semi-Annual CAP for monitoring and validation.

Finding SPAR17.3 (formerly finding #B.3 in FFY 2017 review): RI DHS-2 is missing required language regarding verification of information

Citation: 7 CFR 273.2(b)(1)(i)

Background: FNS identified that the DHS-2 application is missing federally required language. Federal regulations at 7 CFR 273.2(b)(1)(i) state, *"In prominent and boldface lettering and understandable terms a statement that the information provided by the applicant in connection with the application for SNAP benefits will be subject to verification by Federal, State and local officials to determine if such information is factual; that if any information is incorrect, SNAP benefits may be denied to the applicants; and the applicant may be subject to criminal prosecution for knowingly providing incorrect information"*

Required Corrective Action: The SA must revise the DHS-2 application to incorporate the required language. Please provide a copy of the revised DHS-2.

Status: The DHS-2 provided as a required document for the FFY 2018 review has a version date of April 2017. This date is prior to the FFY 2017 review conducted; therefore, this finding remains open and will transition to the November 2018 Semi-Annual CAP for monitoring and validation. FNS requires that the SA share the newest version of the application prior to its implementation.

Finding SPAR17.4 (formerly finding #B.4 in FFY 2017 review): RI DHS-2 is missing the Income and Eligibility Verification System statement

Citation: 7 CFR 273.2(b)(2)

Background: FNS identified that the DHS-2 application is missing the Income and Eligibility Verification System (IEVS) statement. Federal regulations at 7 CFR 273.2(b)(2) state, *"If the State agency chooses to use IEVS in accordance with paragraph (f)(9) of this section, it must notify all applicants for SNAP benefits at the time of application and at each recertification through a written statement on or provided with the application form that information available through IEVS will be requested, used and may be verified through collateral contact when discrepancies are found by the State agency, and that such information may affect the household's eligibility and level of benefits."*

Required Corrective Action: The SA must revise the DHS-2 to include the IEVS statement. Please provide a copy of the revised DHS-2.

Status: The DHS-2 provided as a required document for this review has a version date of April 2017. This date is prior to the FFY 2017 review conducted; therefore, this finding will remain open and be transitioned to the November 2018 Semi-Annual CAP. FNS requires that the SA share the newest version of the application prior to its implementation.

Finding SPAR17.5 (formerly finding #B.5 in FFY 2017 review): Failure to notify households at the time of application of the methods available to request a fair hearing
Citation: 7 CFR 273.15(f)

Background: FNS identified that the DHS-2 application does not properly inform households on how a fair hearing may be requested. Federal regulations at 7 CFR 273.15(f) state, *“At the time of application, each household shall be informed in writing of its right to a hearing, of the method by which a hearing may be requested, and that its case may be presented by a household member or a representative, such as a legal counsel, a relative, a friend or other spokesperson.”*

Required Corrective Action: The SA must update the DHS-2 application to include language that informs the household of the method by which a hearing may be requested. Please provide a copy of the revised DHS-2.

Status: The DHS-2 provided as a required document for this review has a version date of April 2017. This date is prior to the FFY2017 review conducted therefore this finding will remain open and be transitioned to the November 2018 Semi-Annual CAP. FNS requires that the SA share the newest version of the application prior to its implementation.

XII. Corrective Action Response

As stipulated in 7 CFR 275.3 and 275.16, RI DHS is required to provide a written response identifying its corrective actions outlined in this ME report. The CAR is due within **60 calendar days** of the date of this ME report. The response must include a description of the CAP for the findings including implementation time frames and supporting documentation as necessary. Additional details on the requirements for the CAR including the use of the CAR tool, can be found at the end of this report. Although not required by regulations, responses to FNS observations and suggestions are encouraged.

Please complete each element of the CAR tool detailed below for each finding:

Finding Naming Convention:

FNS will assign each finding a unique identifier following the naming convention below in the ME report.

- The type of review: LPAR, SPAR, MESYS, ABAWD, ET, SNAPED, INTEG, QC, CAPER, EBT, QCSTATS, CLAIMS, TOP
- The last two digits of the FFY the review took place in where the finding was identified: e.g. if a finding resulted from a review in FFY 2017, (17) would be the first two digits in the finding name.
- Finally, a number (1, 2, 3, 4) assigned by FNS that would stay with the finding until it's closed.
For instance, if a State has a combined LPAR/ABAWD review in FFY 2019, the name for the findings would be LPAR 19.1, LPAR 19.2 and so on for the LPAR and ABAWD 19.1 and so on for the ABAWD review.

Finding Language:

FNS will provide the language for each finding in the CAR tool that corresponds with the Finding name provided.

Finding Evaluation:

The State conducts its own evaluation of the finding to include a review of the regulations and guidance pertaining to the finding. The State should evaluate the magnitude of the deficiency. Is it a systemic issue affecting a large portion of the case load or a minimal effect on a small portion of cases? Please comment on the geographic nature of the finding as well (statewide concern vs. localized).

Root Cause Analysis:

The State conducts a root cause analysis of the finding. The State should consult the background section of FNS's report on that specific finding, but not solely rely on it. The FNS review team is only on site for a limited time, and cannot be expected to identify completely the root cause of an issue. The State should number the root causes, because in many cases, there will be more than one root cause. The cause(s) could potentially include eligibility systems issues, training of eligibility staff, notice language, policy interpretation, etc.

CA Steps & Timeline:

The State completes the Corrective Action steps for each root cause. Please use the same numbers for each root cause in the section as well; e.g. root cause #1 is addressed by CA step #1. Each numbered step should thoroughly address each root cause. The State should anticipate steps that might not be documented or assessed. For instance, if the root cause to the finding is strictly systems related, the State should consider if a systems change were to take place, would that then result in a need to conduct training for eligibility staff. If a root cause requires more than one Corrective Action step, the State should name those Corrective Action steps 1A, 1B, and so on. For instance, the root cause may be a systems issues, the CA steps could be #1A- fix systems issues, #1B- provide appropriate training to eligibility staff.

Date of Completion:

The State provides the exact or expected date of completion for each Corrective Action step. Please use the same numbers for each root cause and Corrective Action step. The State should provide at a minimum the month and year the Corrective Action step is expected to be completed.

Monitor & Point of Contact:

For each Corrective Action step and root cause, the State details who is in charge of monitoring the step and what activities will take place to ensure implementation of the Corrective Action.

Documentation:

If applicable, the State should detail the documentation required to validate the Corrective Action for each finding. The documentation itself could be attached to the response, or provided later, but the detail of the document can be included in the table. For instance, if an eligibility system change is required, FNS would want to review the systems change request which could be attached to the response. In the tool, the State would briefly detail what documentation is being provided (or anticipated) and what root cause/Corrective Action step it addresses. FNS is not expecting actual supporting documents to be included in the tool, but merely a description of each attachment. For example, if a JIRA ticket #4 is meant to address a needed systems change related to tracking ABAWDs in a State's eligibility system, the actual JIRA ticket could be attached to the response, but in the CAR tool, a bullet could be added stating *JIRA #4 addresses needed systems change related to tracking ABAWDs*.

Finding Name:		
Finding Language:		
Finding Evaluation:		
Root Cause Analysis:	1. -	2. -
CA steps & timeline:	1. -	2. -
Expected Date of Completion	1. -	2. -
Monitor & Point of Contact	1. -	2. -
Documentation	1. -	2. -