

DETAILED MODEL PLAN (LIHEAP)

Program Name: Low Income Home Energy Assistance

Grantee Name: MICHIGAN

Report Name: DETAILED MODEL PLAN (LIHEAP) Revision # 3

Report Period: 10/01/2016 to 09/30/2017

Report Status: Submitted (Revision #3)

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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: 06/30/2017

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

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

7. APPLICANT INFORMATION

*** a. Legal Name:** State of Michigan, Department of Health and Human Services

*** b. Employer/Taxpayer Identification Number (EIN/TIN):** 38-6000134 *** c. Organizational DUNS:** 805340163

*** d. Address:**

* Street 1:	P.O. BOX 30037	Street 2:	235 S. GRAND AVENUE, SUITE 1515
* City:	LANSING	County:	
* State:	MI	Province:	
* Country:	United States	* Zip / Postal Code:	48909 -

e. Organizational Unit:

Department Name: Michigan Department of Human Services	Division Name: Field Operations Administration
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f. Name and contact information of person to be contacted on matters involving this application:

Prefix:	* First Name: Tammy	Middle Name:	* Last Name: Rodriguez
Suffix:	Title: SER/LIHEAP Specialist	Organizational Affiliation:	
* Telephone Number: 5173420030	Fax Number: 5172417570	* Email: RodriguezT2@michigan.gov	

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

b. Additional Description:

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

	Catalog of Federal Domestic Assistance Number:	CFDA Title:
10. CFDA Numbers and Titles	93568	Low-Income Home Energy Assistance


11. Descriptive Title of Applicant's Project
LIHEAP State Plan

12. Areas Affected by Funding:
Energy assistance

13. CONGRESSIONAL DISTRICTS OF:

* a. Applicant 08	b. Program/Project: statewide
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Attach an additional list of Program/Project Congressional Districts if needed.

14. FUNDING PERIOD:		15. ESTIMATED FUNDING:	
a. Start Date: 10/01/2016	b. End Date: 09/30/2017	* a. Federal (\$): \$0	b. Match (\$): \$0
* 16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?			
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.			
* 17. Is The Applicant Delinquent On Any Federal Debt?			
<input type="radio"/> YES <input checked="" type="radio"/> NO			
Explanation:			
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) **I Agree <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.			
18a. Typed or Printed Name and Title of Authorized Certifying Official Tammy Rodriguez		18c. Telephone (area code, number and extension)	
		18d. Email Address RodriguezT2@michigan.gov	
18b. Signature of Authorized Certifying Official 		18e. Date Report Submitted (Month, Day, Year) 05/25/2017	
Attach supporting documents as specified in agency instructions.			

Section 1 - Program Components

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

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

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01
OMB Approval No. 0970-0075
Expiration Date: 02/28/2005

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

Section 1 Program Components

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

1.1 Check which components you will operate under the LIHEAP program. (Note: You must provide information for each component designated here as requested elsewhere in this plan.)		Dates of Operation	
		Start Date	End Date
<input checked="" type="checkbox"/>	Heating assistance	01/01/2017	09/30/2017
<input type="checkbox"/>	Cooling assistance		
<input checked="" type="checkbox"/>	Crisis assistance	11/01/2016	05/31/2017
<input checked="" type="checkbox"/>	Weatherization assistance	10/01/2016	09/30/2017

Provide further explanation for the dates of operation, if necessary

A portion of crisis assistance is administered through the Michigan Energy Assistance Program (MEAP). MEAP grantees have the option of spending a limited portion (30 percent of their grant, which is both state and federally funded), during the non-crisis season which is June 1 through October 31. Crisis assistance administered through the Department of Health and Human Services State Emergency Relief (SER) program may be approved outside of the crisis season on an exception basis.

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	25.00%
Cooling assistance	0.00%
Crisis assistance	55.00%
Weatherization assistance	5.00%
Carryover to the following federal fiscal year	0.00%
Administrative and planning costs	10.00%
Services to reduce home energy needs including needs assessment (Assurance 16)	5.00%

Used to develop and implement leveraging activities	0.00%				
TOTAL	100.00%				
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 type="checkbox"/> Cooling assistance				
<input type="checkbox"/> Weatherization assistance	<input checked="" type="checkbox"/> Other (specify:) Not applicable.				
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? <input type="radio"/> Yes <input checked="" type="radio"/> 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 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	
SSI	<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	
SNAP	<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	
Means-tested Veterans Programs	<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	
	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? <input type="radio"/> Yes <input checked="" type="radio"/> 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?					
SNAP Nominal Payments					
1.7a Do you allocate LIHEAP funds toward a nominal payment for SNAP households? <input checked="" type="radio"/> Yes <input 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: \$20.01					
1.7c Frequency of Assistance					
<input checked="" 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?					
Households who have an energy expense included in their rent will receive the SNAP nominal payment if they have not already received a LIHEAP benefit, exceeding \$20, through another LIHEAP program.					
Determination of Eligibility - Countable Income					
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 checked="" 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 type="checkbox"/>	Including MediCare deduction	<input checked="" type="checkbox"/>	Excluding MediCare deduction
<input checked="" type="checkbox"/>	Supplemental Security Income (SSI)		
<input checked="" type="checkbox"/>	Retirement / pension benefits		
<input checked="" 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 checked="" type="checkbox"/>	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.		
<input checked="" type="checkbox"/>	Jury duty compensation		
<input checked="" type="checkbox"/>	Rental income		
<input checked="" 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 type="checkbox"/>	Legal settlements		
<input 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 checked="" 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 checked="" type="checkbox"/>	Income tax refunds
<input checked="" type="checkbox"/>	Stipends from senior companion programs, such as VISTA
<input type="checkbox"/>	Funds received by household for the care of a foster child
<input checked="" type="checkbox"/>	Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
<input type="checkbox"/>	Reimbursements (for mileage, gas, lodging, meals, etc.)
<input checked="" type="checkbox"/>	<p>Other</p> <p>Crisis Assistance: DHHS policy manual item, ERM 206, provides a complete list of countable and excluded income for crisis assistance. Federal Income Tax refunds are excluded as income; however, other refunds are countable.</p> <p>Heating Assistance: Total Household Resources are counted for the Home Heating Credit which includes interest, dividends, or royalties and excludes all Income Tax refunds.</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
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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	110.00%

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

Do you give priority in eligibility to:

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

Explanations of policies for each "yes" checked above:

Home Heating Credit (HHC) application captures the number of exemptions allowed for each household with priority given to those who are deaf, disabled, blind or a qualified disabled veteran.

Renters, whose heating costs are included in their rent or if heat service is in someone else's name, the credit is reduced by 50 percent. Michigan believes that the 50 percent reduction is equitable and within the guidelines of this program since groups whose heat is included in their rent or when the bill is in someone else's name are unable to provide proof of their actual heat obligations and costs. This group is eligible but at a lower benefit amount.

HHC allows applicants to provide their actual heating costs therefore those paying actual costs that are greater than the standard credit for the same group size would receive a larger benefit amount.

Program details and eligibility requirements can be found on the department of Treasury's website: http://www.michigan.gov/documents/taxes/CR7_Book_510835_7.pdf

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.

Heating assistance is administered by the Department of Treasury, which allows low income households to apply for LIHEAP without having to come to the Department of Health and Human Services or other community agency in order to receive benefits. Requests for the Home Heating Credit can be submitted at the same time tax forms are completed, through September 30 each year.

2.5 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 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:				
<p>The standard credit computation uses standard allowances established by law and the alternate credit uses actual heating costs to compute the home heating credit. The benefit amount is determined using actual heating costs for an established 12 month period, (November 1 through October 31). The MI-1040CR-7 Instruction Booklet and Application provide specific details about how each benefit is calculated. See attached HHC Instruction Booklet, pages 5 & 6. The FY17 HHC Booklet and Application (for Tax Year 2016) will not be available until January so FY16 Instruction Book has been attached for reference.</p>				
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)				
2.6 Describe estimated benefit levels for FY 2018:				
<table border="1"> <tr> <td>Minimum Benefit</td> <td>\$1</td> <td>Maximum Benefit</td> <td>\$925</td> </tr> </table>	Minimum Benefit	\$1	Maximum Benefit	\$925
Minimum Benefit	\$1	Maximum Benefit	\$925	
2.7 Do you provide in-kind (e.g., blankets, space heaters) and/or other forms of benefits? <input type="radio"/> Yes <input checked="" type="radio"/> No				
If yes, describe.				
N/A				
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.				

Section 3 - COOLING ASSISTANCE

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

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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 componenet:

Add	Household size	Eligibility Guideline	Eligibility Threshold
1			0.00%

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:

- 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:

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

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

3.5 Check the 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
 - Energy burden (% of income spent on home energy)
 - Energy need
 - Other - Describe:

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

3.6 Describe estimated benefit levels for FY 2018:

Minimum Benefit	\$0	Maximum Benefit	\$0
------------------------	-----	------------------------	-----

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

If yes, describe.

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

Section 4 - CRISIS ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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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.

Eligibility for an energy-related crisis is based on the household's demonstration of immediate need for assistance with home heating fuel, electricity, or energy-related home repairs. Crisis means one of the following:

- An individual or household has received a past due or shut off notice on an energy bill for his or her household.
- A residential fuel tank is estimated to contain not more than 25% of its heating fuel capacity.
- A stated need for household deliverable fuel or a non-traditional fuel source in which there is no meter or regular energy bill provided, (example: wood, corn, cherry pits, etc.).
- A notice that the balance in a prepayment account is below \$100.
- A statement from a licensed service provider indicating the homeowners furnace is inoperable and in need of repair or replacement.

Eligibility staff will contact the energy provider to secure a hold on the pending disconnect to resolve the immediate emergency and allow time to determine the household's eligibility for program benefits.

4.3 What constitutes a life-threatening crisis?

A household is considered to have a life-threatening crisis if the following criteria is met:

- The household is not protected by Michigan's Winter Protection Plan;
- The household has experienced disconnection of natural gas or electric service or have ran out of deliverable fuel or a non-traditional heating source such as wood, corn, cherry pits, etc., or the household has a statement from a licensed service provider indicating the homeowner's furnace is inoperable and in need of repair or replacement;
- Restoration of energy services is medically necessary;
- The household does not have any temporary housing alternatives while the emergency is being resolved.

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?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Other?	<input type="radio"/> Yes <input checked="" type="radio"/> No
In Order to receive crisis assistance:	
Must the household have received a shut-off notice or have a near empty tank?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Must the household have been shut off or have an empty tank?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Must the household have exhausted their regular heating benefit?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Must renters with heating costs included in their rent have received an eviction notice ?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Do you have additional / differing eligibility policies for:	
Renters?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Renters living in subsidized housing?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Renters with utilities included in the rent?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Explanations of policies for each "yes" checked above:	
<p>In order to qualify for SER crisis assistance, the household must use their available resources to resolve their own emergency therefore an asset test has been implemented. In instances where the energy costs are included in the rental obligation, no crisis assistance is issued. However, the property owner has the right to apply for crisis assistance and an eligibility determination would be made for their request.</p> <p>Asset policy is located in policy manual ERM 205, which outlines countable and excluded assets used for determining eligibility, see attached document.</p>	
Determination of Benefits	
4.8 How do you handle crisis situations?	
<input checked="" type="checkbox"/>	Separate component
<input type="checkbox"/>	Fast Track
<input checked="" type="checkbox"/>	Other - Describe: Crisis assistance is administered directly from DHHS local county offices however some crisis dollars are also allocated to MEAP as well. MEAP grantees are allowed to develop their own programs, in a manner which is consistent with the requirements set forth in the Request for Proposal (RFP). By allowing grantees the flexibility to develop their own programs, the State of Michigan will be able to analyze successes and failures in order to improve energy assistance program(s). SER asset policy was included as an attachment of the MEAP RFP document, which allows for consistent calculation for MEAP grantees opting to have an asset test in FY17.
4.9 If you have a separate component, how do you determine crisis assistance benefits?	
<input type="checkbox"/>	Amount to resolve the crisis.
<input checked="" type="checkbox"/>	Other - Describe: SER payments are the minimum amount needed to prevent shut off or restore service for natural gas and electric services for at least 30 days. Payments for other fuel types and deliverable fuels may be made up to the fiscal year cap. MEAP grantees however, may authorize the past due or shut off amount along with the current balance when providing crisis assistance. There are also MEAP grantees who have programs for ongoing bill payment assistance, based on the customer's on-time contribution toward the bill. The MEAP grantees consider an energy customer in need of crisis assistance for heat and/or electricity when there is an unpaid account balance. In most instances, these programs incorporate an arrearage forgiveness component as well.
Crisis Requirements, 2604(c)	
4.10 Do you accept applications for energy crisis assistance at sites that are geographically accessible to all households in the area to be served?	
<input checked="" type="radio"/> Yes <input type="radio"/> No Explain.	

DHHS county office are operated statewide; an SER application can be mailed in or hand-delivered to any DHHS office. Applications are also accepted electronically through the DHHS MiBridges online application system. Furthermore, multiple MEAP grantees are located in every county throughout the state of Michigan and accept applications for crisis assistance as well.

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?

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

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

Winter Crisis \$3,000.00 maximum benefit

Summer Crisis \$0.00 maximum benefit

Year-round Crisis \$0.00 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**

SER crisis maximum payment is \$1200 (based on fuel type) and the minimum benefit amount is the amount needed to resolve energy crisis. SER payment amounts exceeding \$1200 require an exception is approved by the LIHEAP program office.

The maximum benefit amount for a household served by MEAP is \$3,000 per fiscal year. In instances where a household received SER prior to MEAP assistance, the SER payment will be counted toward the \$3,000 MEAP cap. Authorization of a MEAP payment exceeding \$3,000 must be pre-approved by the MEAP Grant Administrator. Similar to SER, the MEAP minimum payment amount is the total amount needed to resolve the energy crisis.

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heating system replacement	<input checked="" 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"/>
Other (Specify): Emergency furnace repair and replacement is offered through the SER program only.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4.16 Do any of the utility vendors you work with enforce a moratorium on shut offs?

Yes No

If you responded "Yes" to question 4.16, you must respond to question 4.17.

4.17 Describe the terms of the moratorium and any special dispensation received by LIHEAP clients during or after the moratorium period.

Public Act 95 of 2013 created the low-income energy assistance fund which funds MEAP. The act states that, "An electric utility, municipally owned electric utility, or cooperative electric utility may elect to not collect a low-income energy assistance funding factor under this section by annually filing a notice with the public service commission by July 1. Notwithstanding any other provision of this act, an electric utility, municipally owned electric utility, or cooperative electric utility that elects to not collect a low-income energy assistance funding factor under this section shall not shut off service to any residential customer from November 1 to April 15 for nonpayment of a delinquent account."

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 5 - WEATHERIZATION ASSISTANCE

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

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

Section 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	150.00%

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. No agreement is needed as the Bureau of Community Action and Economic Opportunity is a division within DHHS. Allocation of Weatherization funding is completed internally through a coding mechanism with our accounting division.

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:

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:

Weatherization uses net income when determining eligibility.

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

5.6 Do you require an assets test? Yes No

5.7 Do you have additional/differing eligibility policies for :

- Renters** Yes No
- Renters living in subsidized housing?** Yes No

5.8 Do you give priority in eligibility to:

- Elderly?** Yes No
- Disabled?** Yes 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? Flint Emergency Weatherization	<input checked="" type="radio"/> Yes <input type="radio"/> No

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.

Michigan utilizes a priority point system when delivering services to low income homes to meet 10 CFR 440.16(b) (15).

Mandatory priority categories include households with:

Children.

An elderly group member.

A disabled group member, including SSI recipient(s).

High energy usage and high energy burden.

High Residential Energy Users -The Michigan Department of Licensing and Regulatory Affairs Public Service Commission, publishes an annual report titled "Michigan Energy Appraisal." High Residential Energy User households are defined as meeting or exceeding the normalized heating fuel consumption identified in the Michigan Energy Appraisal by ten percent or more.

Households with a High Energy Burden defined as follows: any household that pays more than 20% of its total annual household income toward annual energy costs.

Each rental unit weatherized requires the landlord complete to a landlord agreement.

Benefit Levels

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

5.10 If yes, what is the maximum? \$7,105

Types of Assistance, 2605(c)(1), (B) & (D)

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 checked="" 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 type="checkbox"/> Cooling system modifications/ repairs	<input checked="" type="checkbox"/> Water Heater
<input checked="" type="checkbox"/> Water conservation measures	<input type="checkbox"/> Cooling system replacement
<input checked="" type="checkbox"/> Compact florescent light bulbs	<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 6 - Outreach, 2605(b)(3) - Assurance 3, 2605(c)(3)(A)

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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):

Michigan informs low-income applicants of the availability of LIHEAP via notices to clients, State web-sites, letters, posters, publications, weatherization referrals, United Way's phone referral system and regular involvement with the Coalition to Keep Michigan Warm.

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

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

The LIHEAP crisis intervention component is coordinated with Michigan's existing SER program and MEAP. DHHS administers MEAP in consultation with the Michigan Agency for Energy (formerly Department of Licensing and Regulatory Affairs, Michigan Public Service Commission division). MEAP is funded through a residential funding factor and LIHEAP dollars. MEAP funds are awarded statewide through an RFP process. MEAP grantees develop their own crisis assistance component, in accordance with legislation described in Public Act 615 of 2012 and Public Act 95 of 2013. Michigan's energy-related emergency services to low income households will be provided through MEAP and the SER energy services component. The cost for energy services will be covered with LIHEAP and state funds.

LIHEAP weatherization will be coordinated with US Department of Energy (DOE) Weatherization Assistance Program. Local weatherization operators coordinate the LIHEAP and DOE funds to meet weatherization needs at the local level.

Michigan's Community Action Agencies provide energy assistance, referrals to the Weatherization Assistance Program and other self-sufficiency programs.

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

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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 checked="" 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 and the Department of Treasury will coordinate outreach activities to inform all LIHEAP eligible households of the program, as well as inform such households of other major energy programs. Target groups are senior citizens, disabled residents, Native Americans, migrants and households with young children. To reach this goal Community Action Agencies, the Michigan Public Service Commission, the Office of Services to the Aging, the Commission on Indian Affairs and other advocate groups are informed of the LIHEAP program.

Examples of outreach efforts include posters, state website, media announcements and local agency outreach.

In addition, the Department of Treasury will mail a Home Heating Credit application to all households eligible for the program during the previous fiscal year, including households with high home energy burdens, low income senior citizens who filed a property tax claim during the previous fiscal year and to cash assistance recipients (primarily FIP households).

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

Not applicable

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

The LIHEAP crisis intervention component will be coordinated with MEAP and the Department's Bureau of Community Action and Economic Opportunity (BCAEO). Crisis assistance is available statewide through Community Action Agencies, non-profit entities and directly with qualifying energy providers.

Clarification to 8.5 Heating - As required by the Income Tax Act of 1967, the Department of Treasury is responsible for determining eligibility and issuing benefits for the home heating credit, see attached.

Clarification to 8.5 Crisis - As outlined in the Interagency Agreement with Licensing and Regulatory Affairs and the MEAP RFP, the selected grantees determine crisis eligibility and processes the assistance payment. DHHS county offices determine eligibility for the SER crisis program and DHHS issues the payments to the energy vendors as well.

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

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

8.6 What is your process for selecting local administering agencies?

The Department of Health and Human Services has an interagency agreement with the Department of Treasury for the administration of heating assistance. DHHS has an interagency agreement with the Michigan Agency for Energy for the administration of MEAP. The BCAEO administers weatherization funds and deliverable fuel crisis assistance through community action agencies statewide.

The LIHEAP Weatherization dollars are allocated to current DOE Weatherization providers with active contracts with our departments. In 2016, BCAEO held a statewide RFP for Weatherization providers. Attached is an allocation chart for FY17.

8.7 How many local administering agencies do you use? 26 CAA's and 14 MEAP grantees

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 checked="" type="checkbox"/>	Other - describe

Fourteen MEAP grantees have been selected for FY17. The change results in DHHS Bureau of Community Action and Economic Opportunity opting not to apply for MEAP and the addition of two new grantees being selected. North Kent Community Services and United Way of Southeastern Michigan are new MEAP grantees for this fiscal year.

As a result of a new RFP process completed by BCAEO for Weatherization services, there are now 26 administering agencies; existing CAA's expanded their service territory to account for this change - there are no new subgrantees as a result.

New grantees were not selected as a result of mismanaged, misspent funds, or fraud.

Contact information:

Cherie Elahl

North Kent Community Services

10075 Northland Drive, Rockford Michigan 49341

and

Eric Davis

United Way for Southeastern Michigan

660 Woodward, Ste. 300, Detroit, Michigan 48226

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

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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.

Home Heating Credit: Benefits will be issued as an energy draft or vendor payment if the household has a direct responsibility to an energy supplier for heating costs or as a warrant if heat is included in the rent.

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

Clients are issued a statement notifying them of the amount of assistance paid if a payment is made to their energy supplier.

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?

Each energy provider is required to sign a Participation Agreement for LIHEAP. The agreement form outlines conditions for participation as a LIHEAP provider. The first condition on the form requires that, "The energy supplier of furnace contractor shall not charge the eligible household any more than the expected difference between the normal charge for the service and the payment amount received or expected from the Michigan Department of Health and Human Services (MDHHS)."

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?

Energy providers are required to sign a participation agreement that assures non-discrimination against eligible households. Vendor payments for energy services and energy drafts may be accepted only by enrolled energy suppliers. Local DHHS offices have access to the provider file through online inquiry and a provider list is provided to MEAP grantees on a monthly basis. Payments may only be authorized to enrolled suppliers. The Department of Treasury will not redeem energy drafts submitted by non-enrolled energy suppliers.

Home repair service providers must agree to non-discrimination provisions before payment will be made from the SER energy services component. All home repair service providers must be licensed by the State of Michigan Department of Licensing and Regulatory Affairs. The Authorization/Invoice utilized for the program must be signed by the provider to assure the provider's agreement with these provisions.

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.

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

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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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?

Michigan will cooperate with the Secretary with respect to data collection.

DHHS: Fiscal control and fund accounting procedures have been established to assure proper disbursement of and accounting for all federal funds received. As a state agency, DHHS must follow rigorous fiscal accountability and control procedures as laid out in the Michigan Office of Technology, Management, and Budget's Financial Management guide. The State of Michigan Financial Management Guide (FMG) represents a consolidation of state financial management policies and procedures. The FMG provides "one-stop shopping" for policies and procedures that were previously found in a variety of manuals, letters and other types of documents. These include the Administrative Guide to State Government, Financial Reporting and Accounting Manual (FRAM), payroll letters and directives, and ADPICS/R*STARS Security Manual.

The FMG is available in electronic format only. The OFM does not provide paper copies of the FMG, but does notify users of the guide when updates to the guide are issued.

A full copy of these procedures can be found at http://www.michigan.gov/dmb/0,1607,7-150-9131_9347---,00.html. In addition to this guidance, DHS has many resources available to help manage grants including the Federal Reporting Section, Grants Management Section and individual program area sections.

Interagency agreements (contracts) will specify the responsibilities of any state department and the DHS in the disbursement of federal funds and reporting the required data and fiscal information to the U.S. Department of Health and Human Services. Involved state departments will cooperate in providing reports, as outlined in the Inter-agency agreement, and with federal investigations undertaken in accordance with section 2608 of the Low Income Home Energy Assistance Act of 1981, as amended.

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	2015-059: Michigan was cited as potentially making 4 incorrect payments as a result of not budgeting assets, incomes or client contributions properly.	In Progress	training changes
2	financial	2015-060: Payment calculations were incorrect for 2 of the 29 sampled Home Heating Credit payments.	Yes	training changes
3	monitoring	Subrecipients were not notified of the federal award information at the time of the subaward.	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:

- Internal program review
- Departmental oversight
- Secondary review of invoices and payments
- Other program review mechanisms are in place. Describe:

Local Administering Agencies / District Offices:

- On - site evaluation
- Annual program review
- Monitoring through central database
- Desk reviews
- Client File Testing / Sampling
- Other program review mechanisms are in place. Describe:

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

Weatherization: The Department's Bureau of Community Action and Economic Opportunity (BCAEO) conducts the program monitoring for weatherization. We monitor 10 percent file reviews and 5 percent onsite technical monitoring. Grant managers monitor expenditures and grant compliance throughout the grant period. Annual programmatic and fiscal monitoring are completed at each agency along with quarterly production desk reviews. See the attached Monitoring Plan.

MEAP: MEAP grantees provide financial status reports on a monthly basis and provide program status reports on a quarterly basis, which are reviewed by MPSC staff and includes a sampling of client eligibility documentation. Reporting requirements are outlined in the RFP attached to this plan. DHS intends to work closely and provide training to the MPSC monitoring/audit staff who are reviewing MEAP assistance payments to ensure funds are being spent appropriately.

SER: The LIHEAP program office has been working with the Department's Office of Quality Assurance to developing a comprehensive review process for SER payments. This review process has been rolled out in phases and looks at various eligibility aspects of all SER services. Data from FY16 will be analyzed once compiled which will allow the department to identify areas needing additional training and monitoring while striving to improve payment accuracy.

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

Site Visits:

5 percent of LIHEAP weatherized homes are monitored based on monthly production reports from CAAs.

The Michigan Agency for Energy (MAE) will review and perform an attribute-sampling of the monthly client lists to review eligibility determinations as well as perform site visits with each grant recipient during the fiscal year. An initial site visit will be conducted with each grantee within six weeks of the grant agreement being signed.

Desk Reviews:

10 percent of LIHEAP weatherized homes are monitored based on monthly production reports from CAAs

10.8. How often is each local agency monitored ?

Annually. More often if necessary.

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

Data not available.

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

Data not available.

10.11. How many local agencies are currently on corrective action plans for eligibility and/or benefit determination issues? [None](#)

10.12. How many local agencies are currently on corrective action plans for financial accounting or administrative issues? [None](#)

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

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

N/A

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

N/A

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	08/15/2016	Public Hearing, Lansing

11.4. How many parties commented on your plan at the hearing(s)? 2

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

A representative of Michigan's 2-1-1 and Ecoworks provided comment regarding the use of Assurance 16 funds. Both individual's expressed their organization's interest in working with the Michigan Department of Human Services to utilize Assurance 16 funding.

The transcribed document and written comments received regarding the FY17 LIHEAP State Plan are attached.

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

That State of Michigan has already allocated a full 5% of funding to Assurance 16 activities. The original intent was to use these funds for self-sufficiency activities related to the Michigan Energy Assistance Program (MEAP). As a result of the comments received, there will be internal discussions regarding other possible uses of the funds. Michigan intends to obtain additional guidance from the AFC liaison regarding the use of Assurance 16 funding.

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? Not tracked

12.2 How many of those fair hearings resulted in the initial decision being reversed? Not tracked

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

None.

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

Each SER application and Decision Notice informs the applicant of their right to contest a department decision affecting eli-gibility or benefit levels whenever they believe the decision is incor-rect. The department provides an administrative hearing to review the decision and determine its appropriateness. The applicant, or their representative, has 90 calendar days from the date of the written notice of case action to request a hearing. The request must be received in the local office within the 90 days. See attached DHS-1514, Application for State Emergency Relief.

As outlined in the MEAP RFP in section III-D Tasks, MEAP grantees are required to, 'Establish a procedure by which applicants wishing to contest an eligibility decision or the timeliness of such a decision may be referred to the MAE for a re-evaluation of eligibility (Second Review Process).'

DHHS's BCAEO requires that each agency have an Appeal Policy established as outlined on pages 15-18 in Item 205 of the Community Services Policy Manual (CSPM), attached.

Department of Treasury HHC applicants will be advised of their opportunity to discuss any denial with Department of Treasury personnel. Applicants will be provided with a fair hearing which will be conducted by the Michigan Department of Treasury. Instructions regarding an HHC Adjustment or Denial can be found at the following link, http://www.michigan.gov/documents/taxes/HHC2014Checklist_455344_7.pdf

12.5 When and how are applicants informed of these rights?

The application forms and determination notices inform clients of their right to a hearing. These include an explana-tion of how and where to file a hearing request, and the right to be assisted by and represented by anyone the client chooses.

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

The application forms and each written notice inform clients of their right to a hearing. An individual may request a hearing because an application for assistance was not acted upon within the 10-day standard of promptness for crisis assistance.

12.7 When and how are applicants informed of these rights?

The applicant is informed of this information, in writing, on the application form and also on the eligibility determination notice once the level of benefits has been determined.

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

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: 06/30/2017

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

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

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

Assurance 16 funding will be allocated to the MEAP program in order to ensure that Michigan is meeting statutory requirements included in Public Act 615 of 2012, which states: "Energy assistance must include services that will enable participants to become or move toward becoming self-sufficient, including assisting participants in paying their energy bills on time, assisting participants in budgeting for and contributing to their ability to provide for energy expenses, and assisting participants in utilizing energy services to optimize on energy efficiency. By October 1, 2014, each entity that carries out a contract with the department under this section shall provide or coordinate these services. The department shall attempt to coordinate its efforts with the efforts of other state departments or agencies to assist low-income households in becoming or moving toward becoming self-sufficient."

Allowable self-sufficiency expenditures include needs assessment, counseling, referrals to programs that aid in self-sufficiency, and assisting households to enroll in utility type affordable payment plans or other payment arrangements.

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

Up to 5% of the Block Grant will be made available through the Interagency Agreement in place with the Michigan Agency for Energy. Programmatic and fiscal monitoring of the MEAP grantees will ensure that expenditure does not exceed the 5% allowed by LIHEAP statute.

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

No LIHEAP funds were designated to Assurance 16 for FY2016.

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

No LIHEAP funds were designated to Assurance 16 for FY2016.

13.5 How many households applied for these services? 0

13.6 How many households received these services? 0

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

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: 06/30/2017

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

Section 14:Leveraging Incentive Program, 2607(A)

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

Yes No

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

N/A

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. Â§ 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

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: 06/30/2017

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

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: site visits with MEAP grantees

Employees are provided with policy manual

Other-Describe:

DHHS Office of Workforce Development & Training, in conjunction with the LIHEAP program office, develops training materials when policy changes are made. The materials are shared with local office DHHS staff.

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

c. Vendors

Formal training conference

How often?

Annually

Biannually

As needed

<input type="checkbox"/>	Other - Describe:
<input checked="" type="checkbox"/>	Policies communicated through vendor agreements
<input type="checkbox"/>	Policies are outlined in a vendor manual
<input checked="" type="checkbox"/>	Other - Describe: Changes in policy requirements are typically communicated through phone or mail and are also discussed at the monthly Coalition to Keep Michigan Warm meetings. The Energy Supplier Agreement form was revised to include the following instructions: "Please call 1.800.222.8558 to submit a Welfare fraud complaint if you believe an individual or a business has been issued benefits they were not entitled to." BCAEO holds an annual WAP conference for Weatherization as well.
15.2 Does your training program address fraud reporting and prevention? <input checked="" type="radio"/> Yes <input type="radio"/> No	
<p style="color: red;">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.</p>	

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

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

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 06/30/2017

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

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

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

The LIHEAP program office is working internally to identify the business needs and technical solutions required for obtaining and reporting the required performance measures. LIHEAP crisis applicants are now reporting the status of their emergency (disconnected vs. shut off notice or out of fuel vs. at risk of running out, etc.) since 10/1/2015. Data collection will begin with the three largest companies for natural gas and electricity for FY16, with a goal of expanding our data collection to additional providers in FY17.

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)

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: 06/30/2017

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

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:

Information on reporting fraud is included on the Department's Assistance Application, which is used for other state and federally funded assistance programs such as TANF and SNAP.

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		All Adults in Household		All Household Members	
Social Security Card is photocopied and retained	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required
	<input checked="" type="checkbox"/>	Requested	<input checked="" type="checkbox"/>	Requested	<input checked="" type="checkbox"/>	Requested
Social Security Number (Without actual Card)	<input checked="" type="checkbox"/>	Required	<input checked="" 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

	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				
	Other	Applicant Only Required	Applicant Only Requested	All Adults in Household Required	All Adults in Household Requested	All Household Members Required	All Household Members Requested
1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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							
<input checked="" type="checkbox"/>	Verify SSNs with Social Security Administration						
<input checked="" type="checkbox"/>	Match SSNs with death records from Social Security Administration or state agency						
<input checked="" type="checkbox"/>	Match SSNs with state eligibility/case management system (e.g., SNAP, TANF)						
<input type="checkbox"/>	Match with state Department of Labor system						
<input checked="" type="checkbox"/>	Match with state and/or federal corrections system						
<input checked="" type="checkbox"/>	Match with state child support system						
<input checked="" type="checkbox"/>	Verification using private software (e.g., The Work Number)						
<input type="checkbox"/>	In-person certification by staff (for tribal grantees only)						
<input type="checkbox"/>	Match SSN/Tribal ID number with tribal database or enrollment records (for tribal grantees only)						
<input type="checkbox"/>	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.							
<input type="checkbox"/>	Clients sign an attestation of citizenship or legal residency						
<input type="checkbox"/>	Client's submission of Social Security cards is accepted as proof of legal residency						
<input checked="" type="checkbox"/>	Noncitizens must provide documentation of immigration status						
<input type="checkbox"/>	Citizens must provide a copy of their birth certificate, naturalization papers, or passport						
<input checked="" type="checkbox"/>	Noncitizens are verified through the SAVE system						
<input type="checkbox"/>	Tribal members are verified through Tribal enrollment records/Tribal ID card						
<input checked="" type="checkbox"/>	Other - Describe:						
The data match with the Social Security Administration is sufficient verification of citizenship.							
17.5. Income Verification							
What methods does your agency utilize to verify household income? Select all that apply.							
<input checked="" type="checkbox"/>	Require documentation of income for all adult household members						
<input checked="" type="checkbox"/>	Pay stubs						
<input type="checkbox"/>	Social Security award letters						
<input type="checkbox"/>	Bank statements						
<input type="checkbox"/>	Tax statements						
<input type="checkbox"/>	Zero-income statements						
<input type="checkbox"/>	Unemployment Insurance letters						
<input type="checkbox"/>	Other - Describe:						
<input checked="" type="checkbox"/>	Computer data matches:						
<input checked="" type="checkbox"/>	Income information matched against state computer system (e.g., SNAP, TANF)						
<input checked="" type="checkbox"/>	Proof of unemployment benefits verified with state Department of Labor						
<input checked="" type="checkbox"/>	Social Security income verified with SSA						

Utilize state directory of new hires

Other - Describe:

Electronic data exchanges including the department's internal Consolidated Inquiry and Single Online Query for income records.

17.6. Protection of Privacy and Confidentiality

Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.

Policy in place prohibiting release of information without written consent

Grantee LIHEAP database includes privacy/confidentiality safeguards

Employee training on confidentiality for:

Grantee employees

Local agencies/district offices

Employees must sign confidentiality agreement

Grantee employees

Local agencies/district offices

Physical files are stored in a secure location

Other - Describe:

17.7. Verifying the Authenticity

What policies are in place for verifying vendor authenticity? Select all that apply.

All vendors must register with the State/Tribe.

All vendors must supply a valid SSN or TIN/W-9 form

Vendors are verified through energy bills provided by the household

Grantee and/or local agencies/district offices perform physical monitoring of vendors

Other - Describe and note any exceptions to policies above:

17.8. Benefits Policy - Gas and Electric Utilities

What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.

Applicants required to submit proof of physical residency

Applicants must submit current utility bill

Data exchange with utilities that verifies:

Account ownership

Consumption

Balances

Payment history

Account is properly credited with benefit

Other - Describe:

Centralized computer system/database tracks payments to all utilities

Centralized computer system automatically generates benefit level

Separation of duties between intake and payment approval

Payments coordinated among other energy assistance programs to avoid duplication of payments

Payments to utilities and invoices from utilities are reviewed for accuracy

Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities

Direct payment to households are made in limited cases only

Procedures are in place to require prompt refunds from utilities in cases of account closure

Vendor agreements specify requirements selected above, and provide enforcement mechanism

<input type="checkbox"/> Other - Describe:
17.9. Benefits Policy - Bulk Fuel Vendors
What procedures are in place for averting fraud and improper payments when dealing with bulk fuel suppliers of heating oil, propane, wood, and other bulk fuel vendors? Select all that apply.
<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 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 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 type="checkbox"/> Other - Describe:
Crisis payments to deliverable fuel vendors are not released until a service invoice has been received from the provider.
17.10. Investigations and Prosecutions
Describe the Grantee's procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients/staff/vendors found to have committed fraud. Select all that apply.
<input checked="" type="checkbox"/> Refer to state Inspector General
<input checked="" 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
Providers who are unwilling to cooperate in the refund/recoupment process will have their provider enrollment terminated. In some instances the State's Department of Treasury may impose a tax offset to collect the amount over issued.
When an SER over issuance is found, it is the responsibility of the worker to determine the amount and contact the provider to obtain a refund. The worker must provide supporting documentation of the over issuance to the local fiscal office. The fiscal unit will establish an account receivable and proceed with the collection letter.
Providers are instructed to include the customer name, address and case number and return the overpayment to:
Department of Health and Human Services
Cashiers Unit
P.O. Box 30802
Lansing, MI 48909
<input type="checkbox"/> Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned?
<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 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 18: Certification Regarding Debarment, Suspension, and Other Responsibility Matters

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)

235 S. Grand Avenue
 * Address Line 1

Address Line 2

Address Line 3

Lansing
 * City

MI
 * State

48933-1805
 * Zip Code

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

Alternate II. (Grantees Who Are Individuals)

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

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

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

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

Section 20: Certification Regarding Lobbying

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">• Delegation Letter is required if someone other than the Governor or Chairman Certified this Report.
<ul style="list-style-type: none">• Heating component benefit matrix, if applicable
<ul style="list-style-type: none">• Cooling component benefit matrix, if applicable
<ul style="list-style-type: none">• Minutes, notes, or transcripts of public hearing(s).