

STATE WAIVER REQUEST

1. **Waiver Serial Number (if applicable):**
2. **Type of request:** Initial
3. **Regulation citations:** 7 CFR 275.5.(b) and 7 CFR 275.5(2)
4. **State:** Alaska
5. **Region:** Western
6. **Regulatory requirements:** Under 7 CFR 275.5(b), State agencies shall conduct a review once every year for large project areas, once every two years for medium project areas, and once every three years for small project areas, unless an alternate schedule is approved by FNS.

Under 7 CFR 275.5(2), A request for an alternate review schedule shall be submitted for approval in writing with a proposed schedule and justification. In any alternate schedule, each project area must be reviewed at least once every three years.

Approval of an alternate schedule is dependent upon a State agency's justification that the project areas that will be reviewed less frequently than required in paragraph (b)(1) of this section are performing adequately and that previous reviews indicate few problems or that known problems have been corrected. FNS retains the authority for approving any alternate schedule and may approve a schedule in whole or in part. Until FNS approval of an alternate schedule is obtained, the State agency shall conduct reviews in accordance with paragraph (b)(1) of this section.

7. **Description of alternative procedures:** The State of Alaska is requesting approval to waive the requirement to conduct the management evaluation reviews in 2020. As an alternative, we are requesting to postpone the reviews until 2021 due to the COVID-19 health emergency.
8. **Justification for request:** The State of Alaska believes that this waiver will provide ease of program administration pressures at a time when offices are burdened with program changes caused by the COVID-19 health emergency.

The waiver will also help minimize the potential for spread of the COVID-19 virus caused by intra-state travel that is involved with the management evaluation process.

Many of the regulations currently fall under blanket waivers and would not be reflective of normal SNAP operating procedures. The functions to be reviewed, including ABAWD, have been impacted by the COVID-19 health emergency. This could make completing file reviews problematic.

- 9. Anticipated impact on households and State agency operations:** The waiver will allow staff to be made available to prioritize focus on program administration surrounding the COVID-19 health emergency. This will have a positive impact on households as we can focus on program accessibility during the COVID-19 health emergency.
- 10. Caseload information, including percent, characteristics, and quality control error rate for affection portion (if applicable):** This waiver affects the entire state.
- 11. Anticipated implementation date and time period for which waiver is needed:** The State is requesting that this waiver be approved effective immediately.
- 12. Proposed quality control review procedures:** No special Quality Control review processes will be required.
- 13. State agency submitting waiver request and State contact person:**

Matthew Stangley
Chief of Policy & Program Development
Division of Public Assistance

- 14. Signature and title of requesting official:**

Matthew Stangley

Matthew Stangley
Chief of Policy & Program Development

- 15. Date of request:** April 4, 2020
- 16. State agency staff contact (name/email/telephone):**

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18. Regional office contact person (to be completed by FNS regional office):