

STATE WAIVER REQUEST

1. **Type of request:** Initial
2. **Regulatory citation:** Families First Coronavirus Response Act; 7 Code of Federal Regulations (CFR) 7 CFR §273.9;
3. **State:** Oregon
4. **Region:** Western
5. **Regulatory requirements:**

7 CFR §273.9(b)(2)(i): Identifies as unearned income, assistance payments from federal or federally aided public assistance programs, such as supplemental security income (SSI) or Temporary Assistance for Needy Families (TANF); general assistance (GA) programs); or other assistance programs based on need. Such assistance is considered unearned income even if provided in the form of a vendor payment (provided to a third party on behalf of the household), unless the vendor payment is specifically exempt from consideration as countable income.

7 CFR §273.9(b)(2)(v): Identifies as unearned income, payments from Government-sponsored programs, dividends, interest, royalties, and all other direct money payments from any source which can be construed to be a gain or benefit.
6. **Description of alternative procedures:** For all SNAP households, temporarily exclude unearned income from consideration when received in the form of emergency cash assistance, including housing assistance, as a result of a county, or other local municipality, state, or federally funded response to the COVID-19 pandemic. This income exclusion will apply, through the length the approved waiver, when the unearned income is reported at application, periodic report, recertification or if the household reports the unearned income during the certification period. This income exclusion will apply regardless of the frequency of the payment.
7. **State specific alternative procedures, if applicable:** None
8. **Justification for request:** In accordance with CDC guidelines this waiver intends to reduce opportunities for COVID-19 community spread by reducing the need for clients to have physical contact with potentially infected employers, co-workers and others to meet SNAP requirements. This additional efficiency will afford our staff time to serve a greater number of

new applicants and process reported changes that increase benefits from current recipients while providing nutritional benefits to households affected by the COVID-19 pandemic.

9. Anticipated impact on households and State agency operations:

Oregon anticipates that implementation of this waiver will result in time savings for eligibility and administrative workers. This process will improve timeliness of benefits while reducing the risk of transmission of the virus due to the decreased contact an applicant will be required to have with the agency.

10. Caseload information, including percent, characteristics, and quality control error rate for affection portion:

Caseload Information:

Oregon's total SNAP caseload for December of 2019 was 348,294 or 586,789 individuals.

Quality Control Information:

Oregon doesn't anticipate that this waiver request will result in an increase in Quality Control errors.

11. Anticipated implementation date and time period for which waiver is needed:

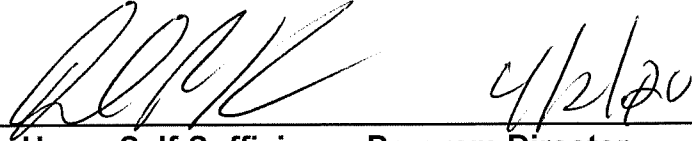
This waiver will be implemented upon approval and will be effective during the entire month, discontinuing the last day of the month the COVID-19 pandemic is declared ended.

12. Proposed quality control review procedures: There will be no special quality control procedures needed in conjunction with this waiver request. However, State Quality Control will be tracking this error element for evaluation purposes.

13. State agency submitting waiver request and State contact person:

Oregon Department of Human Services
Self-Sufficiency Programs
Supplemental Nutrition Assistance Program
Contact: Heather Miles, SSP Design Program Manager

14. Signature and title of requesting official:

Handwritten signature of Dan Haun and the date 4/2/20.

**Dan Haun, Self-Sufficiency Program Director
Oregon Department of Human Services**

15. Date of request:

April 1, 2020

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