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DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
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**GAVIN NEWSOM**  
GOVERNOR

April 13, 2020

Mr. Charles Tobin, Regional Program Director  
Supplemental Nutrition Assistance Program  
Western Regional Office  
Food and Nutrition Service  
90 Seventh Street, Suite 10-100  
San Francisco, CA 94103

**SUBJECT: CALIFORNIA QUALITY CONTROL (QC) WAIVER REQUEST PACKAGE**

Dear Mr. Tobin:

As you know, the State of California (the State) and the California Department of Social Services (CDSS) are working to respond swiftly and effectively to the Coronavirus Disease 2019 (COVID-19) emergency. Because of a statewide stay at home order and public health guidelines regarding physical distancing, CDSS is requesting waivers of certain Supplemental Nutrition Assistance Program (SNAP) regulations from the US Department of Agriculture (USDA) Food and Nutrition Service (FNS) to ensure that Californians can continue to access SNAP benefits (known in California as CalFresh).

Please find attached our third waiver request package in response to the COVID-19 pandemic. This waiver package consists of four Quality Control (QC) waivers that seek to temporarily hold California harmless from errors caused by implementation of COVID-19 eligibility waivers, lift sanction requirements, provide flexibility when reviewers cannot locate a household, and accept collateral contact and/or client statement to complete QC reviews when attempts to verify information have been otherwise unsuccessful.

The CDSS requests that these waivers be effective for FFY 2020 QC sample months beginning October 2019 through September 2020. The CDSS also proposes the option to extend the waiver period if COVID-19 continues to be the cause of a state of emergency for the nation, California, or its local counties.

We appreciate FNS' consideration of California's request and appreciate a prompt response so that we may issue necessary guidance and implement changes to our business processes and operating procedures. In addition, to expedite the review and decision process for CDSS' request, we are available for a conference call at your earliest convenience to discuss our request.

If you have any questions, please do not hesitate to contact me at [alexis.fernandez@dss.ca.gov](mailto:alexis.fernandez@dss.ca.gov) or 916-653-6162.

Sincerely,

Alexis Fernández  
Chief, CalFresh and Nutrition Branch  
California Department of Social Services

## WAIVER REQUEST

### Temporary Waiver of “Unable to Locate” for Quality Control Review Cases

1. **Waiver Serial Number (if applicable):**
2. **Type of request:** Initial
3. **Regulatory citation:** 7 CFR Section 275.12; 7 CFR Section 275.12(c)(2); FNS 310 Handbook Section 338; FNS 310 Handbook Section 442; FNS 310 Handbook Section 432; FNS 310 Handbook Section 442.1
4. **State:** California
5. **Region:** Western Region
6. **Regulatory requirements:**

**7 CFR § 275.12:** Requires that a sample of households which were certified prior to, or during, the sample month and issued food stamp benefits for the sample month shall be selected for quality control review. These active cases shall be reviewed to determine if the household is eligible and, if eligible, whether the household is receiving the correct allotment. The determination of a household's eligibility shall be based on an examination and verification of all elements of eligibility (i.e., basic program requirements, resources, income, and deductions). The elements of eligibility are specified in 7 CFR Sections 273.1 and 273.3 through 273.9.

**7 CFR § 275.12(c)(2):** Requires that the reviewer obtain verification from collateral contacts in all instances when adequate documentation was not available from the participant. This second party verification shall cover each element of eligibility as it affects the household's eligibility and allotment. The reviewer shall make every effort to use the most reliable second party verification available (for example, banks, payroll listings, etc.), in accordance with FNS guidelines, and shall thoroughly document all verification obtained. If any information obtained by the QC reviewer differs from that given by the participant, then the reviewer shall resolve the differences to determine which information is correct before an error determination is made. The manner in which the conflicting information is resolved shall include recontacting the participant unless the participant cannot be reached. When resolving conflicting information reviewers shall use their best judgment based on the most reliable data available and shall document how the differences were resolved.

**FNS 310, Section 338 – Unable to Interview:** Cases are not subject to review if the interview cannot be completed because all individuals who could be interviewed:

- Have been hospitalized, incarcerated or placed in an institution and are expected to remain there for 115 days after the end of the sample month, or
- Cannot be located after all reasonable efforts to do so have been made and documented as provided in Section 442.1.

**FNS 310, Section 432 – Collateral Contact Refusal to Cooperate:** A third party may refuse to provide the information which is needed to verify an element of eligibility or basis of issuance. The program has no authority to require third party

cooperation. If verification cannot be obtained from other known sources, the household must be contacted again to obtain another source. A collateral's refusal to cooperate should not be interpreted as the household's refusal to cooperate. Documentation of a third party refusal to cooperate must be shown on the appropriate element on Form FNS-380, Column 3, Field Finding.

**FNS 310, Section 442 – Incomplete Case:** Requires every reasonable effort to be made to complete all active cases except for those Not Subject to Review (NSTR). All cases reported as NSTR and could not be completed must be reported to the State agency for appropriate action on an individual case basis.

**FNS 310, Section 442.1 – Case Record or Household Cannot Be Found:** The reviewer must make all reasonable efforts to locate the case record and the household in an attempt to complete the review. The reviewer must attempt to locate the household by contacting at least two sources that the reviewer determines are most likely to know the household's current address. The reviewer must explain why selected sources are most likely to know where the household currently resides. To qualify as a 10-18-18 (Change 2) 4-11 FNS HANDBOOK 310 contact, the source must have familiarity with or knowledge of the household. These sources must be documented in detail on Form FNS-380, Column 3. Such sources may include, but are not limited to:

1. The local office of the U.S. Postal Service
2. The State Motor Vehicle Department
3. The owner or property manager of the residence at the address in the case record, and
4. Any other appropriate sources based on information contained in the case record, such as public utility companies, telephone company, employers, relatives or school officials.

Appropriate sources for homeless households may include soup kitchen personnel, homeless shelter operators, or transient housing officials. To qualify as a contact, the source must provide feedback; messages left on answering machines do not qualify. After the reviewer has attempted to locate the household and has documented the response of each source contacted, if the household still cannot be located and the reviewer has documented evidence that the household did actually exist, the reviewer must report the active case as not subject to review (Code 2).

#### **7. Description of alternative procedures:**

California will drop case code-3 Incomplete when reviewers cannot locate the household, collateral contact refuses to provide verification, and there is no available information in the case record or known to the county, and to further allow reviewers to drop case code-2 Not Subject to Review (NTSR) for these households.

#### **8. Justification for request:**

The Governor of California declared a State of Emergency on March 4, 2020 to reduce the spread of the Coronavirus Disease 2019 (COVID-19). Extensive public health warnings have been issued statewide to reduce exposure, including orders to implement social distancing when conducting essential business, eliminate group

gatherings and to require home isolation for vulnerable populations including all people aged 65 years of age or older. On March 19, the Governor of California issued a statewide “stay-at-home” order that is in effect until further notice. On March 22, the president approved California's request for a Major Disaster Declaration. These restrictions may be in place for weeks and months to come.

Further, many non-essential businesses have temporarily closed or reduced staffing, resulting in significant and immediate job loss across the state. The economic impacts of COVID-19 have hit many employers and organizations who are unable to provide verification to verify the household's eligibility for SNAP benefits.

As a result, the state of California is severely limited in their ability to complete QC reviews due to modified procedures that limit travel and person-to-person contact in accordance with county, state, and federal public health guidance. Due to COVID-19, households are finding it difficult to contact reviewers or obtain necessary verifications for a QC review. Additionally, cooperating with QC reviews is especially challenging for SNAP households experiencing homelessness who may have moved temporarily or are taking shelter in another county or location due to COVID-19. Locating a homeless household is going to prove to be more challenging during the COVID-19 pandemic than previous to it. Several counties have already started temporarily housing homeless individuals in accordance to Executive Order N-25-20. At this time, reviewers have no ability to determine where individuals are placed.

**9. Anticipated impact on households and State agency operations:**

The QC selection process involves a random sample of all active and negative cases. All households selected for QC review may potentially be affected by this waiver. There will be no impact on State agency operations.

**10. Caseload information, including percent, characteristics, and quality control error rate for affection portion (if applicable):**

California anticipates this waiver will impact approximately 350 federal sample cases and 1800 state sample cases for FFY 2020.

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

California proposes that the requested waiver be approved retroactively. If approved as proposed, the waiver would apply to FFY 2020 QC sample months beginning October 2019 through September 2020. California also proposes the option to extend the waiver for additional months if COVID-19 continues to be the cause of a state of emergency for the nation, California, and its local counties.

**12. Proposed quality control review procedures:**

If California has no success in contacting collateral contacts or collateral contact refuses to provide verification (employers, someone to verify household composition, etc.), then the case should be dropped as case code 2-NSTR instead of case code 3-Incomplete.

**13. State Agency Submitting Waiver Request and State Contact Person:**

Contact Name: Alexis Fernández  
CalFresh & Nutrition Branch Chief  
California Department of Social Services  
916-653-6162 | [Alexis.Fernandez@dss.ca.gov](mailto:Alexis.Fernandez@dss.ca.gov)

**14. Signature and Title of Requesting Official:**



Alexis Fernández  
Chief, CalFresh & Nutrition Branch  
916-653-6162 | [Alexis.Fernandez@dss.ca.gov](mailto:Alexis.Fernandez@dss.ca.gov)

**15. Date of Request:** 04/13/2020

**16. State Agency Staff Contact (name/email/telephone):**

Tami Gutierrez  
CalFresh Operations Bureau Chief  
916-651-2949 | [Tami.Gutierrez@dss.ca.gov](mailto:Tami.Gutierrez@dss.ca.gov)

Kristina Meza  
Acting Bureau Chief, CalFresh Policy & Employment Bureau  
916-653-1493 | [Kristina.Meza@dss.ca.gov](mailto:Kristina.Meza@dss.ca.gov)

**17. Regional Office Contact Person (to be completed by FNS regional office):**