STATE WAIVER REQUEST
Waiving Administrative Hearing Timelines for Supplemental Nutrition Assistance Program (SNAP)

1. Type of request: Initial

2. Primary citation: 7 CFR §273.15(c); 7 CFR §273.15(j)(2)

3. State: District of Columbia

4. Region: MARO

5. Requirements:
   - 7 CFR §273.15(c) requires within 60 days of receipt of a request for a fair hearing, that the State shall assure that the hearing is conducted, a decision is reached and, and the household and local agency are notified of the decision.
   - 7 CFR §273.15(j)(2) requires that the State provide a written notice to the household within 10 days of the household’s oral request to withdraw a hearing confirming the withdrawal request and providing the household with an opportunity to request a hearing.

6. Proposed alternative procedures: The District of Columbia (District) is requesting flexibility relating to these timeframes due to office closures or staff reductions relating to COVID-19. The District will strive to meet these timelines but is seeking a waiver of them if compliance becomes impossible.

7. Justification for request:
   - The Secretary of Health and Human Services declared a Public Health Emergency under section 319 of the Public Health Service Act as a result of COVID-19 retroactive to January 27, 2020.\(^1\)
   - The Mayor of the District of Columbia declared a Public Emergency and a Public Health Emergency as a result of the COVID-19 effective March 11, 2020 and extended on March 20, 2020.\(^2\)
   - On March 24, 2020, the Mayor of the District of Columbia ordered the temporary closure of non-essential business and prohibition of gatherings of 10 or more people effective March 25, 2020 and expiring April 24, 2020.\(^3\)

As a result of the COVID-19 pandemic, resulting Mayoral orders in place, and increase in COVID-19 positive tests\(^4\) in the District, the District may close the

\(^2\) Source: [https://mayor.dc.gov/sites/default/files/u23/Mayor%60s%20%20Order%202020-50.pdf](https://mayor.dc.gov/sites/default/files/u23/Mayor%60s%20%20Order%202020-50.pdf)
\(^3\) Source: [https://coronavirus.dc.gov/sites/default/files/dc/sites/mayormb/release_content/attachments/Mayor%27s%20Order%202020-053%20Closure%20of%20Non-Essential%20Businesses%20and%20Prohibitions.pdf](https://coronavirus.dc.gov/sites/default/files/dc/sites/mayormb/release_content/attachments/Mayor%27s%20Order%202020-053%20Closure%20of%20Non-Essential%20Businesses%20and%20Prohibitions.pdf)
hearing office, rendering hearing officers unable to conduct hearings and write
decisions within the specified timeframes. Similarly, the Legal assistants who accept
hearing requests, schedule the hearings and are responsible for providing the 10-day
notice to households when they orally withdraw hearing requests may not be able to
come to work due to closures or the need to stay home as a result of illness, exposure
to COVID-19 or, to attend to the needs of children who are unable to attend school
due to school closures.

8. **Affected Caseload:** The waiver would apply to households who submit a hearing
request or withdraw a request during such times that staffing is significantly reduced.
The District cannot quantify the number of households this waiver might impact. The
waiver will allow for households to have adequate time to submit pertinent
documentations for the hearing record and the hearing officer will have enough time
to render a thorough and sound hearing decision.

9. **Anticipated implementation date and time period for which waiver is needed:**
The District is requesting that this waiver be effective on approval and for the
duration of the federal COVID-19 Emergency Declaration and District of Columbia
State of Emergency and a Public Health Emergency related to COVID-19, ending
only after all of these emergency declarations have concluded.

10. **State agency submitting waiver request and State contact person:**

    Anthea Seymour
    Administrator
    Economic Security Administration
    Department of Human Services
    District of Columbia Government
    64 New York Ave, NE, 6th Floor
    Washington, DC 20002
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    Anthea.Seymour@dc.gov

11. **Signature and Title of Requesting State Agency Official:**

    __________________________________________________________
    Title: Administrator, Economic Security Administration,
    Department of Human Services,
    District of Columbia Government
    Email for transmission of response: Anthea.Seymour@dc.gov

12. **Date of request:**
    March 30, 2020