April 21, 2020

Grace B. Hou
Secretary
Illinois Department of Human Services
Harris II Building, 3rd Floor
100 South Grand Avenue, East
Springfield, Illinois  62762

RE: Supplemental Nutrition Assistance Program (SNAP) – Illinois Adjustment
Request for Telephonic Designation of Authorized Representative – Due to Novel Coronavirus (COVID-19) Approval

Dear Ms. Hou:

This letter transmits the approval of the Illinois Department of Human Services (DHS) request to adjust SNAP regulations at 7 CFR 273.2(n)(1)(i), which allow authorized representatives to complete application procedures on behalf of the household, provided the authorized representative is an adult sufficiently aware of relevant household circumstances and the household designates the individual as the authorized representative in writing.

Under this adjustment (COV-074), the State can allow certain community partners and advocates to sign an application as an authorized representative of a household based on the household’s verbal assent. The community partner or advocate must obtain verbal assent from the household over the phone giving the community partner approval to serve as the authorized representative for the purpose of signing the application. The community partner or advocate would then be able to sign the application as the client’s authorized representative without a written designation.

This adjustment permits community partners or advocates to serve as authorized representatives for the purposes of signing the application. The community partners or advocates may continue to provide application assistance, in accordance with 7 CFR 272.4(a)(2).

The Food and Nutrition Service (FNS) is approving this adjustment under authorization of the Families First Coronavirus Response Act (P.L. 116-127) for a period of 3 months, effective March 1, 2020 through May 31, 2020. FNS has determined this adjustment to be consistent with what is practicable under actual conditions in areas affected by the COVID-19 Public Health Emergency.

The approval is contingent upon the State agency’s compliance with the conditions and data reporting components in item 10 of Enclosure 1 and are due 45 days after expiration (July 15, 2020). The detailed waiver response is enclosed.
Please note that this approval may differ from the State’s request. If you have questions or need additional information regarding this adjustment, please contact your respective Regional office representative.

Sincerely,

SASHA GERSTEN-PAAL

Sasha Gersten-Paal
Director
Program Development Division
Supplemental Nutrition Assistance Program

Enclosure
Enclosure 1

VERBAL ASSENT OF AUTHORIZED REPRESENTATIVE
DESIGNATION ADJUSTMENT RESPONSE

1. Waiver serial number:  COV-074

2. Type of request:  Initial

3. Regulatory citation:  7 CFR 273.2(n)(1)(i)

4. State:  Illinois

5. Region:  MWRO

6. Regulatory requirements:  Supplemental Nutrition Assistance Program (SNAP) regulations at

7 CFR 273.2(n)(1)(i) allow for a nonhousehold member to be designated as an authorized representative for the application process provided that the person is an adult who is sufficiently aware of relevant household circumstances and the authorized representative designation has been made in writing by a responsible member of the household.

7. Description of alternative procedures:  The State will allow community partners or advocates to serve as authorized representatives in order to sign applications for households over the phone. This adjustment will apply to the community partners or advocates listed below:

- Feeding Illinois
- Illinois Hunger Coalition
- Catholic Charities
- Greater Chicago Food Depository
- Chicago Public Schools
- Illinois Coalition for Immigrant and Refugee Rights

Should the State wish to include additional community partners or advocates, it must submit such a request in writing to FNS for approval. Community partners and advocates may continue to provide application assistance in accordance with 7 CFR 272.4(a)(2).

The community partners or advocates must obtain verbal assent from the client over the phone to permit the community partner or advocate to serve as the authorized representative for the purpose of signing the application. Community partners and advocates who accept verbal assent must document the date and time of the client’s assent in writing and record the assent in the comment field in the ABE.Illinois.gov application system.

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The community partner or advocate would then be able to sign the application as the client’s authorized representative and submit the application to the State electronically through ABE.Illinois.gov. The State must record the information about the client’s designation of the authorized representative in the case file.

8. **Action and reason for approval or denial:** The Food and Nutrition Service (FNS) recognizes the need for adjustments due to the COVID-19 Public Health Emergency. As authorized by the Families First Coronavirus Response Act (P.L. 116-127), FNS’ approval of this adjustment is based on the determination that the adjustment is consistent with what is practicable under actual conditions in areas affected by the COVID-19 Public Health Emergency. FNS is approving the State’s request for a period of 3 months, effective March 1, 2020, through May 31, 2020.

9. **Conditions and reasons:** FNS is approving this adjustment subject to the following conditions:

   - The State will continue to verify the identity of both the applicant and the authorized representative, in accordance with 7 CFR 273.2(f)(1)(vii);
   - Community partners or advocates utilizing this adjustment must inform the household that they are signing the application on behalf of the household and that the household can choose to submit the application itself through other means;
   - Community partners or advocates designated as authorized representatives under this adjustment will be considered authorized representatives only for the purpose of signing the application, not for completing other parts of the application process, such as the interview, or obtaining or using benefits on the household’s behalf (community partners or advocates may continue to provide application assistance under 7 CFR 272.4(a)(2));
   - Community partners and advocates who accept verbal assent must document in writing the date and time of the client’s verbal assent of the authorized representative designation and record the assent in the comment field in the ABE.Illinois.gov application system; and
   - The State agency has the capacity to provide to FNS the data required for evaluation of the caseload.

10. **Evaluation Data Requirements**
    The State agency must provide to FNS the data and analysis listed below required for evaluation of this adjustment:

    - Estimated number of households affected by this adjustment;
    - A narrative on the effect of program access and client satisfaction, including an analysis of any client or advocate complaints received related to the adjustment procedure;
A narrative on the effect of providing timely and accurate benefits; and
A narrative on the effect of any other aspects of the eligibility process including the ability to manage staff caseload growth and the impact on administrative efficiency.

11. Expiration date: May 31, 2020

12. Quality control procedures: No special Quality Control (QC) procedures are required for cases subject to the provisions of this waiver. Cases should be reviewed using standard review procedures contained in the FNS Handbook 310.

13. Anticipated implementation date (notify FNS if actual date differs): Upon receipt of approval.