

## STATE WAIVER REQUEST

1. **Waiver Serial Number (if applicable):**
2. **Type of request:** Initial
3. **Regulatory citation:** 7 CFR 273.2
4. **State:** Rhode Island
5. **Region:** NERO
6. **Regulatory requirements:** (5) *Notice of Required Verification.* The State agency shall provide each household at the time of application for certification and recertification with a notice that informs the household of the verification requirements the household must meet as part of the application process. The notice shall also inform the household of the State agency's responsibility to assist the household in obtaining required verification provided the household is cooperating with the State agency as specified in (d)(1) of this section. The notice shall be written in clear and simple language and shall meet the bilingual requirements designated in §272.4(b) of this chapter. At a minimum, the notice shall contain examples of the types of documents the household should provide and explain the period of time the documents should cover.

(f) *Verification.* Verification is the use of documentation or a contact with a third party to confirm the accuracy of statements or information. The State agency must give households at least 10 days to provide required verification.

(1) *Mandatory verification.* State agencies shall verify the following information prior to certification for households initially applying:

(i) *Gross nonexempt income.* Gross nonexempt income shall be verified for all households prior to certification. However, where all attempts to verify the income have been unsuccessful because the person or organization providing the income has failed to cooperate with the household and the State agency, and all other sources of verification are unavailable, the eligibility worker shall determine an amount to be used for certification purposes based on the best available information.

(4) *Sources of verification—(i) Documentary evidence.* State agencies shall use documentary evidence as the primary source of verification for all items except residency and household size. These items may be verified either through readily available documentary evidence or through a collateral contact, without a requirement being imposed that documentary evidence must be the primary source of verification. Documentary evidence consists of a written confirmation of a household's circumstances. Examples of documentary evidence include wage stubs, rent receipts, and utility bills. Although documentary evidence shall be the primary source of verification, acceptable verification shall not be limited to any single type of

document and may be obtained through the household or other source. Whenever documentary evidence cannot be obtained or is insufficient to make a firm determination of eligibility or benefit level, the eligibility worker may require collateral contacts or home visits. For example, documentary evidence may be considered insufficient when the household presents pay stubs which do not represent an accurate picture of the household's income (such as out-dated pay stubs) or identification papers that appear to be falsified.

(ii) *Collateral contacts.* A collateral contact is an oral confirmation of a household's circumstances by a person outside of the household. The collateral contact may be made either in person or over the telephone. The State agency may select a collateral contact if the household fails to designate one or designates one which is unacceptable to the State agency. Examples of acceptable collateral contacts may include employers, landlords, social service agencies, migrant service agencies, and neighbors of the household who can be expected to provide accurate third-party verification. When talking with collateral contacts, State agencies should disclose only the information that is absolutely necessary to get the information being sought. State agencies should avoid disclosing that the household has applied for SNAP benefits, nor should they disclose any information supplied by the household, especially information that is protected by §273.1(c), or suggest that the household is suspected of any wrong doing.

(5) *Responsibility of obtaining verification.* (i) The household has primary responsibility for providing documentary evidence to support statements on the application and to resolve any questionable information. The State agency must assist the household in obtaining this verification provided the household is cooperating with the State agency as specified under paragraph (d)(1) of this section. Households may supply documentary evidence in person, through the mail, by facsimile or other electronic device, or through an authorized representative. The State agency must not require the household to present verification in person at the SNAP office. The State agency must accept any reasonable documentary evidence provided by the household and must be primarily concerned with how adequately the verification proves the statements on the application.

- 7. Proposed alternative procedures:** The State of Rhode Island is requesting to accept self-attestation as verification of income at application if the agency is not able to verify the income information via a collateral source, The Work Number and/or other external sources/interfaces.
- 8. Justification for request:** The health and safety of our customers and employees is important to everyone at the RI Department of Human Services. To reduce risk of spreading the coronavirus (COVID-19) and to assist our most vulnerable households with access to food assistance in a more expeditious and efficient manner, the State of RI is seeking a waiver to allow workers to accept self-attestation of income as a means of verification with the agency attempting to verify the information collaterally, via The Work Number or through additional external sources/interfaces.

- 9. Caseload information, including percent of caseload and description of population expected to be affected by this waiver:** The current number of households receiving SNAP in RI as of February 2020 is 88,866. Of those, approximately 80% represent households with income.
- 10. Anticipated impact on households and State agency operations:** This waiver will provide consistency for households with income and State agency operations in processing cases.
- 11. Anticipated implementation date and time period for which waiver is needed (please indicate if the waiver approval is needed to make system adjustments):**  
The State is requesting a 3-month waiver, from April 1, 2020 through June 30, 2020.
- 12. Proposed quality control review procedures:** There are no special quality control procedures needed in conjunction with this waiver. Cases to which this waiver will be applied will be subject to the same standard QC procedures as all other SNAP cases pursuant to the FNS Handbook 310.
- 13. Name, title, and email of requesting official:**
- Name:** Bethany Caputo
- Title:** RI DHS SNAP Administrator
- Email:** [bethany.caputo@dhs.ri.gov](mailto:bethany.caputo@dhs.ri.gov)
- 14. Date of request:** 4-3-2020
- 15. Regional Office contact person (to be completed by FNS regional office):**