

## STATE WAIVER REQUEST

1. **Waiver Serial Number (if applicable):**
2. **Type of request:** Initial
3. **Regulatory citation:** 7CFR 275.3(c)(5), 7CFR 275.12(g)(1)(ii)
4. **State:** Wisconsin
5. **Region:** MWRO
6. **Regulatory requirements:** Households are required to cooperate with the QC review process. Refusal to cooperate will result in termination of the household's eligibility. For a determination of a refusal to be made the household must clearly demonstrate that it will not take actions that are required to complete the QC review process. Examples of refusal to cooperate include:
  - An outright refusal to talk to the reviewer.
  - The household does not respond to a letter from the reviewer sent Certified Mail-Return Receipt Requested and is signed by the household within 30 days of the date of receipt.
  - The household does not attend an agreed upon interview with the reviewer and then does not contact the reviewer within 10 days of the date of the scheduled interview to reschedule the interview.
  - The household does not return a signed release of information statement to the reviewer within 10 days of either agreeing to do so or signing for a request from the reviewer sent Certified Mail-Return Receipt Requested

If the household refuses to cooperate after proper notification the reviewer must report the household's refusal to the State agency for termination of the household's participation.

7. **Description of alternative procedures:** During the time when COVID-19 pandemic restrictions are in place (currently includes the months of March, April, May 2020) Wisconsin will not terminate clients for not cooperating with the QC review process. During this time Wisconsin will track cases where the household refused to cooperate. The reviewer will follow up with the household prior to the extended due date and determine at that time if a sanction should be imposed.
8. **Justification for request:** The approval of this waiver will ensure Wisconsin is able to protect the public health and the health of our staff and members. This will keep members from trying to obtain verifications from sources such as banks and employers that may put them at risk. This will also ensure households

continue to receive their SNAP benefits during this health crisis.

9. **Anticipated impact on households and State agency operations:** Household's will be able to maintain their SNAP benefits and state agencies will continue to work with households selected in the QC sample to complete cases without having to impose a sanction.
10. **Caseload information, including percent, characteristics, and quality control error rate for affection portion (if applicable):** This waiver will apply to all SNAP review cases processed in the months of March, April, and May 2020 but may be extended if the health crisis continues past May. The number of SNAP recipients as of February 2020 is 598,392.
11. **Anticipated implementation date and time period for which waiver is needed:** Implementation of this would start March 2020 through May 2020 and extended if the health crisis continues.
12. **Proposed quality control review procedures:** During this time frame the QC process would continue and state quality control reviewers would continue to work with members to complete reviews without imposing a sanction.
13. **State agency submitting waiver request and State contact person:**  
Wisconsin Department of Health Service, Jayne Wanless
14. **Signature and title of requesting official:**  
  
Name: Rebecca McAtee MIPA  
Title: Director, Bureau of Enrollment Policy and Systems,  
FoodShare Director  
[Rebecca.mcatee@dhs.wisconsin.gov](mailto:Rebecca.mcatee@dhs.wisconsin.gov)
15. **Date of request:**
16. **State agency staff contact (name/email/telephone):** Jayne Wanless, [jaynem.wanless@wi.gov](mailto:jaynem.wanless@wi.gov), 608-267-7371
17. **Regional office contact person:** Melissa Cundari