



KIM JOHNSON
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES
744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



GAVIN NEWSOM
GOVERNOR

September 27, 2022

Ethan Dye, Director
Department of Human Assistance
Sacramento County
1825 Bell Street, Suite 200
Sacramento, CA 95825

Dear Director Dye:

Thank you for your cooperation and assistance in the completion of the Federal Fiscal Year (FFY) 2022 CalFresh Management Evaluation (ME) Review, which was conducted from July 11, 2022 through July 15, 2022 in Sacramento County. We would like to extend a special thank you and our appreciation to Linda Hoang for facilitating the review process.

As mandated by the United States Department of Agriculture (USDA), Food and Nutrition Service (FNS), the California Department of Social Services (CDSS) is required to conduct MEs every year in large counties to identify areas of non-compliance to assist in improving CalFresh (CF) program operations. The ME review consisted of several areas including Payment Accuracy, Assessment of Corrective Action, Program Access, and Timeliness of Application Processing.

An overview of the findings, recommendations, and required corrective actions were discussed with your county management staff at the exit conference held on July 15, 2022. The exit conference provided the county with information necessary to develop and initiate corrective action changes while waiting for the final findings letter.

With the delivery of the final findings via this letter, the CDSS requests that a Program Improvement Response (PIR) plan be submitted by November 11, 2022, to address the findings and recommendations included in this report. Please include a description of activities designed to address each finding, the contact person responsible for the activity, and the expected implementation and completion dates for each activity. In addition, please provide verification such as policy memos or written procedures for those recommendations in which the county is making changes.

As of the April 2022 to June 2022 quarter, the county's timeliness for application processing for three-day was 46.19 percent and seven-day was 60.86 percent.

The ME review for Sacramento resulted in a total of 17 Program Access findings. A summary of findings are as follows:

- Coverage of the substantial lottery and gambling winning reporting requirements was not consistently informed.
- Expedited Service (ES) process was incorrect.
- *Request for Verification* (CW 2200) were completed with incorrect due dates and incorrect program box selected.
- CF-only households were required to sign multiple applications.
- CW 2200 over verified by requesting forms and verifications not mandatory for the CF program.
- CW 2200 limited the type of verifications allowed when multiple forms of verification were acceptable.
- *Notice of Missed Interview* (NOMI) was not sent after the interview was missed.
- The Coronavirus Disease of 2019 (COVID-19) interview waiver was inaccurately applied.
- Applications submitted in person were not date stamped.
- CW 2200 was not saved to the case file.
- Continuing benefits were not issued due to items postponed that were not required for CF.
- Appointment letter completed incorrectly and did not have the CF program box selected.
- County email was offered for document submission.
- Mystery callers were not able to reach a staff member by telephone for assistance in obtaining CF benefits.
- Mystery callers were not consistently informed of the option to apply for CF by fax.
- Mystery callers were not consistently informed of the minimum requirements (name, address and signature) to file a CF application.
- Mystery callers were not consistently informed of ES criteria and process.

Additionally, the ME team reviewed 30 CF cases (8 denials, 7 terminations, 7 recertifications, and 8 initial approvals). Of the cases reviewed, 20 cases were found to have errors, resulting in 19 findings pertaining to the Case Review component of the ME. The detailed results of the case reviews were shared and discussed with members of your team during the week of the ME review and are enclosed within this report. Some of the primary error trends that were found in the case reviews are listed below:

- Errors related to the *Notice of Action* (NOA) having incorrect or confusing information.

- Errors related to the CW 2200 limiting the type of verification.
- Errors related to the income miscalculated in the budget.
- Errors related to the CW 2200 over verifying by requesting items not questionable and/or not required for CF.

Noteworthy Initiatives and/or Accomplishments

The CDSS would like to congratulate the county on maintaining high standards and meeting regulatory guidelines. We would like to highlight where your staff excelled and continue to provide essential customer service that allows more individuals access to the CF program.

As of the April 2022 to June 2022 quarter, the county's timeliness for thirty-day was 97.21 percent. Despite the county's total average CF caseload increase of over 31,000 (33 percent) cases, Sacramento County continues to maintain its thirty-day timeliness rate well above 90 percent.

The CDSS also commends the county staff for consistently covering the following certification regulatory components:

- Confidentiality was maintained during telephone interviews and calls.
- All four *Eligibility Status Report* (SAR 7) components; including verbal informing, SAR 7 written explanation, a sample copy of the SAR 7, and a telephone number to obtain assistance to complete the SAR 7.
- Voter Registration.

Your county's ME Consultant is Amber Johnson. Should you have any questions or require additional information or assistance, please contact her at (559) 240-0689 or via email at Amber.Johnson@dss.ca.gov. You can also contact your county's designated Technical Assistance Manager, Steven Crandall at (916) 657-3283 or via email at Steven.Crandall@dss.ca.gov. Once again, we thank you and the members of your staff for your full cooperation and participation in this review.

Sincerely,



TAMI GUTIERREZ, Chief
CalFresh Operations Bureau

Enclosure

Ethan Dye, Director
Page Four

cc: Linda Hoang, Administrative Services Officer II
Roselee Ramirez, Human Services Division Manager

CALFRESH MANAGEMENT EVALUATION REPORT FOR SACRAMENTO COUNTY

INTRODUCTION

During the week of July 11, 2022, Amber Johnson, Walter Galvez, Tania Lara-Caballero and Yia Moua, from the California Department of Social Services (CDSS), Operations Bureau conducted a CalFresh Management Evaluation (ME) in Sacramento County. The major areas examined during this review were Payment Accuracy/Corrective Action Assessment, Program Access and Timeliness of Application Processing.

The review was conducted at the following locations:



Fulton Bureau
2700 Fulton Avenue
Sacramento, CA 95821



Galt Bureau
210 North Lincoln Way
Galt, CA 95632



Greenhaven Service Center
7405 Greenhaven Drive
Sacramento, CA 95831

The CDSS requests that a PIR plan be submitted by November 11, 2022. The PIR plan should address the findings, recommendations and corrective actions included in this report. Please include a description of the activities designed to address each finding, a contact person responsible for the activity, and the expected implementation and completion dates.

Please email the PIR to CWDCalFreshEvaluations@dss.ca.gov or mail it to:
California Department of Social Services
CalFresh Operations Bureau
888 South Figueroa Street, Suite 360
Los Angeles, CA 90017

SACRAMENTO COUNTY CALFRESH DATA AND STATISTICS

<u>Measurement:</u>	<u>Percentage:</u>	<u>Period:</u>
County Active Error Rate	9.91	October 2021 – March 2022
California Active Error Rate	11.96	October 2021 – March 2022
National Active Error Rate	10.63	October 2021 – March 2022
County Negative Error Rate (CAPER)	45.00	October 2021 – March 2022
California Negative Error Rate	39.78	October 2021 – March 2022
National Negative Error Rate	40.12	October 2021 – March 2022
County 3-Day ES Issuance	46.19	April 2022 – June 2022
County 7-Day ES Issuance	60.86	April 2022 – June 2022
County CF Apps Approved within 30 days	97.21	April 2022 – June 2022

PAYMENT ACCURACY AND CORRECTIVE ACTION ASSESSMENT

The purpose of the Payment Accuracy and Corrective Action Assessment section is to assess the county's performance data and confirm that adequate corrective action measures are in place; it focuses on Active error rates and Case and Procedural Error Rates (CAPER). The reviewed components have significant potential to improve county error rates.

The scope of the review includes the following:

- Case Action Reviews – review of randomly selected denial, termination, recertification and initial approval cases.
- Second Party Reviews – evaluation of case review systems, processes for capturing and arraying statistically generated data and identifying trends for corrective action purposes.
- Quality Control (QC) – review of QC cases and factors contributing to discovered errors.
- Training – assessment of induction training, training content, ongoing training and training to ensure State and federal policy changes are implemented.

Case Action Reviews

The purpose of the Case Action Reviews section is to determine whether the county is in compliance with CalFresh (CF) policies and procedures for approving, denying, and terminating cases. The reviews are conducted to ensure the action taken, notification to the household, and case processing procedures were correct. A correct case review is one that is based on a correct reason as documented in the case record, is accurately communicated to the household, and is procedurally correct.

Observations:

<u>Type</u>	<u>Reviewed</u>	<u>Errors</u>
Denials	8	6
Terminations	7	3
Recertifications	7	5
Initial Approvals	8	6
Total	30	20

The review team examined 30 CF cases (8 denials, 7 terminations, 7 recertifications, and 8 initial approvals). Of the cases reviewed, 20 were in error (6 denials, 3 terminations, 5 recertifications, and 6 initial approvals). Please note that this review will not be included in the county's yearly sample of QC reviews; it serves only as an independent review for the purposes of this evaluation.

Denial Case #2

This case was in error because the *Request for Verification* (CW 2200) over verified by requesting verification of student exemption when it was not documented as questionable and limited the type of verification to "award letter" for proof of student exemption. The CW 2200 also specified the period of income requested to 3/2022 instead of the last 30 days and did not request verification of mandatory gross non-exempt income. Lastly, two denial *Notice of Action* (NOA) were sent with incorrect denial reasons. The first NOA indicated the reason as residency; however, residency was not requested or pending. The second NOA indicated the reason for failure to provide identification; however, identification was not requested or pending.

Denial Case #3

This case was in error because the CW 2200 limited the type of verification to the "SC 106" county form, "pay stubs" and "written statement" for proof of income. Also, the CW 2200 specified the period of income requested to 4/2022 instead of the last 30 days and the due date listed was less than ten days. Furthermore, the application was processed untimely. Lastly, the denial NOA indicated the denial reason for failure to provide specified 3/2022 income, but that income was not requested or required.

Denial Case #4

This case was in error because the *Initial Application for CalFresh, Cash Aid, and/or Medi-Cal* (SAWS 1) on file was not date stamped. Additionally, appointment letters were not issued in the household's preferred language, and the case file did not document whether translation services were provided or offered. Furthermore, a mandatory household member was not included in the application. Lastly, non-citizenship status was not thoroughly explored or documented as such.

Denial Case #5

This case was in error because the interview for the Expedited Service (ES) entitled application was not scheduled within the three-day timeframe. Also, numerous *Notice of Missed Interview* (NOMI) were incorrect. The NOMI issued on 5/4/2022 did not list

the interview or compliance date and the NOMI issued on 5/12/2022 listed the incorrect compliance date. Another NOMI listed the compliance date as “please reapply.” Lastly, the application was processed untimely on 5/11/2022.

Denial Case #6

This case was in error because the household was not contacted for the scheduled interview on 4/19/2022. Additionally, the interview for the application dated 4/12/2022 was scheduled untimely for 5/23/2022. Lastly, the NOMI listed the incorrect compliance date.

Denial Case #7

This case was in error because the denial NOA indicated the denial reason for resident outside of the county rather than for receiving benefits in another state. The correct denial NOA for missing the scheduled interview was not sent to the household.

Termination Case #9

This case was in error because verification of income over the Income Reporting Threshold (IRT) was received on 3/4/2022; however, termination actions were taken untimely on 4/5/2022.

Termination Case #12

This case was in error because the Inter-County Transfer (ICT) was initiated untimely on 3/14/2022 when the address change was reported on 2/16/2022.

Termination Case #13

This case was in error because the Semi-Annual Reporting (SAR) cycle was incorrectly configured for the household eligible to Elderly Simplified Application Project (ESAP), which resulted in the *Eligibility Status Report* (SAR 7) erroneously due.

Recertification Case #16

This case was in error because the *Notice of Expiration of Certification* (NEC) was not sent to the household.

Recertification Case #17

This case was in error because the income calculated in the budget did not correspond with the income in the case record. Also, the NOA did not inform of the income and shelter expense changes that caused the change in benefits.

Recertification Case #18

This case was in error because the CW 2200 over verified by requesting verification of employment termination, which was not required and/or available via readily available electronic sources. Also, the type of verification was limited to “termination letter” or *General Affidavit* (CSF 2). Further, the telephonic signature was obtained when the signed application was already on file. Lastly, the *CalFresh Notice of Termination WINS Benefits* (WINS 1239) NOA indicated the reason for CF termination; however, CF had not been terminated.

Recertification Case #19

This case was in error because the recipient's grandson was required to be added to the household "due to age." The case record did not support that the grandson was mandatory.

Recertification Case #20

This case was in error because the *Application for CalFresh Benefits* (CF 285) was completed with the household for the recertification rather than the *Recertification for CalFresh Benefits* (CF 37).

Approval Case #23

This case was in error because student eligibility was not thoroughly explored. The *Student Support Questionnaire* (CF 787) was sent to the household without documenting the student exemption or if it was considered questionable. Also, the denial NOA for ineligible student was sent on 4/9/2022 when verification was due on 4/19/2022. Additionally, the CW 2200 limited the type of verification and did not clearly identify the requested verifications. The CW 2200 requested to "complete and return Student Questionnaire & provide proof."

Approval Case #24

This case was in error because verification of job loss was requested without documentation of why it was deemed questionable. Additionally, verification was not requested for mandatory gross non-exempt income.

Approval Case #25

This case was in error because the income used in the budget was incorrect by erroneously excluding cash gifts received by the household.

Approval Case #26

This case was in error because the SAWS 1 on file was not date stamped. Also, the telephonic signature was obtained when the signed application was already on file. Additionally, the CW 2200 limited the type of verification to "rental agreement," "check stub" and "statement." The CW 2200 also over verified by requesting job loss when it was not documented as questionable. Furthermore, the income and deductions used in the budget were incorrect. The Unemployment Insurance Benefits (UIB) income was incorrectly budgeted for the application month, the Standard Utility Allowance (SUA) deduction was allowed when utilities were included with the rent expense, and the incorrect multiplier was used to calculate the child support expense deduction.

Approval Case #27

This case was in error because the denial NOA listed the reason as resident outside of the county rather than receiving benefits in another state. Also, the approval NOA listed the incorrect certification period of 6/1/2022 through 3/31/2023 rather than 5/1/2022 through 4/30/2023.

Approval Case #28

This case was in error because the CW 2200 limited the type of verification to “pay stub” and “termination letter” to verify income. The CW 2200 also over verified by requesting proof of the pending UIB. Lastly, the earned income used in the budget was not correct due to not using the correct bi-weekly frequency.

Assessment:

County procedures need improvement as described below.

Recommendations:

1. Remind staff to clearly document in the case record when the interview waiver is implemented or disallowed. Case narration will allow case reviewers to determine that all CF requirements have or have not been met under waiver authority.
2. Remind staff to adequately document in the case record all relevant actions taken on a companion case.
3. Encourage staff to review the copy of the application sent to households as best as possible to ensure that the information corresponds with the eligibility factors in the case record and the information obtained during the interactive interview.
4. Remind staff to review the budget, NOA, and certification periods for accuracy prior to accepting actions.

Corrective Actions Required:

1. Ensure that information and action reason(s) listed on denial or termination NOA are correct and accurately inform households of the reason(s) the negative action is/are taken. (FNS Handbook 310, Section 1350.2; MPP 63-504.2)
2. Ensure that negative actions taken are accurate, timely, and consistent with the case record. Case actions for income over the IRT must occur timely and adequately. Also, applicants must have an opportunity to provide the requested verification within the due date listed on the CW 2200. (MPP 63-300.5(a)(1); ACIN I-33-21; ACL 12-25, 15-42 and 21-101)
3. Ensure that all applications are screened for ES, the ES determination is documented in the case record, and an interview is scheduled within the three-day timeframe for potential ES eligible households. (ACIN I-14-11 and I-11-20; ACL 16-14)
4. Ensure that case documentation is accurate, sufficient, and available in the case record to support the case actions. Discrepant or contradictory information should be clarified with households during interviews and documented in the case file.

ENCLOSURE

(FNS Handbook 310, Section 1310 and 1350.2; 7 CFR 273.2(f)(6); MPP 63-300.5(j))

5. Ensure that requests for verifications are not limited to one form of verification when multiple sources exist. Also, verifications should not be requested for information not required for the CF program and not questionable.
(ACIN I-45-11; ACL 20-48, 20-135 and 21-24)
6. Ensure that a clear, accurate and complete CW 2200 is sent to the household and maintained in the case record when verifications are required. Additionally, the CW 2200 must list a due date that allows a minimum of ten calendar days to provide verifications. (ACIN I-45-11 and I-33-21; ACL 14-26)
7. Ensure that the household's income and deductions are calculated accurately and entered correctly when determining a household's eligibility and benefit allotment.
(MPP 63-502 and 63-503.413; 7 CFR 273.9(d)(6)(iii)(C) and 273.10(e)(1)(i); ACL 03-18 and 12-25)
8. Ensure that ICT transmittals are initiated timely within seven business days of receiving notification of the address change. (ACL 17-58)
9. Ensure that student exemption status is thoroughly explored with the household. Verification of student exemption must not be requested unless the case record adequately documents why the information was deemed questionable. (ACL 21-58)
10. Ensure that household composition is correctly configured to include mandatory household members, such as individuals who purchase and prepare meals together. An individual's age, alone, does not mandate inclusion in the household.
(MPP 63-402.142; ACL 21-101)
11. Ensure that when an interactive interview is required, the interview is scheduled timely within 30 days from the date of application. Additionally, ensure that contact for the scheduled interview is attempted and documented in the case file.
(MPP 63-300.4)
12. Ensure that the last 30 days of income is requested and not from a particular month or date. If a specific period of income is requested after exploring the household's circumstances, ensure case documentation supports such a request.
(7 CFR 273.10(c)(1)(ii); ACL 20-48)
13. Ensure that the date the application is received is recorded on the application.
(7 CFR 273.2(c)(1)(iv); MPP 63-300.33)
14. Ensure that Non-Assistance CalFresh (NACF) households are only required to sign one application. (ACL 13-96, 14-101, 15-84 and 19-10)

ENCLOSURE

15. Ensure that all notices sent to households are in the household's preferred language. (MPP 21-115.2 and 63-202.2)
16. Ensure that the recertification process is completed accurately. A NEC must be sent to all households for recertification. Also, a CF 37 must be completed rather than the CF 285 at recertification.
(7 CFR 273.14(b)(1); MPP 63-504.61(b); ACL 14-20 and 14-101)
17. Ensure that the correct compliance date is listed when a NOMI is sent to households who miss their scheduled interview. Applicants have 30 days from the date of application to reschedule or conduct their interview.
(FNS Handbook 310, Section 1350.2; MPP 63-300.461; ACL 21-24)
18. Ensure that applications are approved within 30 calendar days from the date of application when the household meets all eligibility factors.
(MPP 63-301.3; ACIN I-14-11)
19. Ensure that the certification period is accurate and consistent with the eligibility factors in the case file. Households entitled to ESAP must be assigned a 36-month certification period and a SAR 7 is not required from March 1, 2022 through September 30, 2026. (ACL 17-34, 20-145 and 22-15)

Second Party Reviews

Observations:

- Supervisors are required to review post-approval and negative actions (approvals, denials, terminations, and recertifications) for their unit staff.
- Supervisors are required to review four cases per month for new workers and two cases per month for established intake and continuing workers. In addition to these reviews, at the Service Center, Supervisors also conduct one call review for staff and a random number of tasks per month. Lastly, case review results are shared with staff immediately and are reviewed during their monthly one-on-one meetings.
- Case Review and Training (CRT) Supervisors and the Quality Assurance (QA) team conduct case reviews to build and validate the county's quarterly training.
- Case reviews are targeted based on identified error trends or random selection samples. The QA team reviews 350 full case reviews and 300 targeted reviews per month, along with 40 third-party reviews by a program specialist in the QA team.
- Error trends are tracked and discussed with the management team. The error trends are used to determine the subject matter for future trainings.
- A monthly Art of Accuracy webinar is developed and provided to Supervisors to share with staff. The webinar is also posted on the county's intranet for staff to access.

Assessment:

The county has the necessary processes in place to ensure accuracy for both Active and negative case actions.

Recommendations:

1. Continue analyzing the data gathered through the review process to identify common error trends and ensure cases are processed correctly.

Corrective Actions Required:

None.

Quality Control

Observations:

- Sacramento County is currently responsible for reviewing the federally sampled Active and CAPER cases. The county has a formal QC process and corrective action team that is responsible for reviewing potential Active and negative case errors. If an error is cited, the county has ten days to provide State QC with a corrective action that will be implemented to prevent future errors.
- Sacramento County QC reviewed a total of 210 Active cases for Federal Fiscal Year (FFY) 2022 (October 2021 through March 2022) of which 143 were completed, 26 were Not Subject to Review (NSTR) and 41 were dropped. Of the 143 completed cases, 26 were found in error. The county's Active error rate 9.91 percent.
- Sacramento County QC reviewed a total of 20 CAPER cases for FFY 2022 (October 2021 through March 2022). Of the 20 completed cases, 9 were found in error. The county's CAPER is 45.00 percent.
- Interviews with staff indicated that they are aware of the error rates, and they know where to obtain the information.

Sacramento County FFY 2022	County Error Rate	State Average	Difference
Active Cases	9.91 percent	11.96 percent	2.05 below
CAPER Cases	45.00 percent	39.78 percent	5.22 above

Assessment:

For FFY 2022, the county's Active error rate was below the State average and its CAPER was above the State average.

Recommendations:

1. Continue meeting with CDSS staff regarding any QC error findings or pertinent information.
2. Continue to focus on lowering the CAPER and maintaining the active error rate below the State average.

Corrective Actions Required:

None.

Training

Observations:

- Sacramento County incorporates formal induction training for the CalWORKs (CW), CF, and Medi-Cal (MC) programs.
- At the time of the ME review, multiple training sessions were in progress. An induction training was completed on June 23, 2022. A CF/MC class consisting of 24 new eligibility staff were expected to graduate on July 22nd and a new induction class consisting of 43 new staff was expected to begin on July 25th.
- Staff Development offers a web-based and PowerPoint training curriculum for formal induction training. Trainees then process cases in the Statewide Automated Welfare System (SAWS) training region to obtain hands-on experience.
- In the last four to five weeks of training, trainees process live cases with the assistance of trainers. Training groups consist of seven trainees per trainer. Additionally, trainees receive hands-on mock telephone interviews.
- Policy updates are released via mass emails, training videos, refresher trainings, unit and bureau meetings. Additionally, every two weeks, the policy team sends an alert to all staff that includes reminders and policy changes.

Assessment:

The county continuously explores ways to improve its training classes.

Recommendations:

1. Continue using error trends to customize and develop training courses.
2. Continue sharing error trends and policy changes with staff.

Corrective Actions Required:

None.

PROGRAM ACCESS

The purpose of the Program Access section is to identify barriers to CF participation in the county's application and recertification processes. This includes identifying areas of non-compliance and evaluating the delivery of service to applicants and participants. Online application filing, screening and document imaging are also reviewed.

The scope of the review included the following:

- Customer Service – hours of operation, availability of applications, intake and continuing operations, application filing procedures, ES screening, applicant intake interviews, participant recertification interviews, lobby procedures, applicant/participant interviews and outreach activities.
- Online Applications – county efforts at accepting and processing online applications.
- Outreach – county efforts at increasing CF participation.
- Document Imaging – county operations for the conversion of paper documents to electronic format.
- Call/Service Center – hours of operation, effectiveness of operations and customer surveys.

Customer Service

Observations:

- Sacramento County's certification sites are open to the public Monday through Friday from 8:00 a.m. to 4:00 p.m. The office hours are displayed on the exterior doors and match the hours listed on the county's website. (ACL 04-55)
- Offices have an exterior and interior drop box in the lobby. (MPP 11-601.311(b))
- Applications and documents can be dropped off at reception during business hours. A receipt is given to all. (MPP 63-300.61)
- The lobbies have brochures of information and resources available, such as a list of emergency food providers. They are accessible during business hours. (MPP 63-201.42)
- Interpreters and bilingual staff are available. (MPP 63-202.21)
- The methods to apply (in-person, online, by mail, and via fax) are posted in the lobbies. (MPP 63-300.3)
- The minimum requirements (name, address and signature) to file a CF application are posted in the lobbies. (MPP 63-300.32)

ENCLOSURE

- Applications are available in the lobbies in English and Spanish with clear signage. (MPP 63-300.34)
- Informing of ES is posted in the lobby. (MPP 63-301.521)

Assessment:

County certification sites provide households and potential applicants access and information to the CF program.

Recommendations:

None.

Corrective Actions Required:

None.

Intake and Recertification Interviews

Observations:

- Staff were courteous and made households feel at ease during interviews. (MPP 63-300.4)
- Confidentiality was properly maintained. (MPP 63-201.34)
- Coverage of the Rights & Responsibilities (R&R) were consistent. (MPP 63-300.4)
- Coverage of the substantial lottery and gambling or lottery winning reporting requirements was not consistent. (ACL 20-132; ACIN I-78-21)
- Coverage of Voter Registration was consistent. (ACIN I-01-12; ACL 18-39)
- All the SAR 7 components were consistently covered. There are four SAR 7 components:
 - The verbal explanation of the SAR 7. (MPP 63-300.411)
 - The written explanation for the SAR 7. (MPP 63-300.411)
 - The sample copy of the SAR 7. (MPP 63-300.412)
 - The telephone number households to call and ask questions or obtain help in completing the SAR 7 was consistently provided. (MPP 63-300.414)

Fulton Bureau

- ES was incorrectly determined as not entitled when the information on the application (no income, no resources, and no shelter expenses) indicated that the household was entitled to ES. (ACL 16-14; ACIN I-14-11)
- The CF program box was incorrectly marked on the CW 2200 that requested verification of immunization and bank accounts for the Public Assistance CalFresh (PACF) household. (ACL 14-26)
- Duplicate signature was requested telephonically when the signed electronic application was already on file for the Non-Assistance CalFresh (NACF) household. (ACL 13-96 and 15-84)
- CW 2200 required that the Voter Preference Form, "SAC 1022" county form, and *Demographic Questionnaire* (CW 2223) form be completed when such forms are not mandatory for the CF program. (ACIN I-45-11)
- CW 2200 limited the type of verification allowed to the CSF 2 for proof of financial assistance from family. (ACIN I-45-11)

- NOMI was not sent to the household after the scheduled recertification interview was missed. (ACL 19-10)

Galt Bureau

- Application was approved, with the interview incorrectly waived, as ES with verifications postponed. The interview was then scheduled. (MPP 63-300.4; ACWDL dated April 2, 2020 and October 21, 2020)
- CW 2200 requested proof of application for Social Security number (SSN), non-citizenship, and citizenship verifications for the child born on 6/15/2022; these verifications were not mandatory for the NACF applicant. (ACIN I-45-11)
- SAWS 1 for walk-in applications were not date stamped. (7 CFR 273.2(c)(1)(iv); MPP 63-300.33)
- CW 2200 incorrectly listed multiple due dates for requested verifications, and the due date for some items only allowed four days to provide. (MPP 63-300.5(a)(1); ACL 14-26)
- CW 2200 limited the type of acceptable verification to “pay stubs” for verification of income. (ACL 21-24; ACIN I-45-11)
- CW 2200 was not in the case file despite the narration indication it was sent to the household. (ACL 14-26)

Assessment:

County procedures need improvement as described below.

Recommendations:

1. Consider reviewing the R&R at the beginning of each interview; this is to ensure households are adequately notified of their rights and responsibilities before going into the full interview.
2. Remind staff of the new SAR 7 changes for ESAP households, as described in ACL 22-15. Effective March 1, 2022 through September 30, 2026, ESAP households will no longer be required to complete a SAR 7.

Corrective Actions Required:

1. Ensure that households are properly informed of the gambling and lottery winnings reporting responsibilities. (ACL 20-142; ACIN I-78-21)

ENCLOSURE

2. Ensure that households entitled to ES are screened correctly, scheduled a timely appointment, and benefits are issued within the three-day timeframe from the date of application or date of discovery. (ACL 16-14; ACIN I-14-11)
3. Ensure that a clear, accurate, and complete CW 2200 is sent to the household and maintained in the case record when verifications are needed. The CW 2200 must have the appropriate programs boxes selected and each item must list a single due date that allows at least ten calendar days to provide the requested verifications. Also, ensure that verifications are not requested when not required for the CF program. (ACIN I-45-11; ACL 14-26)
4. Ensure that a duplicate application signature is not required when a signed application is already on file for NACF applicants. (ACL 13-96 and 15-84)
5. Ensure that all requirements and procedures related to the interview waiver are applied correctly. (ACWDL dated April 2, 2020 and October 21, 2020)
6. Ensure that requests for verification do not limit verifications to a specific type when multiple sources of verification are acceptable. (ACL 21-24; ACIN I-45-11)
7. Ensure that a NOMI is sent to households that have missed their scheduled recertification interview. (ACL 19-10)
8. Ensure that the date the application is received is recorded on the application. (7 CFR 273.2(c)(1)(iv); MPP 63-300.33)

Recertification Process

Observations:

- Recertification cases are processed by the assigned eligibility staff.
- The NEC is mailed to the household the month before the recertification is due. (MPP 63-504.25)
- A recertification appointment letter, informing participants of the date and time of the recertification interview, is mailed along with the recertification packet the month before the recertification is due. (ACL 08-29)
- A NOMI is sent to the household after the initial scheduled appointment is missed. (MPP 63-300.46; ACL 08-29)

Assessment:

The county has the necessary procedures in place for the timely and accurate processing of recertifications.

Recommendations:

None.

Corrective Actions Required:

None.

Website

Observations:

- The county website was reviewed for access to CF benefits. The website, <https://ha.saccounty.gov/benefits/CalFresh/Pages/default.aspx>, was found with a simple web search using keywords: "Sacramento County CalFresh".
- The methods to apply are posted; including, by telephone, in-person, online, mail, and fax. (7 CFR 273.2(c)(1))
- The minimum requirements (name, address and signature) to file an application are posted. (MPP 63-300.32)
- Links to apply online were available for MyBenefitsCalWIN (MyBCW) (www.mybenefitscalwin.org) and GetCalFresh (www.getcalfresh.org). Links to downloadable applications are also located on the website.
- Office locations and normal operating days and hours are posted.
- The Service Center telephone numbers and hours of operation are posted.
- ES processing timeframe and criteria are posted.
- The webpage can be translated to various languages with the Google Translation feature.
- There is also information about completing the SAR 7 and Reasonable Accommodations.

Assessment:

The county website is user-friendly and provides applicants multiple ways to apply for benefits.

Recommendations:

None.

Corrective Actions Required:

None.

Online Applications

Observations:

- The county's online application registration is centralized at the 28th Street Office.
- The county accepts online applications via MyBCW and GetCalFresh. Households may also submit recertifications, SAR 7 and verifications.
- Online applications are pulled and assigned twice a day to clerical staff in the BenefitsCalWIN Unit to register. Applications with only single adults are assigned to eligibility staff for processing at the 28th Street Office and all other applications with minors in the household are assigned for processing to the other offices.
- Applications are accepted until 5:00 p.m., anything received after 5:00 p.m. is considered received for the next business day. The date of aid is preserved.
- The county has implemented a special ES project to improve the county's ES timeliness. At the time of the ME, potential ES households were scheduled an interview for the next business day and non-ES households were scheduled seven days out.
- Staff from the BenefitsCalWIN Unit schedule interview appointments and send an appointment letter with the intake packet and verification checklist to the household. The intake packet includes a sample SAR 7, SAR 7 written instructions, Voter Preference Form, and Voter Registration Card (VRC).
- Telephone interviews are scheduled for all online applicants unless a face-to-face interview is requested on the application or a telephone number is not provided.
- A copy of the *Statement of Facts* (SOF) is mailed to the applicant after the intake interview is conducted.

Assessment:

The county has the necessary processes in place to process online applications and provide potential applicants another avenue in which to apply.

Recommendations:

1. Continue promoting the online application process as the primary method to apply for CF, recertify for benefits and submit a SAR 7. It provides 24/7 access and is a helpful tool in reducing office traffic and wait times.

Corrective Actions Required:

None.

Outreach

Observations:

- Sacramento County continues to promote CF and outreach within the community.
- The county did outreach at the Afghan Refugee Welcome Center from June 6th to 11th and June 13th to 18th. There are also events scheduled or pending management approval at Ready 4 Robla, Galt Job & Resource Fair, and Sacramento Aloha Festival.
- At the time of the ME, the county was working on new activities for the next FFY.
- There are Human Services Specialist (HSS) out stationed at probation offices, homeless shelters, and schools. They collect CF applications, collect recertification applications and SAR 7, and conduct intake interviews.
- The county promotes the CF program through flyers and posters in the office lobbies.

Assessment:

The county continues to identify opportunities to offer CF and improve services.

Recommendations:

None.

Corrective Actions Required:

None.

Document Imaging

Observations:

- The county utilizes FileNet to electronically store case documents.
- The 5th Street Bureau handles all centralized mail received by the county.
- There is an exterior and interior drop box at the Fulton and Galt Bureaus, and an exterior drop box at the 5th Street Bureau. The first pickup is at 8:00 a.m. and the last pick up is at 4:00 p.m. The date of aid is preserved.
- Clerical staff at each bureau date stamp documents received via drop box, mail, and in person prior to imaging the document into FileNet. Documents are sorted by type and receive a date stamp for the date of the pickup.
- Clerical staff review the images for validation, indexing, and quality assurance after documents are imaged.
- Documents are stored for 10 to 30 days prior to confidential shredding.
- Receipts are provided to households that submit documents at the Fulton and Galt Bureaus.
- Clerical staff print out mail for individuals without a permanent address, upon request.
- Returned mail is date stamped for the date received, imaged into FileNet, and a case comment is entered prior to confidential shredding.
- At the Greenhaven Service Center, callers are referred to submit personally identifiable information (PII) documents, such as pay stubs, social security cards and identification, via the email dha-cwservicescenter@saccounty.net.
- Walk-in applications received at the Galt Bureau were not date stamped.

Assessment:

The county continues efforts to image all documents in a timely and efficient manner in order to assist workers in meeting processing timeframes.

Recommendations:

1. Encourage staff to utilize secure document submission methods, such as the MyBCW website, when accepting verifications from households.

Corrective Actions Required:

1. Ensure that an email is not utilized as a viable document submission method for CF as it does not safeguard the household's PII. (ACL 19-39)
2. Ensure that all applications received via walk-in are date stamped on the application. (7 CFR 273.2(c)(1)(iv)); MPP 63-300.33)

Customer Service Center

Observations:

- The Greenhaven Service Center accepts incoming calls Monday through Friday from 8:00 a.m. to 4:00 p.m. All calls remaining in the call queue after 4:00 p.m. continue to be assisted until all calls are answered.
- HSS at the Greenhaven Service Center utilize a first call resolution model in which they attempt to assist callers to the furthest extent possible. Transferring calls to other workers is avoided if the Greenhaven Service Center HSS can take the appropriate action.
- Telephone applications are accepted and processed, recertification interviews are conducted, SAR 7 are processed, and action is taken on mid-period reports. Telephonic signatures are utilized for recertifications and SAR 7.
- Greenhaven Service Center HSS may also be assigned tasks to process during downtime.
- In-house interpreters are available. All other special languages go through the language line provider.
- Staff were courteous and made households feel at ease during calls and interviews.
- Confidentiality was properly maintained. (MPP 63-201.34)
- Coverage of the R&R were consistent. (MPP 63-300.4)
- Coverage of the substantial gambling and lottery winnings reporting responsibilities was not consistent. (ACL 20-132; ACIN I-78-21)
- Coverage of Voter Registration was consistent. (ACIN I-01-12; ACL 18-39)
- All the SAR 7 components were consistently covered:
 - The verbal explanation of the SAR 7. (MPP 63-300.411)
 - The written explanation for the SAR 7. (MPP 63-300.411)
 - The sample copy of the SAR 7. (MPP 63-300.412)
 - The telephone number which the household can call to ask questions or obtain help in completing the SAR 7. (MPP 63-300.414)
- Continuing benefits for the NACF application were not issued when social security card and birth certificate verifications for the newborn were not provided after they were postponed. These items were not required for CF. (ACIN I-45-11 and I-24-15)

ENCLOSURE

- CW 2200 limited the type of verification allowed to the CSF 2 for proof of financial assistance received from family. (ACIN I-45-11)
- Appointment letter provided to the household only had the CW program marked for the CW/CF recertification interview appointment. (ACL 08-29)
- CW 2200 requested proof of application for UIB for the household member who lost their job. (ACIN I-45-11)
- Household was verbally informed to provide proof of identity, social security card, and birth certificate in order to add the new household member. (ACIN I-45-11; ACL 20-135)

Assessment:

County procedures need improvement as described below.

Recommendations:

None.

Corrective Actions Required:

1. Ensure that substantial gambling and lottery winnings reporting responsibilities are reviewed with applicants and recertifying households. (ACL 20-132; ACIN I-78-21)
2. Ensure that benefits are not delayed when non-mandatory verifications are not provided. Birth certificate verification for a newborn is not required for NACF and Social Security card can be delayed until the next recertification or within six months following the month the baby is born, whichever is later. (ACIN I-45-11, I-24-15 and I-54-22)
3. Ensure that, when verifications are required, households are not limited to one form of verification when multiple sources exist. (ACIN I-45-11)
4. Ensure that appointment letters provided to households are accurate and indicate the appropriate program for which the interview appointment is for. (ACL 08-29)
5. Ensure that verifications are not requested for information that is not required for the CF program or is already available through electronic sources. Applying for UIB or other unconditionally available income is not a mandatory verification for NACF. (ACIN I-45-11; ACL 20-135)

Mystery Calls

Observations:

- CDSS made several calls to inquire about applying for CF benefits.
- County staff were courteous and professional.
- Callers experienced extensive wait times. Multiple callers were unable to reach a live agent. Some callers were disconnected due to excessive call volumes or received a user busy tone. (ACIN I-76-20)
- Methods to apply for CF (in-person, online, and by mail) were consistently provided to callers. However, the method to apply via fax was not consistently provided. (MPP 63-300.3)
- Callers were not consistently informed of the minimum requirements (name, address and signature) to file a CF application. (MPP 63-300.32)
- ES criteria and timeframes were not consistently explained to callers when requested. (MPP 63-301.521)

Assessment:

County procedures need improvement as described below.

Recommendations:

1. Consider implementing the use of a script for staff to be able to answer frequently asked questions from potential applicants.
2. Consider conducting internal mystery calls to evaluate customer service and identify potential training needs.

Corrective Actions Required:

1. Ensure that callers are able to get information about obtaining CF benefits when they call the County Welfare Department (CWD). (ACIN I-76-20; MPP 63-300.34; 7 CFR 273.2(c)(2))
2. Ensure that callers are informed of all the methods to apply for CF benefits (in-person, online, by mail, and via fax). (MPP 63-300.31)
3. Ensure that callers are made aware of their right to file an incomplete CF application containing only the name, address and signature of a responsible member of the

household. (MPP 63-300.32)

4. Ensure that callers are consistently informed of the right to ES, the timeframes for ES, and how to initiate the process. (MPP 63-301.521)

TIMELINESS OF APPLICATION

The purpose of the Timeliness of Application section is to assess whether eligibility determinations were made within mandated timeframes.

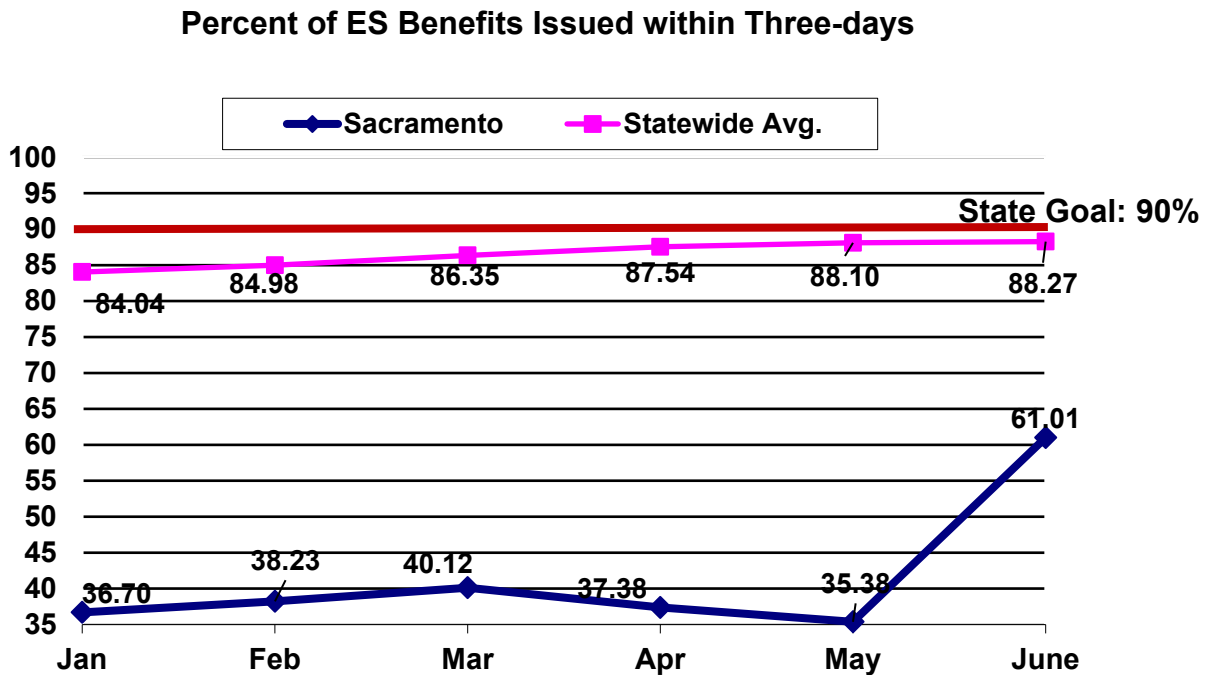
The scope of the review included the following:

- Three-Day ES – screening procedures and processing for ES.
- Thirty-Day Processing Time – online applications, mail applications, worker controls for timely processing, and processing rate for regular applications.

Three-Day Processing

Observations:

The county-reported *CalFresh Monthly Statistical Reports* (CF 296) indicate that for three-day processing, the county is below the State performance goal of 90 percent. In the most recent quarter (April 2022 to June 2022), 46.19 percent of applications were processed within the three-day ES timeframe. The graph below provides a monthly comparison between county and State three-day processing rates for the period of January 2022 to June 2022.



Assessment:

The county is not meeting the performance goal of 90 percent for three-day ES processing. Sacramento County is currently on a Corrective Action Plan (CAP) working

with CDSS Technical Assistance (TA) Managers to identify and address the challenges related to not meeting the three-day ES processing timeframes.

Recommendations:

1. Continue to work with CDSS to implement strategies and address the County's struggles with ES timeframes.

Corrective Actions Required:

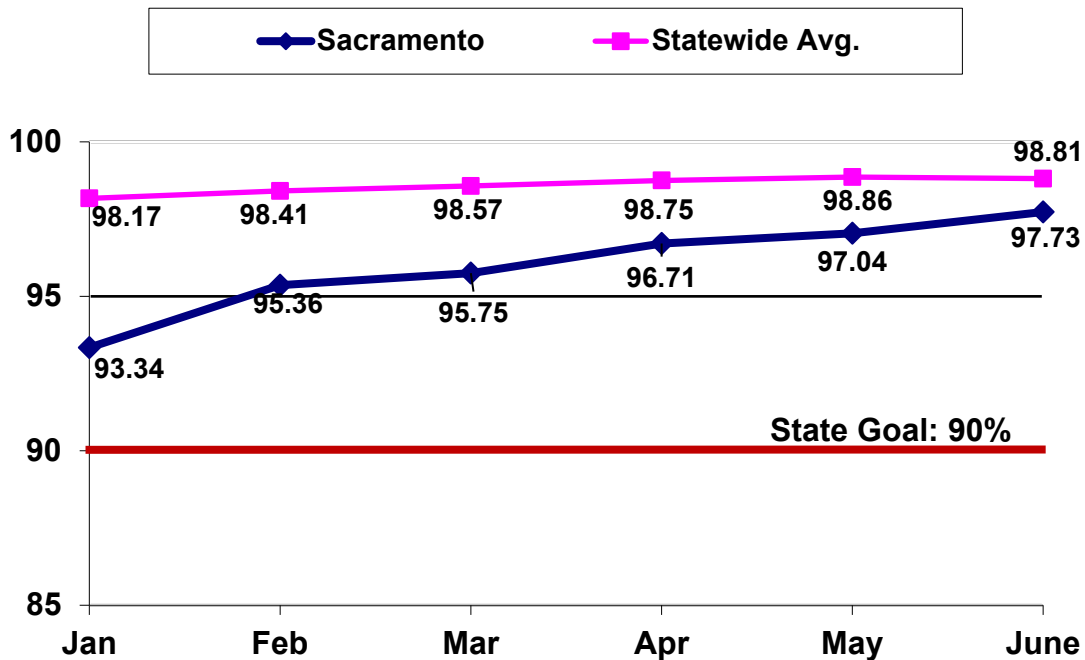
None.

Thirty-Day Processing

Observations:

- The county-reported CF 296 indicate that for thirty-day processing, the county is meeting the State performance goal of 90 percent. In the most recent quarter (April 2022 to June 2022), 97.21 percent of applications were processed within thirty-days. The graph below provides a monthly comparison between county and State thirty-day processing rates for the period of January 2022 to June 2022.

Applications Approved within 30 days



Assessment:

The county is meeting the State’s performance goal of 90 percent for thirty-day processing.

Recommendations:

1. Continue monitoring the timely processing of thirty-day applications to ensure the county maintains the performance goal of 90 percent or above.

Corrective Actions Required:

None.

ABLE-BODIED ADULTS WITHOUT DEPENDENTS (Limited Scope Module for Waived Counties)

The CDSS conducted a Limited Scope ME of the Able-Bodied Adults Without Dependents (ABAWD) time limit for Sacramento County. This review of ABAWD time limit policy was conducted as a sub-review of Sacramento County ME.

The intent of the Limited Scope ABAWD ME is to assess compliance with ABAWD time limit policy for waived counties and to prepare counties for the long-term impact of ABAWD time limit implementation. The Limited Scope ME will ensure that counties are complying with ABAWD related responsibilities, even while under a time limit waiver, and will help counties prepare for the transition into implementing the ABAWD time limit immediately upon expiration of their time limit waiver.

The FFY 2022 review was conducted virtually using a limited scope module. The limited scope module consists of a limited case review and follow-up discussion with the county. To complete the Limited Scope ABAWD ME, CDSS sampled five random cases from the case sample pulled for the Program Access review. These cases were assessed for compliance with ABAWD policy while under waiver. For FFY 2022, results of the case reviews for the Limited Scope ABAWD ME will be presented as recommendations rather than findings and no corrective action related to ABAWD policy will be required.

The CDSS met with representatives for Sacramento County to discuss the results of the case review. A summary of the results and corresponding recommendations is described in the sections below.

Summary of Case Reviews:

The CDSS reviewed a total of five case files selected at random to determine compliance with ABAWD time limit policy. The CDSS review team used a case file review protocol to ensure each case was reviewed in a consistent manner and that all federal requirements were reviewed. The purpose of the case file review was to determine if Sacramento County is processing cases in compliance with federal program requirements. Of the five cases reviewed, four cases were found to be in error.

Number of Cases Reviewed	Number of Cases with Errors
5	4

Number	Comments
17	The CDSS recommends case documentation to match the ABAWD status in the consortia system.

19	The CDSS recommends case documentation to match the ABAWD status in the consortia system.
27	The CDSS recommends case documentation to match the ABAWD status in the consortia system.
30	The CDSS recommends case documentation to match the ABAWD status in the consortia system.

Findings:

No findings will be cited for the FFY 2022 Limited Scope ABAWD review.

Corrective Actions Required:

No corrective actions will be required for the FFY 2022 Limited Scope ABAWD review.

Observations:

Due to the ME conducted virtually, the CDSS is unable to provide observations for the FFY 2022 Limited Scope ABAWD review.

Recommendations:

1. ABAWD time limit training be offered annually to educate staff on ABAWD policy and policy updates. This training should include policy requirements and expectations for ABAWD time limit policy compliance while under waiver.
2. Use the ABAWD three-step process as a best practice in implementing the ABAWD time limit and building the steps into the county's business process. The three-step process includes (1) Identifying ABAWDs: identify your target ABAWD population; (2) Screening for Exemptions: screen existing caseload and new applicants for ABAWD status; and (3) Engaging in Work: for non-exempt ABAWDs, begin early engagement in county workforce opportunities if available.
3. Review the attached ABAWD Readiness Assessment to begin planning for ABAWD implementation to ensure the county is ready to transition off of a waiver.

SUMMARY OF REQUIRED CORRECTIVE ACTIONS

PAYMENT ACCURACY/ASSESSMENT OF CORRECTIVE ACTIONS

Case Action Reviews

1. Ensure that information and action reason(s) listed on denial or termination NOA are correct and accurately inform households of the reason(s) the negative action is/are taken. (FNS Handbook 310, Section 1350.2; MPP 63-504.2)
2. Ensure that negative actions taken are accurate, timely, and consistent with the case record. Case actions for income over the IRT must occur timely and adequately. Also, applicants must have an opportunity to provide the requested verification within the due date listed on the CW 2200.
(MPP 63-300.5(a)(1); ACIN I-33-21; ACL 12-25, 15-42 and 21-101)
3. Ensure that all applications are screened for ES, the ES determination is documented in the case record, and an interview is scheduled within the three-day timeframe for potential ES eligible households.
(ACIN I-14-11 and I-11-20; ACL 16-14)
4. Ensure that case documentation is accurate, sufficient, and available in the case record to support the case actions. Discrepant or contradictory information should be clarified with households during interviews and documented in the case file.
(FNS Handbook 310, Section 1310 and 1350.2; 7 CFR 273.2(f)(6); MPP 63-300.5(j))
5. Ensure that requests for verifications are not limited to one form of verification when multiple sources exist. Also, verifications should not be requested for information not required for the CF program and not questionable.
(ACIN I-45-11; ACL 20-48, 20-135 and 21-24)
6. Ensure that a clear, accurate and complete CW 2200 is sent to the household and maintained in the case record when verifications are required. Additionally, the CW 2200 must list a due date that allows a minimum of ten calendar days to provide verifications. (ACIN I-45-11 and I-33-21; ACL 14-26)
7. Ensure that the household's income and deductions are calculated accurately and entered correctly when determining a household's eligibility and benefit allotment.
(MPP 63-502 and 63-503.413; 7 CFR 273.9(d)(6)(iii)(C) and 273.10(e)(1)(i); ACL 03-18 and 12-25)
8. Ensure that ICT transmittals are initiated timely within seven business days of receiving the notification of the address change. (ACL 17-58)

ENCLOSURE

9. Ensure that student exemption status is thoroughly explored with the household. Verification of student exemption must not be requested unless the case record adequately documents why the information was deemed questionable. (ACL 21-58)
10. Ensure that the household composition is correctly configured to include mandatory household members, such as individuals who purchase and prepare meals together. An individual's age, alone, does not mandate inclusion in the household. (MPP 63-402.142; ACL 21-101)
11. Ensure that when an interactive interview is required, the interview is scheduled timely within 30 days from the date of application. Additionally, ensure that contact for the scheduled interview is attempted and documented in the case file. (MPP 63-300.4)
12. Ensure that the last 30 days of income is requested and not from a particular month or date. If a specific period of income is requested after exploring the household's circumstances, ensure case documentation supports such a request. (7 CFR 273.10(c)(1)(ii); ACL 20-48)
13. Ensure that the date the application is received is recorded on the application. (7 CFR 273.2(c)(1)(iv); MPP 63-300.33)
14. Ensure that NACF households are only required to sign one application. (ACL 13-96, 14-101, 15-84 and 19-10)
15. Ensure that all notices sent to households are in the household's preferred language. (MPP 21-115.2 and 63-202.2)
16. Ensure that the recertification process is completed accurately. A NEC must be sent to all households for recertification. Also, a CF 37 must be completed rather than the CF 285 at recertification. (7 CFR 273.14(b)(1); MPP 63-504.61(b); ACL 14-20 and 14-101)
17. Ensure that the correct compliance date is listed when a NOMI is sent to households who miss their scheduled interview. Applicants have 30 days from the date of application to reschedule or conduct their interview. (FNS Handbook 310, Section 1350.2; MPP 63-300.461; ACL 21-24)
18. Ensure that applications are approved within 30 calendar days of the date of application when the household meets all eligibility factors. (MPP 63-301.3; ACIN I-14-11)
19. Ensure that the certification period is accurate and consistent with the eligibility factors in the case file. Households entitled to ESAP must be assigned a 36-month certification period and a SAR 7 is not required from March 1, 2022 through

September 30, 2026. (ACL 17-34, 20-145 and 22-15)

Second Party Reviews

None.

Quality Control

None.

Training

None.

PROGRAM ACCESS

Customer Service

None.

Interview Observations

1. Ensure that households are properly informed of the gambling and lottery winnings reporting responsibilities. (ACL 20-142; ACIN I-78-21)
2. Ensure that households entitled to ES are screened correctly, scheduled a timely appointment, and benefits are issued within the three-day timeframe from the date of application or date of discovery. (ACL 16-14; ACIN I-14-11)
3. Ensure that a clear, accurate, and complete CW 2200 is sent to the household and maintained in the case record when verifications are needed. The CW 2200 must have the appropriate programs boxes selected and each item must list a single due date that allows at least ten calendar days to provide the requested verifications. Also, ensure that verifications are not requested when not required for the CF program. (ACIN I-45-11; ACL 14-26)
4. Ensure that a duplicate application signature is not required when a signed application is already on file for NACF applicants. (ACL 13-96 and 15-84)
5. Ensure that all requirements and procedures related to the interview waiver are applied correctly. (ACWDL dated April 2, 2020 and October 21, 2020)
6. Ensure that requests for verification do not limit verifications to a specific type when multiple sources of verification are acceptable. (ACL 21-24; ACIN I-45-11)

7. Ensure that a NOMI is sent to the households that have missed their scheduled recertification interview. (ACL 19-10)
8. Ensure that the date the application is received is recorded on the application. (7 CFR 273.2(c)(1)(iv); MPP 63-300.33)

Recertification Process

None.

Online Applications

None.

Outreach

None.

Document Imaging

1. Ensure that an email is not utilized as a viable document submission method for CF as it does not safeguard the household's PII. (ACL 19-39)
2. Ensure that all applications received via walk-in are date stamped on the application. (7 CFR 273.2(c)(1)(iv)); MPP 63-300.33)

Customer Service Center

1. Ensure that substantial gambling and lottery winnings reporting responsibilities are reviewed with applicants and recertifying households. (ACL 20-132; ACIN I-78-21)
2. Ensure that benefits are not delayed when non-mandatory verifications are not provided. Birth certificate verification for a newborn is not required for NACF and Social Security card can be delayed until the next recertification or within six months following the month the baby is born, whichever is later. (ACIN I-45-11, I-24-15 and I-54-22)
3. Ensure that, when verifications are required, households are not limited to one form of verification when multiple sources exist. (ACIN I-45-11)
4. Ensure that appointment letters provided to households are accurate and indicate the appropriate program for which the interview appointment is for. (ACL 08-29)
5. Ensure that verifications are not requested for information that is not required for the CF program or is already available through electronic sources. Applying for UIB or other unconditionally available income is not a mandatory verification for NACF.

(ACIN I-45-11; ACL 20-135)

Mystery Calls

1. Ensure that callers are able to get information about obtaining CF benefits when they call the CWD. (ACIN I-76-20; MPP 63-300.34; 7 CFR 273.2(c)(2))
2. Ensure that callers are informed of all the methods to apply for CF benefits (in-person, online, by mail, and via fax). (MPP 63-300.31)
3. Ensure that callers are made aware of their right to file an incomplete CF application containing only the name, address and signature of a responsible member of the household. (MPP 63-300.32)
4. Ensure that callers are consistently informed of the right to ES, the timeframes for ES, and how to initiate the process. (MPP 63-301.521)

TIMELINESS OF APPLICATION

Three-Day Processing

None.

Thirty-Day Processing

None.

ABAWD – LIMITED SCOPE MODULE FOR WAIVED COUNTIES

Case Reviews

None.

Observations

None.



County of Sacramento

February 1, 2023

Tami Gutierrez, Chief
CalFresh Operations Bureau, MS 8-9-12
California Department of Social Services
744 P Street
Sacramento, CA 95814

SUBJECT: Sacramento County FFY 2022 PIR

Dear Ms. Gutierrez:

The County of Sacramento, Department of Human Assistance (DHA), is writing to provide our Program Improvement Response (PIR) for the CalFresh Management Evaluation (ME) for Federal Fiscal Year (FFY) 2022, which was conducted from July 11, 2022, through July 15, 2022.

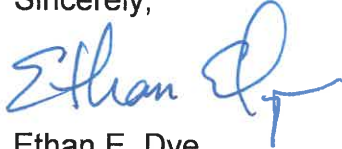
In response to the findings from the ME, noted in your letter, dated September 27, 2022, DHA has set forth the following action plan:

1. DHA will continue to adhere to the Corrective Action Plan already in place in order to address the timeliness for application processing for three-day timeframes. This includes monitoring the Expedited Services (ES) pending report daily for staff to review and continuing to offer overtime for ES processing, with scheduled super Saturdays as needed.
2. Supervisors have been directed to review ME findings, shared with them at forums and supervisor meetings, with line staff during their unit meetings. They will also provide any policy clarification that may be needed. Additionally, the Case Review and Training team will conduct focused reviews based on the documented findings, from January 2023 through June 2023.
3. The CalFresh Program Specialist will continue to support line staff with policy retention and understanding, as well as policy resources for supervisors. Moreover, our Case Review Training Supervisors will continue to administer CalFresh Refresher Training.

Please note that DHA had already taken action on some findings prior to the final report, such as providing training on verification requirements and expedited services.

DHA is committed to partnering with the California Department of Social Services to improve our case actions and program access. If you have additional questions related to the enclosed responses, please contact Cathi Aurich, Program Manager, by telephone at (916) 875-8430 or via email at aurichc@saccounty.gov.

Sincerely,



Ethan E. Dye
Director

c: Cristina Vazquez, Deputy Director
Eduardo Ameneiro, Deputy Director
Roselee Ramirez, Division Manager
Cathi Aurich, Program Manager
Linh Do, Program Specialist

PAYMENT ACCURACY/ASSESSMENT OF CORRECTIVE ACTIONS

Case Action Reviews:

1. Ensure that information and action reason(s) listed on denial or termination NOA are correct and accurately inform households of the reason(s) the negative action is/are taken. (FNS Handbook 310, Section 1350.2; MPP 63-504.2)

Response:

DHA accepts this finding. DHA will incorporate reviewing of the NOA for accuracy in an upcoming training conducted by the Case Review and Training (CRT) Team. The CalFresh Quality Assurance Team completes full case reviews, which includes reviewing NOA's, utilizing our Case Review System (CRS). CRS gives individual feedback to the worker on the errors found, ensuring the corrections are made timely, and provides an additional learning opportunity for the worker to prevent the same error in the future.

2. Ensure that negative actions taken are accurate, timely, and consistent with the case record. Case actions for income over the IRT must occur timely and adequately. In addition, applicants must have an opportunity to provide the requested verification within the due date listed on the CW 2200. (MPP 63-300.5(a)(1); ACIN I-33-21; ACL 12-25, 15-42 and 21-101)

Response:

DHA accepts this finding. The Policy Team reiterated to staff in our November 2022 policy update, the importance of taking accurate and timely action on all cases. The CalFresh Quality Assurance Team completes full case reviews on a monthly basis. Case reviews include individual feedback to the worker who created the error, ensuring the error is corrected timely and provides an additional learning opportunity for the worker to prevent the same error in the future. In addition, the CRT Team provided training on the CW2200 form in July of 2022. Our standard practice after each training is to complete targeted case reviews on the training that was provided.

3. Ensure that all applications are screened for ES, the ES determination is documented in the case record, and an interview is scheduled within the three-day timeframe for potential ES eligible households. (ACIN I-14-11 and I-11-20; ACL 16-14)

Response: DHA accepts this finding. DHA's standard practice is to evaluate expedited services on all applications and continues to strive towards meeting the expedited services timeframes, as outlined within in our current Corrective Action Plan. Our process includes monitoring the ES pending report daily to ensure cases are dispositioned timely. We continue to offer overtime that is specifically dedicated to processing CalFresh applications. DHA also has established dedicated units that specifically focus on evaluating expedited services throughout the day. We are seeing improvement in our processing time however, our monthly applications received continue to increase, with over 72% of the applications submitted online. DHA would like support from CDSS in

evaluating the ES process to align with current methods of submitting applications. With the increase in online users, the influx of applications is often challenging for us to meet the 3 day timeframe to register the application, evaluate the application, and issue benefits timely to the customer. In addition, with the remaining 16 CalWIN counties migrating to CalSAWS in 2023, DHA will face additional challenges with meeting the 3-day timeframe. DHA will continue to prioritize towards meeting the ES timeframe, continue training our staff, conduct case reviews, and monitor our ES reports for accuracy.

4. Ensure that case documentation is accurate, sufficient, and available in the case record to support the case actions. Discrepant or contradictory information should be clarified with households during interviews and documented in the case file.

Response: DHA accepts this finding. The CalFresh Quality Assurance Team completes full case reviews utilizing our Case Review System (CRS). CRS gives individual feedback to the worker on the errors found, ensuring the corrections are made timely, and provides an additional learning opportunity for the worker to prevent the same error in the future. Operational line supervisors conduct case reviews as well, and are discussing the findings with staff in their monthly one on ones. Continuous training is conducted throughout the year, addressing case documentation and proper case commenting.

5. Ensure that requests for verifications are not limited to one form of verification when multiple sources exist. In addition, verifications should not be requested for information not required for the CF program and not questionable. (ACIN I-45-11; ACL 20-48, 20-135 and 21-24)

Response: DHA accepts this finding. The CRT Team addressed requesting verification and over-verification during trainings held in January 2022 and July 2022, then completed targeted case reviews on the training, utilizing our case review system which gives individual feedback to the worker on the errors found, ensuring the corrections are made timely, and provides an additional learning opportunity for the worker to prevent the same error in the future.

6. Ensure that a clear, accurate and complete CW 2200 is sent to the household and maintained in the case record when verifications are required. Additionally, the CW 2200 must list a due date that allows a minimum of ten calendar days to provide verifications. (ACIN I-45-11 and I-33-21; ACL 14-26)

Response: DHA accepts this finding. Accurate completion of the CW 2200 was included in a CRT training held in July 2022, which also addressed that due dates must allow a minimum of 10 calendar days to provide verification and must be documented in the case record. Targeted case reviews on the training was completed. The reviews include individual feedback to the worker on the error and corrections are required in order to properly disposition the review.

7. Ensure that the household's income and deductions are calculated accurately and entered correctly when determining a household's eligibility and benefit allotment. (MPP 63-502 and 63-503.413; 7 CFR 273.9(d)(6)(iii)(C) and 273.10(e)(1)(i); ACL 03-18 and 12-25)

Response: DHA accepts this finding. The CalFresh Quality Assurance Team completes full case reviews on a monthly basis. Case reviews include individual feedback to the worker who created the error, ensuring the error is corrected timely and provides an additional learning opportunity for the worker to prevent the same error in the future. In addition, calculating the household's income and deductions was covered in CRT trainings held in January 2022 and July 2022. Our standard practice after each training is to complete targeted case reviews on the training that was provided.

8. Ensure that ICT transmittals are initiated timely within seven business days of receiving notification of the address change. (ACL 17-58)

Response: DHA accepts this finding. Currently due to staffing challenges within our specialized ICT unit, we had experienced delays in initiating the incoming transfers within 7 days. Also it was discovered by the CalSAWS Project that there were errors with the transmittals of ICT's from the CalSAWS counties to the CalWIN counties. In addition we are reviewing our internal business process for efficiency and are hiring additional staff.

9. Ensure that student exemption status is thoroughly explored with the household. Verification of student exemption must not be requested unless the case record adequately documents why the information was deemed questionable. (ACL 21-58)

Response: Requests for verification and asking probing questions were included in the CRT trainings held in January 2022 and July 2022. Our standard practice after each training is to complete targeted case reviews on the training that was provided. Case reviews include individual feedback to the worker who created the error, ensuring the error is corrected timely and provides an additional learning opportunity for the worker to prevent the same error in the future.

10. Ensure that household composition is correctly configured to include mandatory household members, such as individuals who purchase and prepare meals together. An individual's age, alone, does not mandate inclusion in the household. (MPP 63-402.142; ACL 21-101)

Response: DHA accepts this finding. The CalFresh Quality Assurance Team completes full case reviews on a monthly basis. Case reviews include individual feedback to the worker who created the error, ensuring the error is corrected timely and provides an additional learning opportunity for the worker to prevent the same error in the future. In addition, the CRT team addressed household composition in the July 2022 training. Our standard practice after each training is to complete targeted case reviews on the training that was provided.

11. Ensure that when an interactive interview is required, the interview is scheduled timely within 30 days from the date of application. Additionally, ensure that contact for the scheduled interview is attempted and documented in the case file. (MPP 63-300.4)

Response: DHA accepts this finding, however we would like to notate that we were within performance standards for processing applications within 30 days at 97.21% between the periods of April 2022 – June 2022. The case that was cited, it was found that the original appointment was mailed timely and that the NOMI was issued. Our clerical staff and supervisors were reminded that all interviews must be scheduled within 30 days and that the case needs to be properly documented that we attempted to schedule the interview.

12. Ensure that the last 30 days of income is requested and not from a particular month or date. If a specific period of income is requested after exploring the household's circumstances, ensure case documentation supports such a request. (7 CFR 273.10(c)(1)(ii); ACL 19-10, 20-48 and 21-24)

Response: DHA accepts this finding. The CRT team addressed the time period of requesting income and the importance of documenting why the income was requested in a training that was conducted in July 2022. Our standard practice after each training is to complete targeted case reviews on the training that was provided.

13. Ensure that the date the application is received is recorded on the application. (7 CFR 273.2(c)(1)(iv); MPP 63-300.33)

Response: DHA accepts this finding. DHA will change the clerical procedure for interactive application registration to include date stamping the application prior to imaging it.

14. Ensure that Non-Assistance CalFresh (NACF) households are only required to sign one application. (ACL 13-96, 14-101, 15-84 and 19-10)

Response: DHA accepts this finding. DHA will reiterate the requirement that only one signed application is required and only one should be sent to imaging. In addition, we will ensure all scripts and processes notate that only one signature is required to be gathered.

15. Ensure that all notices sent to households are in the household's preferred language. (MPP 21-115.2 and 63-202.2)

Response: DHA accepts this finding. Clerical staff and supervisors will be reminded that all correspondence, including appointment letters must be in the customer's primary language and if unavailable a GEN 1356 is included.

16. Ensure that the recertification process is completed accurately. A NEC must be sent to all households for recertification. Also, a CF 37 must be completed rather than the CF 285 at recertification. (7 CFR 273.14(b)(1); MPP 63-504.61(b); ACL 14-20 and 14-101)

Response: DHA accepts this finding. The error cited was found to be a CalWIN programming issue and was fixed in Release 69, effective May 2022.

17. Ensure that the correct compliance date is listed when a NOMI is sent to households who miss their scheduled interview. Applicants have 30 days from the date of application to reschedule or conduct their interview. (FNS Handbook 310, Section 1350.2; MPP 63-300.461; ACL 21-24)

Response: DHA accepts this finding. DHA will incorporate reviewing of the NOMI for accuracy in an upcoming training on notices. In addition, it will be addressed in a policy update in February of 2023.

18. Ensure that applications are approved within 30 calendar days from the date of application when the household meets all eligibility factors. (MPP 63-301.3; ACIN I-14-11)

Response: DHA accepts this finding. DHA utilizes a variety of methods to monitor our pending applications to include, our service center dashboards, executive dashboard, and management reports. In addition, our operational line supervisors are monitoring of dispositioning application denials timely.

19. Ensure that the certification period is accurate and consistent with the eligibility factors in the case file. Households entitled to ESAP must be assigned a 36-month certification period and a SAR 7 is not required from March 1, 2022 through September 30, 2026. (ACL 17-34, 20-145 and 22-15)

Response: DHA accepts this finding. DHA will address the requirements of elderly simplified applications in a policy update in February of 2023 In addition; we review SAWS functionality to explore automating the process within the system.

Program Access

1. Ensure that households are properly informed of the gambling and lottery winnings reporting responsibilities. (ACL 20-142; ACIN I-78-21)

Response: DHA accepts this finding. DHA addressed in a policy update in November of 2022, the importance of ensuring that our customers are aware that they are required to report their gambling and lottery winnings.

2. Ensure that households entitled to ES are screened correctly, scheduled a timely appointment, and benefits are issued within the three-day timeframe from the date of application or date of discovery. (ACL 16-14; ACIN I-14-11)

Response:

DHA accepts this finding. DHA's standard practice is to evaluate expedited services on all applications and continues to strive towards meeting the expedited services timeframes, as outlined within in our current Corrective Action Plan. Our process includes monitoring the ES pending report daily to ensure cases are dispositioned timely. We continue to offer overtime that is specifically dedicated to processing CalFresh applications. DHA also has established dedicated units that specifically focus on evaluating expedited services throughout the day. We are seeing improvement in our processing time however our monthly applications received continue to increase, with over 72% of the applications submitted online. DHA would like support from CDSS in evaluating the ES process to align with current methods of submitting applications. With the increase in online users, the influx of applications is often challenging for us to meet the 3 day timeframe to register the application, evaluate the application, and issue benefits timely to the customer. In addition, with the remaining 16 CalWIN counties migrating to CalSAWS in 2023, DHA will face additional challenges with meeting the 3-day timeframe. DHA will continue to strive towards meeting the ES timeframe, continue training our staff, conduct case reviews, and monitor our ES reports for accuracy.

3. Ensure that a clear, accurate, and complete CW 2200 is sent to the household and maintained in the case record when verifications are needed. The CW 2200 must have the appropriate program boxes selected and each item must list a single due date that allows at least ten calendar days to provide the requested verifications. Also, ensure that verifications are not requested when not required for the CF program. (ACIN I-45-11; ACL 14-26)

Response: DHA accepts this finding. Training was provided by the CRT team on proper completion of the CW2200 in July 2022. Our standard practice after each training is to complete targeted case reviews on the training that was provided. Case reviews include individual feedback to the worker who created the error, ensuring the error is corrected timely and provides an additional learning

opportunity for the worker to prevent the same error in the future. In addition, proper completion of the CW2200 is reiterated in one on ones and policy updates.

4. Ensure that a duplicate application signature is not required when a signed application is already on file for NACF applicants. (ACL 13-96 and 15-84)

Response: DHA accepts this finding. DHA accepts this finding. DHA will reiterate the requirement that only one signed application is required and only one should be sent to imaging. In addition, we will ensure all scripts and processes notate that only one signature is required to be gathered.

5. Ensure that all requirements and procedures related to the interview waiver are applied correctly. (ACWDL dated April 2, 2020 and October 21, 2020)

Response: DHA accepts this finding. With the onset of the PHE, DHA worked diligently to keep staff informed on the many policy changes across all programs. Our CalFresh Policy Team routinely sends out policy updates, which also has included guidance on applying the interview waiver. In addition, the Policy Team provides support and guidance to our operational supervisor on an ongoing basis.

6. Ensure that requests for verification do not limit verifications to a specific type when multiple sources of verification are acceptable. (ACL 21-24; ACIN I-45-11)

Response: DHA accepts this finding. Training was provided on requesting verifications in January 2022 and July 2022. Our standard practice after each training is to complete targeted case reviews on the training that was provided. Case reviews include individual feedback to the worker who created the error, ensuring the error is corrected timely and provides an additional learning opportunity for the worker to prevent the same error in the future.

7. Ensure that a NOMI is sent to households that have missed their scheduled recertification interview. (ACL 19-10)

Response: DHA accepts this finding. DHA will reiterate with the Operational Supervisors the importance of reviewing that notices are properly released in CalWIN when conducting case reviews. In addition, NOMI requirements will be reviewed in an upcoming training in spring of 2023.

8. Ensure that the date the application is received is recorded on the application. (7 CFR 273.2(c)(1)(iv); MPP 63-300.33)

Response: DHA accepts this finding. DHA will change the clerical procedure for interactive application registration to include date stamping

the application prior to imaging it.

Document Imaging

1. Ensure that an email is not utilized as a viable document submission method for CF as it does not safeguard the household's PII. (ACL 19-39)

Response: DHA is requesting clarification on the finding listed above. ACL 19-39 references electronic communication requirements, in reference to outgoing communication to the customer. Based on the findings DHA has shut down the email boxes that were established for customers to submit documentation. Submitting verification via email was only utilized as a last resort for customers when they had difficulties providing verification by another means. Guidance is also needed on how to handle verifications that were sent via email when email submission was not offered.

2. Ensure that all applications received via walk-in are date stamped on the application. (7 CFR 273.2(c)(1)(iv)); MPP 63-300.33)

Response: DHA accepts this finding. DHA will change the clerical procedure for interactive application registration to include date stamping the application prior to imaging it.

Customer Service Center

1. Ensure that substantial gambling and lottery winnings reporting responsibilities are reviewed with applicants and recertifying households. (ACL 20-132; ACIN I-78-21)

Response: DHA accepts this finding. DHA addressed in a policy update in November of 2022, the importance of ensuring that our customers are aware that they are required to report their gambling and lottery winnings.

2. Ensure that benefits are not delayed when non-mandatory verifications are not provided. Birth certificate verification for a newborn is not required for NACF and Social Security card can be delayed until the next recertification or within six months following the month the baby is born, whichever is later. (ACIN I-45-11, I-24-15 and I-54-22)

Response: DHA is requesting that the finding listed above be reconsidered due to the issuance of date of ACIN I-54-22. The referenced ACIN provides clarification of when a newborn's Social Security Number must be received, however the noticed was issued after our audit took place. Our Policy Team sent out clarification to staff on ACIN I-54-22 in August of 2022.

3. Ensure that, when verifications are required, households are not limited to one form of verification when multiple sources exist. (ACIN I-45-11)

Response: DHA accepts this finding. Training was provided on requesting verifications in January 2022 and July 2022. Our standard practice after each training is to complete targeted case reviews on the training that was provided. Case reviews include individual feedback to the worker who created the error, ensuring the error is corrected timely and provides an additional learning opportunity for the worker to prevent the same error in the future.

4. Ensure that appointment letters provided to households are accurate and indicate the appropriate program for which the interview appointment is for. (ACL 08-29)

Response: DHA accepts this finding. DHA will review the department appointment letters format and will also ensure our clerical procedures are up to date. Clerical supervisors reiterated the importance of accuracy.

5. Ensure that verifications are not requested for information that is not required for the CF program or is already available through electronic sources. Applying for UIB or other unconditionally available income is not a mandatory verification for NACF.

Response: DHA accepts this finding. Training was provided by the CRT team on verifications, including the ex-parte method in January 2022 and July 2022. Our standard practice after each training is to complete targeted case reviews on the training that was provided. Case reviews include individual feedback to the worker who created the error, ensuring the error is corrected timely and provides an additional learning opportunity for the worker to prevent the same error in the future.

Mystery Calls

1. Ensure that callers are able to get information about obtaining CF benefits when they call the CWD. (ACIN I-76-20; MPP 63-300.34; 7 CFR 273.2(c)(2)).

Response: DHA accepts this finding. DHA continues to recruit, hire, and train new employees to answer phones and process cases. Continuous new hire classes are being conducted and we anticipate further hiring.

2. Ensure that callers are informed of all the methods to apply for CF benefits (in-person, online, by mail, and via fax). (MPP 63-300.31)

Response: DHA accepts this finding. DHA is developing a script for staff to use when a customer calls and asks how they can apply for CalFresh to ensure all methods are provided to the customer. In addition, DHA will begin utilizing mystery callers in spring of 2023 to ensure customers are informed of all ways to apply for CalFresh.

3. Ensure that callers are made aware of their right to file an incomplete CF application containing only the name, address and signature of a responsible member of the household. (MPP 63-300.32)

Response: DHA accepts this finding. DHA staff is aware that a CalFresh application only requires the name, address, and signature of the responsible household member. DHA strives to receive the most complete applications as possible to expedite the processing time and will always accept and incomplete application. DHA is developing a script for staff to use when a customer calls about CalFresh that explains the minimum requirements to file an application. In addition, DHA will begin utilizing mystery callers in spring of 2023 to ensure customers are informed of their right to file an incomplete application.

4. Ensure that callers are consistently informed of the right to ES, the timeframes for ES, and how to initiate the process. (MPP 63-301.521)

Response: DHA accepts this finding. DHA is developing a script for staff to use when a customer calls regarding expedited services that explains the expedited timeframes.