OMB Number: 0584-XXXX Expiration Date: xx/xx/202x

## ADJUSTMENT OF RECORDING OF TELEPHONIC SIGNATURES

- **1. Regulatory citation:** 7 C.F.R. 273.2(c)(7)(viii)(A), 7 C.F.R. 273.2(c)(7)(viii)(B), and 7 C.F.R. 273.2(c)(7)(viii)(C)
- **2. Regulatory requirements:** Supplemental Nutrition Assistance Program (SNAP) regulations at 7 C.F.R. 273.2(c)(7)(viii)(A) require State agencies that choose to accept telephonic signatures to specify in their State plans of operation that they have selected this option.

SNAP Regulations at 7 C.F.R. 273.2(c)(7)(viii)(B) require that to constitute a valid telephonic signature, the State agency's telephonic signature system must make an audio recording of the household's verbal assent and a summary of the information to which the household assents. An example of a telephonic signature is a recording of "Yes" or "No", "I agree" or "I do not agree", or otherwise clearly indicating agreement or disagreement during an interview over the telephone.

SNAP Regulations at 7 C.F.R. 273.2(c)(7)(viii)(C) require that a telephonic signature system must provide for linkage from the audio file of the recorded verbal assent to the application so that the State agency has ready access to the household's entire case file.

- **3. Description of alternative procedures:** The State will not be required to create an audio recording of the client attestation or link that recording to the client case file. The State will summarize the information to which the household assents and allow a verbal signature from the client that is documented by the State. The documentation will include a case note in the State's eligibility system to demonstrate that the client has signed the application. The information the State documents in the case file must include the client's name, date and time of application, a summary of the information to which the client verbally assents, and the client's responses indicating agreement or disagreement. If a client submits an application without a signature and the State is able to connect with the client over the phone, the State will also note on the application that verbal attestation of the signature was given. The State is not required to amend its State Plan of Operation to indicate it is taking the telephonic signature option.
- **4.** Action and reason for approval or denial: The Food and Nutrition Service (FNS) recognizes the need for adjustments due to the COVID-19 Public Health Emergency. As authorized by the Families First Coronavirus Response Act (P.L. 116-127), FNS's approval of this adjustment is based on the determination that the adjustment is consistent with what is practicable under actual conditions in areas affected by the COVID-19

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-xxxx. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5<sup>th</sup> Floor, Alexandria, VA 22314. ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

Public Health Emergency. FNS is approving this adjustment for a period of 3 months, effective March 1, 2020, through May 31, 2020.

- **5. Conditions of approval:** FNS is approving this adjustment subject to the following conditions:
  - A public health emergency declaration by the Secretary of Health and Human Services must be in place and the State must have issued an emergency or disaster declaration based on an outbreak of COVID-19 at the time of the State's request for the adjustment;
  - The adjustment is limited to those households who submit an application over the phone or who have submitted an application without a signature;
  - Households will still be permitted to submit an application over the telephone with only name, address and signature to establish a filing date;
  - The State will continue to accept paper applications with signatures and online applications with electronic signatures (if available in the State);
  - The State will ensure that sufficient controls in its policy and automation are in place to implement the terms of this adjustment correctly, including a sufficient number of lines to accept calls and any necessary staffing changes to accept applications through the telephone;
  - The State will continue to comply with all other applicable interview and signature requirements;
  - The State will not accept an application without a signature, in accordance with 7 CFR 273.2(c)(7)(i);
  - The State will consult with its legal counsel to determine if this alternate approach constitutes a valid legal signature in their State; and
  - The State agency has the capacity to provide to FNS the data required for evaluation of the caseload.

If the State agency elects to implement these flexibilities, it must notify its respective FNS Regional Office, which will acknowledge receipt. State responses will be relayed to the FNS Program Design Branch.

- **6. Evaluation Data Requirements:** The State agency must provide to FNS the data and analysis listed below required for evaluation of this adjustment<sup>1</sup>:
  - Estimated number of households affected by this adjustment;
  - A narrative on the effect of the adjustment on program access and client satisfaction, including an analysis of any client or advocate complaints received related to the adjustment procedure;
  - A narrative on the effect of the adjustment on the provision of timely and accurate benefits; and

<sup>&</sup>lt;sup>1</sup> This information collection is being submitted to OMB approval under 5 CFR 1320.13.

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Attachment C: Example of FFCRA SNAP Waiver Request Template

- A narrative on the effect of the adjustment on any other aspects of the eligibility process including the ability to manage staff caseload growth and the impact on administrative efficiency.
- 7. Expiration date: May 31, 2020
- **8. Quality control procedures:** No special Quality Control (QC) procedures are required for cases subject to the provisions of this adjustment. Cases should be reviewed using standard review procedures contained in the FNS Handbook 310.

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