OKDHS SNAP Management Evaluation Review Plan Federal Fiscal Year 2025

Background

The Supplemental Nutrition Assistance Program (SNAP) Management Evaluation (ME) Review system was developed to comply with the United States Department of Agriculture-Food and Nutrition Service (USDA-FNS), regulations at Title 7 Code 06 CFR Part B, Section 275.5 (b) (1). Federal regulations require state agencies to conduct a review once every year for large project areas, once every two years for medium project areas, and once every three years for small project areas, unless an alternative schedule is approved by USDA-FNS. The Adult and Family Services (AFS) division of Oklahoma Human Services is composed of two retail space regions that split the state into east and west, three on-demand regions that consist of remote case workers who handle phones, and centralized units for TANF and Long-Term Care specialized caseloads. Each region is considered a large project area and must be reviewed once yearly. A state AFS office locations map is located online at https://oklahoma.gov/okdhs/contact-us/dhsofficelocations.html.

In response to the annual USDA-FNS State SNAP Management Evaluation Target Areas Memo, the SNAP Quality Assurance (QA) Unit identifies the current ME priorities for addressing areas of national concern.

The planned ME priorities for FFY 2025 include:

- Initial Certification and Recertification Processes
- Closures and Denials
- ABAWD, Work Requirements, and E&T
- Recipient Integrity: Data Matching
- Case Note Documentation
- SNAP-Ed

SNAP ME Review History

Since September 2015, QA has been responsible for conducting the SNAP Management Evaluations. The SNAP ME schedule has historically provided yearly regional reviews with at least one district within each of the five large regional project areas visited during each FFY. Prior to FFY 2021, case audits and conferences were conducted for districts individually. In order to adapt to ongoing statewide restructuring, the ME process had to be revised.

Over the years, AFS caseloads have been gradually evolving to a shared-workload model. Whereas once, an application was processed by the specific county office where the customer resided, technology and process improvements now allow us to provide more efficient service by distributing caseloads more equitably across the state. Caseloads were distributed regionally in FFY 2021 and were shared statewide by FFY 2022. Effective April 11, 2023, statewide caseload management shifted from case-based to task-based, utilizing a software system called Current [™] to prioritize and streamline the workflow.

Beginning in FFY 2021, QA transitioned to a statewide model for ME case audits with targeted intervention and follow-up for top payment accuracy trends, and separate Local Process Reviews (onsite visits) for districts remaining on a 3-year schedule.

FFY 2025 ME Plan

Quality Assurance plans to continue with our statewide model for Management Evaluations that began in FFY 2021, with targeted intervention and follow-up for top payment accuracy trends.

Active Cases (Initial Certifications and Recertifications)

Quality Assurance reviews active case actions to assess timeliness, case accuracy, documentation, and notices. QA uses the active case review to identify trends in error-prone elements that affect payment accuracy and provide targeted follow-up for identified trends. To focus on improving payment accuracy, active case actions will remain the primary focus of the ME review process for FFY 2025. The active case review will consist of a Baseline Review to identify the top two error-prone elements, followed by two rounds of targeted intervention and review to address these trends.

Baseline Review

A baseline review of active cases (Initial Certifications and Certification Renewals) will be conducted for the entire state during the first quarter of the FFY. The baseline sample will be 450 active cases for the entire state. Active cases will be reviewed for timeliness, case accuracy, documentation, and notices. QA will compile the data from this review to identify statewide trends for error-prone elements. QA will meet with Regional Leadership to discuss the findings and collaborate to develop recommendations for a corrective action plan to target the top two trends. The goal of this plan is to provide effective and efficient evaluation and active and reliable feedback to enhance the quality of the SNAP program. QA will focus on the identification and analysis of root causes to help develop the appropriate corrective actions. Category reports will be delivered to each Regional Deputy Director with a breakdown for each district within the region, as well as charts summarizing statewide and regional data.

Intervention

QA currently delivers SNAPChat, a tool to assist supervisors in focusing on a specific error element, at the beginning of each quarter. Starting in FFY 2021, QA integrated the SNAPChat into the Management Evaluation process to further encourage a consistent focus on improving these trending elements. The SNAPChat topics for the 2nd and 3rd quarters will be determined by the top trends from the baseline Management Evaluation review completed in the 1st quarter. At the beginning of these quarters, QA will provide tools and resources to help supervisors focus on improvements for the specific trend for the upcoming quarter and conduct virtual roundtable discussions with supervisors across the state to deliver these tools and provide a platform for collaboration and discussion.

Targeted Follow-up Review

During the 3rd and 4th quarters, QA will conduct targeted reviews, focusing on the top two trend error elements that will be identified from the baseline ME Review. Each of the targeted reviews will include a sample of 600 active cases. QA will compile the data from these reviews and provide detailed reports for each region, to include statewide findings as well as a breakdown for each district within the region. These targeted reviews will allow us to measure improvements in error-prone elements from the baseline review and identify additional areas for further intervention.

Closures and Denials (CAPERS)

During the 2nd quarter of the FFY, QA will review closures and denials for procedural accuracy, correct notices, and documentation. QA will sample 300 negative case actions from across the state for this review. Findings will be compiled to distribute to each Regional Deputy Director and included in the Final ME Report.

Recipient Integrity: Data Matching

QA will assess compliance with Federal data matching requirements. A sample of 45 cases matched through the Death Match, New Hire Match, or Prisoner Verification System will be reviewed during the 3rd quarter of the FFY. The Quality Assurance Unit also reviews compliance with New Hire Match and Systematic Alien Verification and Eligibility (SAVE) for every initial and recertification action reviewed during the initial baseline review. Deficiencies found in areas that do not coincide with data matching regulations will be reviewed to identify appropriate corrective actions to address the areas of concern.

Case Note Documentation

Clear and consistent case note documentation is essential for statewide task-based caseload management to work effectively. Inadequate case notes also increase the risk of Quality Control errors. A case note generator was implemented in FFY 2023 to ensure thorough and consistent documentation of all SNAP applications. After evaluating the benefits and deficiencies of the case note generator and gathering feedback from staff, an enhanced case note generator was developed with planned implementation in the 1st quarter of FFY 2025.

The baseline review of active SNAP cases has always included evaluation of case note documentation with findings called for failing to fully address all factors of eligibility or failing to address discrepancies. For the FFY 2025 baseline review, ME reviewers will also check for use of the case note generator and compare this to findings called for insufficient case note documentation. A follow-up review of case note documentation will be conducted in the 3rd quarter of FFY 2025 to measure improvement.

SNAP ABAWD, Work Requirements, and OK SNAP Works

Oklahoma's Employment and Training program, known as OK SNAP Works, is a voluntary program that currently operates in Oklahoma, Pottawatomie, Tulsa, Osage, Washington, Wagoner, Creek, Rogers, Pawnee, Pontotoc, Muskogee, Pittsburg, McIntosh, Okmulgee Counties and surrounding areas. OK SNAP Works contracts with 10 providers; Public Strategies, Center for Employment Opportunity, ReMerge, TEEM, Homeless Alliance, Tri-County Tech, Goodwill Central Oklahoma, Madison Strategies Group, Tulsa Goodwill, and Women in Recovery who serve participants in the above listed counties. OK SNAP Works is hoping to add Northwest Tech Center and SideXSide in FFY 2025 pending FNS approval.

A sample of 60 SNAP certification actions will be reviewed in the 2nd quarter of FFY 2025 for the ABAWD, Work Requirements, and E&T Review. Reviewers will check for proper determination and coding of work registration and ABAWD including lookback after ABAWD status change, updating ABWI when needed, timeliness of closures after expiration of K months, correct certification period,

correct notices, and verification of exemptions when required. Reviewers will also check for case note documentation for screening of work registration and ABAWD exemptions, explanation of work requirements and ABAWD, documentation of number of hours worked per week, screening and referral for E&T, and exploration of voluntary quit/reduced hours when applicable. Any sanctions or disqualifications imposed during the review period for voluntary quit or failure to comply with work requirements will be reviewed to ensure proper procedures were followed, including exploration of good cause and notification to clients.

During the interview observation portion of the onsite visits, ME reviewers will check for explanation of the E&T program including participant reimbursements in addition to the explanation of work requirements and ABAWD when applicable. All findings are reported to the district. If any trends are identified, then corrective actions are created with the individual regions or districts.

Reports

Following the initial baseline review, QA will compile category reports for each Regional Deputy Director as well as SNAP and AFS Leadership. Regional reports will include specific case findings for each district. Any region-specific issues identified during the Management Evaluation process will be considered for Process Improvement follow-up. At the end of the FFY, QA will deliver a final report for each region to FNS as well as SNAP and AFS leadership detailing the findings from each review throughout the fiscal year, including the baseline and targeted follow-up reviews of SNAP certifications, the review of closures and denials, data matching review, case note documentation review, the ABAWD, Work Requirements, and E&T review, and any additional process improvement follow-up reviews conducted for the region. Local Process Review reports will also be prepared and delivered for each district reviewed in FFY 2025 detailing the findings and observations from the onsite visit.

SNAP Ed

Oklahoma's SNAP Ed staff annually monitors all SNAP Ed contractors. ME of local IAs will use ME Guide provided by FNS SWRO and will include areas of focus or concern as indicated by FNS or the state. The SNAP Ed staff will visit the contractor on-site, attend an event hosted by the contractor, or complete a virtual visit and then review the financial documents that pertain to the event that was attended. If the contractor is teaching a class that deals with food and nutrition, the SNAP Ed monitor makes sure that the teachings are in line with the USDA MyPlate guidelines. All receipts need to reflect items used in the demonstration. Invoices from providers are reviewed upon receipt. Monthly review of invoices may also include review of additional financial documents, such as timesheets, as requested. FNS also conducts periodic reviews on the program.

Local Process Review (Onsite Visits)

Each district will continue to receive a review of local processes for all open offices within the district at least once per three-year period. The Onsite Review Schedule for FFY 2023-2025 was revised in 2023 according to the new AFS structure.

Local Process Reviews include county staff questionnaires, client access interviews, lobby tour, grassroots partner questionnaires, and SNAP interview observations, with a focus on program access

and customer service. QA will conduct a remote review of processes for the On Demand teams, though no in-person visit will be conducted as this is not a physical access point for clients. Findings and observations from the review will be reported to the district's Field Manager, Regional Deputy Director, state leadership, and FNS.

Onsite Review Schedule FFY 2023					
District	Counties	Field Manager	Region		
Retail Spa	Retail Space Teams				
8	Payne, Lincoln, Pottawatomie, Creek	Amanda Rogers	Retail East		
4	<u>Canadian</u> , Oklahoma	Trevor Shelby	Retail West		
3	Kay, Garfield	Shana Ritchie	Retail West		
9	Wagoner, Sequoyah, Muskogee, Okmulgee	Joanna Helems	Retail East		
11	Tulsa (Peoria)	Stacey Chadwell	Retail East		
On Dema	On Demand Teams				
Blue A		Paula Moore	On Demand Blue		
Blue B		Regina Richardson	On Demand Blue		
Yellow A		Sara Gorman	On Demand Yellow		
Yellow D		Tina Jenner	On Demand Yellow		
Yellow E		Marilyn Parker	On Demand Yellow		
Orange A		Teresa Smith	On Demand Orange		
Orange G		Paul Kaseca	On Demand Orange		

Onsite Review Schedule FFY 2023 – 2025

Onsite Review Schedule FFY 2024				
District	Counties	Field Manager	Region	
Retail Sp	ace Teams			
5	Cleveland, Stephens, Grady, Garvin	Tristan Pineda	Retail West	
4	Canadian, <u>Oklahoma</u> (Commerce)	Trevor Shelby	Retail West	
6	Atoka, Carter, Johnston	Kimberly Honeycutt	Retail West	
11	Tulsa (4848 Building)	Stacey Chadwell	Retail East	
12	Leflore, McCurtain, Pushmataha	Amye Caldwell	Retail East	
On Demand Teams				
	Blue C	Felicia Kurzyniec	On Demand Blue	
Blue F		Vacant	On Demand Blue	
Yellow C		Tammy Rector	On Demand Yellow	
Yellow G		Jerome Prather	On Demand Yellow	
Orange B		Michelle Gather	On Demand Orange	
Orange C		Janisha Johnson	On Demand Orange	
Orange E Mich		Michael Arias	On Demand Orange	
Specialized				
TANF				

Onsite Review Schedule FFY 2025				
District	Counties	Field Manager	Region	
Retail Sp	ace Teams			
2	Beckham, Comanche, Cotton, Jackson	Steve Burton	Retail West	
10	Osage, Ottawa, Rogers, Washington Denise McKinnon Retail East			
1	1 Custer, Texas, Woodward Bendy Huffman Retail West		Retail West	
7 Pittsburg, Pontotoc Mary Bennett		Mary Bennett	Retail East	
11	Tulsa (201 Center)	Stacey Chadwell	Retail East	
4	Canadian, <u>Oklahoma</u> (Kelley)	Trevor Shelby	Retail West	
On Demand Teams				
Blue D		Michelle Wade	On Demand Blue	
Blue E		Sherrie Jaramillo	On Demand Blue	
Yellow B		Fred Ikard	On Demand Yellow	
Yellow F		Andrew Huff	On Demand Yellow	
Orange D		Bryan Kindrick	On Demand Orange	
Orange F		Donna Province	On Demand Orange	
Specialized				
LTC				

FFY 2025 Statewide Management Evaluation Schedule

1st Quarter FFY 2025 Statewi	de Reviews					
October	November	December				
Baseline Case Rev	/iews (450 Actives)	Conferences w/ Regional Leadership				
		SNAPChat Delivery (1st Trend)				
2nd Quarter FFY 2025 Statew	ide Reviews					
January	February	March				
Supervisor Roundtable (Trend 1)	Onsite Visits: 1, 2, 11, Blue D, Yellow B, Orange D	Statewide CAPER Reviews (300)				
ABAWD, WR, E&T Review	Recipient Integrity: G1DX (45)	SnapChat Delivery (2nd Trend)				
3nd Quarter FFY 2025 Statew	ide Reviews					
April	May	June				
Trend 1: Targeted Case Reviews (600 actives)		Onsite Visits: 4, 7, 10, Blue E, Yellow F, Orange F, LTC				
Supervisor Boundtable (Trend 2)		Case Note Guide Follow-Up				
Supervisor Roundtable (Trend 2)		SnapChat Delivery (TBD)				
4th Quarter FFY 2025 Statewide Reviews						
July	August	September				
Trend 2: Targeted Case Reviews (600 actives)		Final Reports				
Process Improvement Follow-Up		FFY 2026 Prep				
Reviews Where Needed		SnapChat Delivery (TBD)				

State Agency Submitting the ME Plan and State Contact Person

The state agency submitting the State ME Plan is Oklahoma Human Services. The state agency contact person is Tiffany Kerley, Quality Assurance Program Supervisor, Adult and Family Services (405-982-3717 / <u>Tiffany.Kerley@okdhs.org</u>).

Signature and Title of Approving State Official

Tiffany Kerley

Tiffany Kerley, Quality Assurance Program Manager, Oklahoma Human Services