

## **North Dakota Provision 2 Base-Year in SY 19-20 Waiver Request**

### **1. State agency submitting waiver request and responsible State agency staff contact information:**

North Dakota Department of Public Instruction

### **2. Region:**

Mountain Plains Regional Office

### **3. Eligible service providers participating in waiver and affirmation that they are in good standing:**

St Thomas Public School District. The SFA is in good standing.

### **4. Description of the challenge the State agency is seeking to solve, the goal of the waiver to improve services under the Program, and the expected outcomes if the waiver is granted. [Section 12(l)(2)(A)(iii) and 12(l)(2)(A)(iv) of the NSLA]:**

St Thomas Public School District, a very small rural public school with one site, chose to establish a Provision 2 base year in SY 19-20. The SFA hopes to implement Provision 2 in SY 20-21. All required base year processes were put into place and all base year documentation was submitted to the State agency during the base year. When schools closed in March 2020 the SFA was unable to collect complete base year data for half of March, April and May 2020. It would not be beneficial or administratively feasible for the SFA to complete a new base year in SY 20-21. If this waiver is granted, the SFA would not be faced with this additional burden.

### **5. Specific Program requirements to be waived (include statutory and regulatory citations). [Section 12(l)(2)(A)(i) of the NSLA]:**

Provision 2 base year requirements at 7 C.F.R. 245.9(b)(3)(i) and 245.9(b)(3)(ii)

### **6. Detailed description of alternative procedures and anticipated impact on Program operations, including technology, State systems, and monitoring**

The State agency proposes to use the data collected during the base year, up to the date that schools closed due to COVID 19 to establish annual claiming percentages for breakfast and lunch. The percentages will be calculated based on the guidance provided on pages 15 & 16 of the USDA Provision 2 Guidance located online at the following link: <https://fns-prod.azureedge.net/sites/default/files/Prov2Guidance.pdf>

### **7. Description of any steps the State has taken to address regulatory barriers at the State level. [Section 12(l)(2)(A)(ii) of the NSLA]:**

No steps have been taken to address the regulatory barrier at the State level.

### **8. Anticipated challenges State or eligible service providers may face with the waiver implementation:**

The State does not anticipate any challenges with waiver implementation.

### **9. Description of how the waiver will not increase the overall cost of the Program to the Federal Government. If there are anticipated increases, confirm that the costs will be paid from non-Federal funds. [Section 12(l)(1)(A)(iii) of the NSLA]:**

As this waiver will apply to only one very small SFA and involves a small flexibility to existing regulations and policy, the waiver will not increase the overall cost of the Program to the Federal Government.

**10. Anticipated waiver implementation date and time period:**

Implement at the time of approval to calculate Provision 2 percentages for SY 20-21. The waiver will not be needed after August 31, 2020.

**11. Proposed monitoring and review procedures:**

The State agency will calculate the Provision 2 percentages and enter the percentages into the State SNP claims system for calculating monthly payments. All other Provision 2 records and documentation have already been reviewed. Ongoing claim monitoring will be conducted as per USDA regulations.

**12. Proposed reporting requirements (include type of data and due date(s) to FNS):**

The State agency will report the results of the Provision 2 calculations to FNS upon request.

**13. Link to or a copy of the public notice informing the public about the proposed waiver [Section 12(l)(1)(A)(ii) of the NSLA]:**

**14. Signature and title of requesting official:**

\_\_\_\_\_7-20-2020\_\_\_\_\_

Title: Director, Child Nutrition and Food Distribution Programs

Requesting official's email address for transmission of response: lkschloer@nd.gov

**TO BE COMPLETED BY FNS REGIONAL OFFICE:**

*FNS Regional Offices are requested to ensure the questions have been adequately addressed by the State agency and formulate an opinion and justification for a response to the waiver request based on their knowledge, experience and work with the State.*

**Date request was received at Regional Office:**

**Check this box to confirm that the State agency has provided public notice in accordance with Section 12(l)(1)(A)(ii) of the NSLA**

**Regional Office Analysis and Recommendations:**