



# 2022-2023 County MFIP Biennial Service Agreement

January 1, 2022 - December 31, 2023

Page 1 of 18

Enter the county's unique ID number

## Contact Information

COUNTY/CONSORTIUM NAME

PLAN YEAR

CONTACT PERSON

TITLE

ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER

EMAIL ADDRESS (where correspondence related to this form will be sent)

CONFIRM EMAIL ADDRESS

**Note: Please review the 2022-2023 MFIP Biennial Service Agreement  
Bulletin for more details before you complete this document.**

## A. Needs Statement

### 1. Identify challenges in financial assistance services that are prohibiting you from properly serving MFIP/DWP families in your community.

At this time, Kittson County is not recognizing any challenges prohibiting us from properly servicing MFIP/DWP families in our county. We believe that our outcome measures support this statement.

9803 characters remaining

### 2. Identify challenges in employment services that are prohibiting you from properly serving MFIP/DWP families in your community.

The challenge that we have for engaging with employment services is that DEED/CareerForce provides employment service for all of Region1 with satellite offices in various counties in our region, unfortunately Kittson County doesn't have a satellite office in our county. These services can be up to 70 miles away from the families whom we serve, which is a barrier. We reduce this barrier by employing an Employment Guidance Counselor who meets with our families who are on MFIP/DWP programs and works with them in helping to meet their MFIP/DWP program goals. In addition, our Employment Guidance Counselor, KCSS Eligibility Workers, CareerForce staff, and KCSS director meet monthly to discuss the successes and needs of the families that we serve. We also discuss any compliance issues (i.e. paperwork) that our families may have so that the Employment Guidance Counselor can help them with any barriers they're experiencing that's keeping them from being in compliance with the program expectations.

8992 characters remaining

### 3. Identify the strengths in your community that you are most proud of that benefit MFIP/DWP families.

KCSS' biggest strength in our programming efforts is our Employment Guidance Counselor. The Employment Guidance Counselor is successful in helping our families either become gainfully employed, and/or assists them with either GED or advanced schooling opportunities, or assists them through the disability process so that all of the families that we serve become more financially secure. I believe our Self-Support Index Performance Measures have pointed to our success through the years.

Our strength also lies in the relationships that have been developed with local and regional employers to help find the "right fit" in employment for our families.

9343 characters remaining

**A. Needs Statement** (continued)

**4. What strengths and resources do you have available to address the needs of your participants?**

Please **check all** the resources available to participants in your service area and check whether the resource is available within MFIP financial or employment services "in-house" or from a partner organization (county resources with developed connections to MFIP), and/or an external community resource or both. If you lack sufficient resources in your area, check the Resource Gaps column, even if there are some resource sources. Add any "other" resources that you consider necessary.

MFIP Resources	Partner Resources	Community Resources	Resource Gaps	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ABE/GED
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adult/elder services
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Career planning
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Childcare funds
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Chemical health services
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Computer lab access
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Credit counseling/financial literacy
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	English Language Learner (ELL)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food shelf
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Housing assistance
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job club
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job development
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job placement
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Job retention
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job search workshops
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Mental health services
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-the-job training program
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Post-secondary education planning
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Short-term training
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Supported work / paid work experience
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transportation assistance (gas cards, bus cards)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vehicle repair funds
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Volunteer opportunities
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Youth program
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other

**5. County Program Contact Information**

Please name contacts for the following programs if different from the contact on the cover page. You only need to give a person's phone and email once.

<b>MFIP EMPLOYMENT SERVICES STAFF CONTACT NAME</b>	<b>PHONE NUMBER</b>	<b>EMAIL ADDRESS</b>
Jessica Bordun	218-463-2233	jessica.bordun@state.mn.us

<b>DWP STAFF CONTACT NAME</b>	<b>PHONE NUMBER</b>	<b>EMAIL ADDRESS</b>
Jessica Bordun	218-463-2233	jessica.bordun@state.mn.us

<b>FINANCIAL ASSISTANCE SERVICES STAFF CONTACT NAME</b>	<b>PHONE NUMBER</b>	<b>EMAIL ADDRESS</b>
Beth See	248-843-2689	bseed@co.kittson.mn.us

### A. Needs Statement (continued)

#### 6. Employment Services Provider(s) Information

Statute 256J.50, subdivision 8: Each county, or group of counties working cooperatively, shall make available to participants the choice of at least two employment and training service providers as defined under Minnesota Statutes, section 256J.49, subdivision 4, except in counties contracting with CareerForce Centers that use multiple employment and training services or that offer multiple services options under a collaborative effort and can document that participants have choice among employment and training services designed to meet specialized needs.

List your current employment services provider(s) and check the respective box to indicate which population served. If a CareerForce Center is the only employment services provider, list the multiple employment and training services among which participants can choose. Section G of this form addresses provider choice.

<b>NAME</b>		<b>ADDRESS</b>	
<input type="text" value="CareerForce"/>		<input type="text" value="1301 Hwy 1 East Thief River Falls MN 56701"/>	
<b>CONTACT PERSON</b>	<b>PHONE NUMBER</b>	<b>EMAIL</b>	
<input type="text" value="Bonny Stechmann"/>	<input type="text" value="218-683-8061"/>	<input type="text" value="bonny.stechmann@state.mn.us"/>	

**Population Served**     MFIP ES     DWP ES     FSS     Teen Parents     200% FPG

### B. Service Models

#### Minnesota Family Investment Program (MFIP) and the Diversionary Work Program (DWP)

1. Do you have culturally specific employment services for different racial/ethnic groups?

No  Yes

- African American
- African immigrant
- Asian American
- Asian immigrant
- American Indian
- Hispanic/Latino
- Other

2. What strategies do you use for hard-to-engage participants? *Check all that apply.*

- Home visits
- Sanction outreach services
- Incentives
- Off-site meeting opportunities
- Other

3. What types of job development do you do? *Check all that apply.*

- Sector job development
- Individual job development
- Other

4. Do you have an ongoing job development partnership or sector based job development with community employers to help participants with employment?

No  Yes *Check all activities employers provide.*

- Interview opportunities
- Job skills training
- Job placement
- Job shadowing
- On-site job training
- Work experience
- Helps plan training programs
- Other

5. Do you provide job retention services to employed participants while they are receiving MFIP?

No  Yes *Check all that apply.*

- Available to assist with issues that develop on the job
- Financial planning
- Soft skills training
- Mentoring
- Transportation
- Personal contact with the employee
- HOW OFTEN?
- Other

How long do you provide job retention services?

Less than 3 months  3-6 months  7-12 months  More than one year

6. Do you provide job advancement services to employed participants?

No  Yes *Check all that apply.*

- Career laddering
- Networking
- Coaching/mentoring
- Ongoing job search
- Education/training
- Other

7. Do you utilize any career pathways programs or skill assessment and credentialing programs for your participants?

No  Yes *Check all that apply.*

- Pathways to Prosperity (P2P)
- Work Keys
- National Career Readiness Certificate (NCRC)
- Other

## County MFIP Biennial Service Agreement

Page 6 of 18

**B. Service Models** (continued)**Family Stabilization Services (FSS)**

1. Do you have professionals available to assist with FSS cases?

 No  Yes *Check all that apply*

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Adult Mental Health professional      | <input type="checkbox"/> Psychologist                                | <input checked="" type="checkbox"/> Adult Rehabilitation Mental Health Services (ARMHS) worker |
| <input checked="" type="checkbox"/> Public Health Nurse                   | <input type="checkbox"/> Chemical Health professional                | <input checked="" type="checkbox"/> Social Worker  |
| <input checked="" type="checkbox"/> Children's Mental Health professional | <input checked="" type="checkbox"/> Vocational Rehabilitation worker | <input type="checkbox"/> Other   |

2. Do you make referrals for children of FSS participants?

 No  Yes *Check all that apply*

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Children's Mental Health Services         | <input checked="" type="checkbox"/> Public Health Nurse home visiting services | <input checked="" type="checkbox"/> Child Wellness Check-ups |
| <input checked="" type="checkbox"/> Women, Infants and Children Program (WIC) | <input type="checkbox"/> Other   |  |

3. Are any of these services for children offered to non-FSS families?

 No  Yes**Services for families no longer on MFIP/DWP but under 200% of Federal Poverty Guideline**

1. Do you provide services to families recently receiving MFIP/DWP or families at risk of receiving MFIP or diversionary work program but are under 200% of the Federal Poverty Guideline (FPG)?

 No  Yes *Check all the services that apply*

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> ABE/ELL Classes     | <input checked="" type="checkbox"/> Job retention services | <input type="checkbox"/> Child care     | <input checked="" type="checkbox"/> Referral to other programs  |
| <input checked="" type="checkbox"/> Computer Lab Access | <input checked="" type="checkbox"/> Support Services       | <input checked="" type="checkbox"/> GED | <input checked="" type="checkbox"/> Training/Job Skills Classes |
| <input checked="" type="checkbox"/> Job postings        | <input type="checkbox"/> Other                             |   |   |

2. Do you serve families not recently on MFIP/DWP that are under 200% of the Federal Poverty Guideline (FPG)?

 No  Yes

DESCRIBE

3. Do you provide services to Non-Custodial Parents (NCPs) that are under 200% of the Federal Poverty Guideline (FPG)?

 No  Yes

DESCRIBE

4. Describe the process you have in place to verify income below 200% FPG for participants that are not on MFIP or DWP.

- MAXIS  Proxy  Other

## County MFIP Biennial Service Agreement

Page 7 of 18

**B. Service Models** (continued)**Minnesota Family Investment Program (MFIP) Services for Teen Parents**

1. Are there specialized workers who work primarily with teens (for example, child care worker provides child care resources to teens only)?

No  Yes

Minors (under age 18)	Age 18/19	
<input type="checkbox"/>	<input type="checkbox"/>	Financial worker
<input type="checkbox"/>	<input type="checkbox"/>	Employment service worker
<input type="checkbox"/>	<input type="checkbox"/>	Social worker (Social Services)
<input type="checkbox"/>	<input type="checkbox"/>	Public health nurse
<input type="checkbox"/>	<input type="checkbox"/>	Child care worker
<input type="checkbox"/>	<input type="checkbox"/>	Child protection worker
<input type="checkbox"/>	<input type="checkbox"/>	Other job role

2. Is there a single point of contact for teens, that is, one staff with primary responsibility for keeping in contact with the teen, working with the teen, and making connections to other services? Respond for each age group separately. If yes for an age group, check the one position that serves this function within that age group.

No  Yes

**Minors (under age 18)**

- Financial worker  
 Employment service worker  
 Social worker (Social Services)  
 Public health nurse  
 Child care worker  
 Child protection worker  
 Other job role

**Age 18/19**

- Financial worker  
 Employment service worker  
 Social worker (Social Services)  
 Public health nurse  
 Child care worker  
 Child protection worker  
 Other job role

3. Does your county have an active partnership with the local public health agency to get teen parents enrolled and engaged in public health nurse home visiting services? Check one for each age group.

**Minors (under age 18)**

- Yes, mandatory  
 Yes, voluntary  
 No

**Age 18/19**

- Yes, mandatory  
 Yes, voluntary  
 No

## C. Measures

### Performance Measures

1. Performance-based funding is determined by a service area's annualized Self-Support Index value. Review the information and report links in this section to see the effect of performance on funding and reporting, based on Statute 256J.626, subdivision 7.

Each year a bonus to a service area's Consolidated Fund allocation will be based on its performance on the Self-Support Index in the previous April to March year.

The **three-year Self-Support Index (S-SI)**: This measure starts with all adults receiving MFIP or DWP cash assistance in a quarter and tracks what percentage of them, three years later, are no longer receiving family cash assistance or are working an average of 30 hours a week if still receiving cash assistance. Those who left MFIP after reaching 60 counted months and those who left due to 100 percent sanction are only counted as a success if they worked an average of 30 hours per week in their last month of eligibility or if they began receiving Supplemental Security Income (SSI) after family cash assistance ended. To provide fair comparisons across service areas, DHS calculates a "Range of Expected Performance" for the S-SI that is based on local caseload characteristics and economic conditions. The service area's Self-Support Index value is whether the service area was above, within, or below its expected Range.

The S-SI and Range are annualized for the four quarters in the April through March year ending in the reporting year before the funding year. See the annualized report on the MFIP Reports page on the DHS website for 2021 <https://edocs.dhs.state.mn.us/lfsrserver/Public/DHS-4651H-ENG>. A service area with an annualized S-SI "above" its customized Range of Expected Performance for 2021 will receive a 2.5 percent bonus added to its Consolidated Fund allocation for calendar year 2022.

[Minnesota Family Investment Program 2021 Annualized Self-Support Index \(PDF\)](#)

If your service area is receiving a bonus, congratulations! Please share a success strategy here:

9999 characters remaining

If your service area performed "above" or "within," you can go to Item 2.

If your service area performed "below" for two consecutive years, you will have to **negotiate a multi-year improvement plan** with the commissioner. If no improvement is shown by the end of the multiyear plan, the next year's allocation must be decreased by 2.5 percent, to remain in effect until the service area performs within or above its Range of Expected Performance.



### C. Measures (continued)

#### Racial/Ethnic Disparities

- 2. A **racial/ethnic disparity** is defined as a one-year Self Support Index that is five or more percentage points lower for a non-white racial/ethnic group than for the white group of MFIP/DWP-eligible adults in the county or consortium. The report "The Annual Summaries for counties of the Self Support and Work Participation performance measures" <https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4214AG-ENG> on the MFIP Reports page includes a list of service areas that have a racial/ethnic disparity requiring action. (If your county has a disparity but data are missing for quarters with cell size too small to report, contact [benjamin.jaques-leslie@state.mn.us](mailto:benjamin.jaques-leslie@state.mn.us) to get the unpublished counts and percentage gaps.)

[MFIP Performance Measures by Racial/Ethnic or Immigrant Group, and by County or Tribal Provider July - September 2020 \(PDF\)](#)

**If your county or consortium is *not* in the list, skip the following question.**

What strategies and action steps for each of the groups with disparities do you plan for the coming biennium to reduce these disparities?

Kittson County had 8 MFIP/DWP families that were reported on this 1-year Self-Support Index review. All 8 families (100%) were self-supportive at the 1-year point-in-time review.

9820 characters remaining

## D. Program Monitoring/Compliance

1. What procedures do you have in place to ensure that program funds are being used appropriately as directed in law? *Check all that apply.*

- Budget control procedures for approving expenditures
- Cash management procedures for ensuring program income is used for permitted activities
- Internal policies around use of funds, i.e. participant support services
- Other

2. What procedures do you have in place to ensure program policies are followed and applied accurately? *Check all that apply.*

- Case consultation
- Sample case review by workers
- Sample case review by supervisors
- Other

**If your service area has not made changes to your random drug testing policy since the last BSA, go to Section E.**

3. What procedures/policies do you have in place for administering random drug tests of convicted drug felons on MFIP as required by Minnesota Statutes, section 256J.26, subdivision 1?

- Written policy within the MFIP unit
- Coordination with Corrections
- Currently establishing new policy/procedure(s)
- Other

### E. Collaboration and Communication with Others

1. How many employment services front-line staff are employed in your county or consortium?

How many employment services front-line staff in your county or consortium have MAXIS access?

How many managers/supervisors have MAXIS access?

2. Describe the process your service area uses to identify and resolve discrepancies between MAXIS and WF1 data in areas such as Family Stabilization Services coding, employment/hours, sanction status, etc.

Our Eligibility Workers, Employment Guidance Counselor, Career/Force staff and program directors meet monthly to discuss the families that we serve and check on any discrepancies &/or sanction status issues that need to be addressed.

7766 characters remaining

## F. Emergency Services

1. Does your county provide emergency or crisis services from your Consolidated Fund?

No  Yes

If your service area has made changes to your emergency services policy since the last BSA, submit your emergency/crisis plan:

9999 characters remaining

## G. Other

### Administrative Cap Waiver

Minnesota Family Investment Program (MFIP) allows counties to request a waiver of the MFIP administrative cap (currently at 7.5%) for providing supported employment, uncompensated work or community work experience program for a major segment of the county's MFIP population. Counties that are operating such a program may request up to 15% administrative costs.

If your county is interested in applying for the waiver for the coming biennium, please complete the following four questions.

1. Describe the activity(s) you will provide.

4000 characters remaining

2. Explain the reasons for the increased administrative cost.

4000 characters remaining

3. Describe the target population and number of people expected to be served.

4000 characters remaining

4. Describe how the unpaid work experience is designed to impart skills and what steps are taken to help participants move from unpaid work to paid work.

4000 characters remaining

**G. Other** (continued)**Addendum for Unpaid Work Experience Activities**

If your county is providing unpaid work experience activities for MFIP participants and you don't already have an Injury Protection Plan (IPP) in place, please click on [eDocs](#) to find any IPP forms that may be needed. Email the completed form to [tria.chang@state.mn.us](mailto:tria.chang@state.mn.us).

**Provider Choice**

Does your county:

- Have at least two employment and training services providers. Go to Section H.
- Have a CareerForce center that provides multiple employment and training services, offers multiple services options under a collaborative effort and can document that participants have choice among employment and training services designed to meet specialized needs. Go to Section H.
- Intend to submit a financial hardship request.

**G. Other** (continued)

**Financial Hardship Request**

FINANCIAL HARDSHIP - Exception to Choice of Employment Service Providers Requirement

MFIP provisions require counties to make a choice of at least two employment service providers available to participants unless a workforce center is being utilized (Minnesota Statutes, section 256J.50, subdivision 8). Counties may request an exception if meeting this requirement results in a financial hardship (Minnesota Statutes, section 256J.50, subdivision 9).

A financial hardship is defined as a county's inability to provide the minimum level of service for all programs if a disproportionate amount of the MFIP consolidated fund must be used to cover the costs of purchasing employment services from two providers or the cost of contracting with a workforce center.

To request approval of a financial hardship exception from the choice of provider requirement, please provide the following information.

- 1. If the county had a choice of providers in calendar year 2019, describe:
  - factors that have changed which indicate a financial hardship
  - why the hardship is expected to persist in the near future and
  - the magnitude of the hardship, which makes limiting delivery of employment services the best financial option for the county.

2000 characters remaining

- 2. Summarize options explored by the county, including use of other partners in a workforce center or other community agencies, such as a Community Action Program or a technical college. The summary should also include:
  - major factors which prevent the county from utilizing these options and include a cost analysis of each option considered; and
  - the process used to determine the cost of other options (RFP or other county process).

2000 characters remaining

- 3. If the county proposes to directly deliver MFIP employment services, provide a budget and staffing plan that clearly indicates consolidated funds will not be used to supplant county funds. The description should include information about what steps will be taken to ensure that county staff have the experience and skills to deliver employment services.

2000 characters remaining

Financial Hardship requests will be reviewed by The Department of Human Services (DHS) and the Department of Employment and Economic (DEED) leadership. DHS and DEED will also review the amount budgeted by the county for employment and training during calendar year 2021 and use this amount as a guide to determine whether the amount budgeted by the county for calendar year 2022 is reasonable.

If a financial hardship is approved, DHS and DEED will closely monitor county programs to ensure outcomes are achieved and services are being delivered consistent with state law. For additional info or if you have questions please email [Pamela McCauley](mailto:Pamela.McCauley).

## County MFIP Biennial Service Agreement

## H. Budget

Click on the link below to review your service area's 2020 MFIP allocation and Federal Funding Sources:

[MFIP Consolidated Fund \(PDF\)](#)

In the budget table, indicate the amount and percentage for each item listed for the budget line items for calendar years 2022-2023. Also note:

- Refer to the 2022-23 Minnesota Family Investment Program (MFIP) Biennial Service Agreement (BSA) Guidelines Bulletin section, "Allowable Services under MFIP Consolidated Fund."
- Total percent must equal 100.
- MFIP administration is capped at 7.5 percent unless the county is approved for an administrative cap waiver. To apply for the administrative cap waiver, respond to the questions in Section G under Administrative Cap Waiver.
- The percentage of Employment Services DWP budget should be significantly less than, the Employment Services MFIP budget.
- Income maintenance administration is reasonable in comparison to the whole budget.
- Ensure the Emergency Assistance/Crisis Services plan is included if funds are allocated.
- If "other" is used, briefly state or describe the line item. "Other" expenditures include any costs that are not related to administering MFIP, DWP or Emergency program services or atypical costs. All services must be an allowable service under the MFIP Consolidated Fund.
- Email Brandon Riley at [brandon.riley@state.mn.us](mailto:brandon.riley@state.mn.us), if you need assistance or have questions with the budget section.

## 2022 Budget

Budgeted Amount	Percent	Line Items
1,500.00	3.95%	Employment Services (DWP)
8,294.00	21.84%	Employment Services (MFIP)
	0.00%	Emergency Services/Crisis Fund
2,848.00	7.50%	Administration (cap at 7.5%)
2,000.00	5.27%	Income Maintenance Administration
	0.00%	Incentives (Include the total amount of funds budgeted for participant incentives but don't include support services here)
	0.00%	Under 200% Services
	0.00%	Capital Expenditures
23,332.00	61.44%	Other 1 <input type="text" value="Employment Guidance Counselor (In-Home Worker)"/>
	0.00%	Other 2 <input type="text"/>
<b>\$37,974.00</b>	<b>100.00%</b>	<b>Total</b>

## 2023 Budget

Budgeted Amount	Percent	Line Items
1,500.00	3.95%	Employment Services (DWP)
8,294.00	21.84%	Employment Services (MFIP)
	0.00%	Emergency Services/Crisis Fund
2,848.00	7.50%	Administration (cap at 7.5%)
2,000.00	5.27%	Income Maintenance Administration
	0.00%	Incentives (Include the total amount of funds budgeted for participant incentives but don't include support services here)
	0.00%	Under 200% Services
	0.00%	Capital Expenditures
23,332.00	61.44%	Other 1 <input type="text" value="Employment Guidance Counselor (in-Home Worker)"/>
	0.00%	Other 2 <input type="text"/>
<b>\$37,974.00</b>	<b>100.00%</b>	<b>Total</b>



### Certifications and Assurances

#### Public Input

Prior to submission, did the county solicit public input for at least 30 days on the contents of the agreement?

No  Yes

Was public input received?

No  Yes

If received but not used, please explain.

4000 characters remaining

#### Assurances

It is understood and agreed by the county board that funds granted pursuant to this service agreement will be expended for the purposes outlined in Minnesota Statutes, section 256J; that the commissioner of the Minnesota Department of Human Services (hereafter department) has the authority to review and monitor compliance with the service agreement, that documentation of compliance will be available for audit; that the county shall make reasonable efforts to comply with all MFIP requirements, including efforts to identify and apply for available state and federal funding for services within the limits of available funding; and that the county agrees to operate MFIP in accordance with state law and federal law and guidance from the department.

Counties may use the funds for any allowable expenditures under subdivision 2, including case management outlined in Minnesota Statutes, section 256J.

This allocation is funded with 8% state funds and 92% federal TANF funds and paid quarterly.

Federal funds. Payments are to be made from federal funds. If at any time such funds become unavailable, this Agreement shall be terminated immediately upon written notice of such fact by STATE to County. In the event of such termination, County shall be entitled to payment, determined on a pro rata basis, for services satisfactorily performed.

- 1. Pass-through requirements.** County acknowledges that, if it is a subrecipient of federal funds under this Agreement, County may be subject to certain compliance obligations. County can view a table of these obligations in the [Health and Human Services Grants Policy Statement](#), Exhibit 3 on page II-3. To the degree federal funds are used in this contract, STATE and County agree to comply with all pass-through requirements, including each Party's auditing requirements as stated in 2 C.F.R. § 200.332 (Requirements for pass-through entities) and 2 C.F.R. §§ 200.501-521 (Subpart F – Audit Requirements). Counties (and all tiers of sub grantees) must comply with the U.S. Office of Management and Budget (OMB) Uniform Grant Guidance, Code of Federal Regulations, title 2, subtitle A, chapter II, part 200, as applicable (including modifications) in the administration of all DHS federally funded grants. [https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200\\_main\\_02.tpl](https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl). General Terms and Conditions for the Administration of Children & Families awards can be found here: [General Terms and Conditions \(hhs.gov\)](#), and are incorporated into this agreement by reference. Terms and Conditions specific to TANF funds can be found here: TANF Official Terms & Conditions for State and Kittson

(Must match the name associated with the DUNS number.)

- 3. County's Data Universal Numbering System (DUNS) number:**

The DUNS number is the nine-digit number established and assigned by Dun and Bradstreet, Inc. (D&B) to uniquely identify business entities and must match GRANTEE's name.

County MFIP Biennial Service Agreement

- 4. Federal Award Identification Number (FAIN): 2201MNTANF and 2301MNTANF
- 5. Federal Award Date: October 1, 2022 (projected) (The date of the award to the MN Dept. of Human Services.)
- 6. Period of Performance: Start date: **January 1, 2022**. End date: **December 31, 2023**.
- 7. Budget period start and end date: January 1, 2022 – December 31, 2023
- 8. Amount of federal funds:
  - A. Total Amount Awarded to DHS for this project: \$103,290,000 (projected)
  - B. Total Amount Awarded by DHS for this project to county named above: See Budget Table in Section H of this Agreement.
- 9. Federal Award Project description: Temporary Assistance for Needy Families (TANF)
- 10. Name:
  - A. Federal Awarding Agency: Administration for Children and Families
  - B. MN Dept. of Human Services (DHS)
  - C. Contact information of DHS's awarding official: Jovon Perry, [Jovon.perry@state.mn.us](mailto:Jovon.perry@state.mn.us)
- 11. CFDA Number & Name: Payments are to be made from federal funds obtained by STATE through Catalog of Federal Domestic Assistance (CFDA) No. 93.558 (TANF)
- 12. Is this federal award related to research and development?:  Yes  No
- 13. Indirect Cost Rate for this federal award is: up to 15% (including if the *de minimis* rate is charged.)
- 14. Closeout terms and conditions for this federal award: County shall close-out its use of funds under this agreement by complying with the closeout procedures in 2 C.F.R. § 200.343. County's obligations shall not end until all close-out requirements are completed. Terms specific to tangible personal property purchased with federal funds can be found here: [Property Guidance | The Administration for Children and Families \(hhs.gov\)](#).

**Service Agreement Certification**

Checking this box certifies that this 2022-2023 MFIP Biennial Service Agreement has been prepared as required and approved by the county board(s) under the provisions of Minnesota Statutes, section 256J. In the box below, state the name of the chair of the county board of commissioners or authorized designee, their mailing address and the name of the county.

<b>DATE OF CERTIFICATION</b>	<b>NAME (CHAIR OR DESIGNEE)</b>	<b>COUNTY</b>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
<b>MAILING ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If your county agency is unable to complete your BSA by October 15, 2021 you will need to request an extension. Please email [Tria.Chang@state.mn.us](mailto:Tria.Chang@state.mn.us) to provide additional information about why you were not able to compete this form and when you expect to submit the form by.

**Save or Submit**

**To save your work**, click the 'Save Form for Later' button. Your information will be saved, and you may finish the form later.

**To submit your information to DHS**, click the 'Submit Final Form' button.