



Food and
Nutrition
Service

Park Office
Center

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DEC 05 2016

Kathe Quittenton
Bureau Chief
Human and Community Services Division
Montana Department of Public Health and Human Services
PO Box 202925
Helena, Montana 59620-2925

RE: SNAP – Montana Request to Waive Able-Bodied Adults without
Dependents Time Limit – Approval

Dear Ms. Quittenton:

This is in response to the Montana State agency's request to waive the Supplemental Nutrition Assistance Program (SNAP) time limit for able-bodied adults without dependents in 16 counties and 6 reservation areas from January 1, 2017, through December 31, 2017. The State agency had already requested to waive 14 counties and 5 reservation areas for the same time period, and the Food and Nutrition Service (FNS) approved that request on September 30, 2016. The State agency has now submitted an amended request to include two additional counties and one additional reservation area.

The State agency's request meets the requirements for approval provided at 7 CFR 273.24(f) and relevant FNS guidance. Therefore, FNS is approving Montana to waive the time limit in the 16 counties and 6 reservation areas for the requested 12-month period. The approval amends and extends waiver number 2140013 and replaces FNS September 30, 2016 approval of the same number. The attached waiver response includes the approved areas, the supporting evidence used, and the conditions of approval. If you have any questions please contact Phil Fraley at Philip.Fraley@fns.usda.gov or Kathie Herrman at Kathie.Herrman@fns.usda.gov.

Sincerely,

Sasha Gersten-Paal
Chief
Certification Policy Branch
Program Development Division

WAIVER RESPONSE

1. **Waiver serial number:** 2140013
2. **Type of request:** Amendment and extension
3. **Statutory citation:** Section 6(o) of the Food and Nutrition Act of 2008, as amended
4. **Regulatory citation:** 7 CFR 273.24
5. **State:** Montana
6. **Region:** Mountain Plains
7. **Requirement:** Section 6(o) of the Food and Nutrition Act of 2008, as amended, provides that no able-bodied adult without dependents (ABAWD) shall be eligible to participate in the Supplemental Nutrition Assistance Program (SNAP) as a member of any household if the individual received program benefits for more than 3 months during any 3-year period in which the individual was subject to, but did not comply with, the ABAWD work requirement. Section 6(o) also provides that, upon the request of the State agency, the Secretary may waive the applicability of the 3-month ABAWD time limit for any group of individuals in the State, if the Secretary makes a determination that the area in which the individuals reside in has an unemployment rate of over 10 percent, or does not have a sufficient number of jobs to provide employment for the individuals.
8. **Proposed alternative procedures:** The Montana State agency has requested to waive the ABAWD time limit in 16 counties and 6 reservations from January 1, 2017, through December 31, 2017. The State agency has grouped contiguous counties for consideration as two respective combined areas, and has supported its request based upon each combined area having an aggregate average unemployment rate 20 percent above the National average for a recent 24-month period. In addition, the State agency has supported its request for six reservation areas based upon each having an aggregate average unemployment rate 20 percent above the National average for a recent 24-month period. The State agency selected the same 24-month period – August 2014, through July 2016 – for the 16 counties and 6 reservation areas. During this time period the National average unemployment rate was 5.28 percent; 20 percent above that rate is 6.3 percent. As detailed in the following tables, the aggregate unemployment rates for the requested areas reached or exceeded 6.3 percent during the selected time period.

Bureau of Labor Statistics Local Area Unemployment Data August 2014 – July 2016*		
County	Unemployment	Labor Force
Flathead	62,220	1,078,344
Glacier	13,242	141,136
Granite	2,294	37,543
Lake	15,187	306,359
Liberty	679	23,897
Lincoln	18,719	188,760
Mineral	3,475	41,872
Pondera	3,104	69,749
Powell	3,371	71,513
Sanders	9,392	113,492
Toole	1,842	55,502
Total	133,525	2,128,167
Combined Area Unemployment Rate	6.3%	

*Data extracted from <http://www.bls.gov> on November 23, 2016

Bureau of Labor Statistics Local Area Unemployment Data August 2014 – July 2016*		
County	Unemployment	Labor Force
Big Horn	9,924	134,903
Petroleum	334	7,016
Prairie	503	12,699
Rosebud	5,456	100,555
Treasure	410	8,649
Total	16,627	263,822
Combined Area Unemployment Rate	6.3%	

*Data extracted from <http://www.bls.gov> on November 23, 2016

Bureau of Labor Statistics Local Area Unemployment Data / Census Bureau Data*	
Reservation Area	Unemployment Rate: August 2014 – July 2016
Blackfeet Indian Reservation	12.7%
Crow Reservation	10.0%
Fort Belknap Reservation	12.0%
Fort Peck Indian Reservation	6.3%
Northern Cheyenne Indian Reservation	15.7%
Rocky Boy's Reservation	14.6%

*Data extracted from <http://www.bls.gov> and <http://factfinder.census.gov> on November 23, 2016.

9. **Action and reason for approval or denial:** The Food and Nutrition Service (FNS) is approving the Montana State agency's request to waive the ABAWD time limit in 22 areas because the jurisdictions meet the requirements for approval provided at 7 CFR 273.24(f) and relevant FNS guidance.
10. **Regulatory or legislative basis for action:** The waiver is approved pursuant to section 6(o) of the Food and Nutrition Act of 2008, as amended, and 7 CFR 273.24(f).
11. **Information required for an extension:** To receive an amendment or extension, the State agency must provide FNS with a formal request supported by data or other information as described in 7 CFR 273.24(f). Any request based upon unemployment rates must include data spreadsheets and supporting documentation.
12. **Implementation date and expiration date:** The waiver is effective January 1, 2017, through December 31, 2017.
13. **Limitation, if any, on Regional Office approval of like requests:** The waiver is limited to the Montana State agency.
14. **Date of National Office action:** DEC 05 2016
15. **Date of State agency's request:** November 4, 2016

16. Date of Regional Office transmittal of request: November 16, 2016

17. State agency contact:

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18. FNS Regional Office contacts:

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