

# NEBRASKA 2006 REVISED DISALLOWANCE LETTER



DEPARTMENT OF HEALTH & HUMAN SERVICES

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ADMINISTRATION FOR CHILDREN AND FAMILIES  
Administration on Children, Youth and Families  
1250 Maryland Avenue, S.W.  
Washington, D.C. 20024

OCT 27 2006

Christine Z. Peterson, Acting Director  
Nebraska Department of Health and Human Services  
301 Centennial Mall South  
P.O. Box 95026  
Lincoln, Nebraska 68509

Dear Ms Peterson:

In a letter from Linda Lewis dated September 1, 2006, we provided you with information regarding underpayments and overpayments that were found as a result of the title IV-E audit. Since those amounts were computed, we have updated the administrative costs disallowance.

The disallowance of \$5,421.76, for Maintenance payments and \$2,123.00, for related administrative costs for title IV-E foster care claimed for the cases determined to be in error has changed to a disallowance of \$5,421.76, for maintenance payments and \$2,037.00, for related administrative costs.

The additional disallowance of \$8,290.19, maintenance payments, and \$3,803.00, related administrative costs assessed in FFP for title IV-E foster care payments claimed improperly for cases determined to be non-error cases has changed to \$8,290.19, maintenance and \$3,562.00, FFP. (See attachment A)

Since the amount of disallowed funds was previously included in Federal payments made to the State, you must repay these funds by including a prior period decreasing adjustment on the Quarterly Report of Expenditures (Form ACF-IVE-1), Part 1, Line 1, Columns (c) and (d). The IVE-1 form must be submitted within 30 days of the date of this letter in order to avoid the assessment of interest.

This is the final decision of the Administration for Children and Families. Under regulations at 45 CFR Part 16, you have an opportunity to appeal this decision to the Departmental Appeals Board (Board). This decision shall be the final decision of the Department of Health and Human Services unless, within 30 days of receiving this decision, you deliver or mail (using registered or certified mail to establish the date) a written notice of appeal to:

Department of Health and Human Services  
Departmental Appeals Board, MS 6127  
Appellate Division  
330 Independence Ave., SW  
Cohen Building, Room G-644  
Washington, D.C. 21201

You must attach to the notice a copy of this decision, note that you intend to appeal, state the amount in dispute, and briefly state why you think this decision is wrong. A copy of your appeal also should be sent to my attention in the ACF Regional Office. The Board will notify you of further procedures.

If you appeal, you may elect to repay the amount at issue pending a decision by the Departmental Appeals Board, or you may retain the funds pending that decision. An adjustment to return the disallowed funds for the purpose of avoiding interest assessment must be made through the use of the IVE-1 form, as described above. If you retain the funds and the Board sustains all or part of the disallowance, interest will be charged, starting from the date of this letter, on the funds the Board decides were properly disallowed. Regulations at 45 CFR Part 30, details how interest will be computed.

In the event you choose to take no action to return the funds, it will be assumed you have elected to retain the funds either to appeal or to delay recoupment of the funds until the next issued grant award. In accordance with regulations at 45 CFR 30.13(a), interest will be charged from the date of this letter on amounts not repaid or refunded within 30 days of the mailing of this letter. The current rate of interest is 12.125 %.

The amounts of underpayment provided in the previous letter have also been recalculated. The original amount was \$71,238.07, for maintenance payments and \$48,455.21, related administrative costs. These are now \$71,238.07, for maintenance and \$46,711.10, for administrative costs. (See attachment B) Nebraska my submit claims for these funds by showing an increasing adjustment on the IVE-1 form. When submitting the claims for the underpayments, you will need to document that you have verified the amount of claims, that these claims have not previously been submitted, and that the expenses have not been paid from other Federal grants.

Sincerely,



Susan Orr, Ph.D.  
Associate Commissioner  
Children's Bureau

Attachments:

- A – Nebraska Overpayments
- B – Nebraska Underpayments

cc:

Rosalyn Wilson, ACF RO VII; FOB; 601 E 12th Street; Kansas City, MO 64106