

FY 2020 OMB Supplemental Data Call

CNCS

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Agency-Wide Responses

Question 2: Detecting and Recovering Improper Payments (PIIA Section: 3352(e), 3352(e) (1))

Please describe the steps the agency has taken to detect and recover improper payments.

ANSWER:

Indicate root cause	Indicate mitigation strategy/corrective action(s) taken	Provide any additional detail (optional free text)	Select the actual completion date for action(s) taken
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)	The last quarter training was conducted was selected but training was ongoing.	FY2020 Q3
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)	The last quarter training was conducted was selected but training was ongoing.	FY2020 Q3
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)		FY2019 Q4

Question 2 Free Text: Detecting and Recovering Improper Payments (PIIA Section: 3352(e), 3352(e) (1))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: AmeriCorps is primarily a grant-making agency and the bulk of its funding is obligated to grantee organizations that administer national service programs. AmeriCorps detects improper payments at the grantee level through two primary functions, the improper payments assessment and compliance monitoring.

AmeriCorps' four largest grant programs have been deemed susceptible to significant improper payments and a statistically valid sampling methodology is used to identify improper payments. This is accomplished by reviewing individual payments disbursed from the grantee to national service participants, employees, or vendors required for program administration against applicable statutes, regulations, and agency policies.

In addition to the improper payment assessment, AmeriCorps' Office of Monitoring is responsible for compliance monitoring of AmeriCorps' grantee portfolio. Compliance monitoring and testing gives AmeriCorps an opportunity to detect non-compliance based on federal regulations and AmeriCorps

policies and assess if non-compliance has resulted in improper payments. Furthermore, the agency has integrated improper payment results and NSCHC non-compliance into its grantee risk assessment which further informs grantee monitoring plans. Agency offices can make monitoring referrals when non-compliance is found in daily operations. These new reporting structures can help identify and prevent future improper payments.

Recoverable improper payments found in compliance monitoring, routine business, and the improper payments assessment are referred to the Office of Audits and Debt Resolution (OADR). OADR will then issue debts to the applicable grantees.

Please note training is ongoing but the selection was made for the quarter training was provided.

Question 3: Recovery Audits (PIIA Section: 3352)

Please describe the steps the agency has taken to recover improper payments identified in recovery audits. Please note there is a 3000 character limit.

ANSWER: AmeriCorps' prior analysis determined payment recapture audits are not cost effective in any program or activity that expends over \$1M annually. No changes within assessed AmeriCorps programs would warrant a new analysis.

Question 4: Excluded Programs (PIIA Section: 3352(e) (7))

Please list any programs the agency excluded from review under its payment recapture audit program because a payment recovery audit program was determined to not be cost-effective and provide a summary of the justification used to make that determination. Please note there is a 3000 character limit.

ANSWER: AmeriCorps determined through prior analysis that payment recapture audits are not cost effective in any program or activity that expends over \$1M annually, which includes: AmeriCorps State and National; AmeriCorps Seniors Foster Grandparent Program (FGP), RSVP, and Senior Companion Program (SCP); AmeriCorps State Service Commission Support Grants; Volunteer Generation Fund grants; Service Day grants; AmeriCorps VISTA; AmeriCorps NCCC; Payroll; National Service Trust; purchase cards; and travel cards.

AmeriCorps grant-making programs are primarily administered by the grantees and not at the federal level. The process to identify improper payments is labor intensive and it is not cost effective to have additional support outside the payment integrity and compliance monitoring units performing this work. The programs and activities that are administered by AmeriCorps do not result in the identification of a high frequency of or large amounts of recoverable improper payments. AmeriCorps previously determined because of the infrequency and limited amounts of cost recovery, it is not cost effective to have separate payment recovery audit programs in the programs and activities that are administered internally. No significant changes in program and activity administration occurred that would affect this determination.

Question 5: Financial and Administrative Controls (PIIA Section: 3357(d))

Please describe your agency's progress:

- *Implementing the financial and administrative controls established by OMB in OMB Circular A-123 to identify and assess fraud risks and design and implement control activities in order to prevent, detect, and respond to fraud, including improper payments; the fraud risk principle in the Standards for Internal Control in the Federal Government published by the Government Accountability Office*

(commonly known as the "Green Book"); and Office of Management and Budget Circular A-123, with respect to the leading practices for managing fraud risk;

- Identifying risk and vulnerabilities to fraud, and
- Establishing strategies, procedures, and other steps to curb fraud.

ANSWER:

Implementation of OMB Circular A-123	Implementation of GAO Green Book	Identifying Risk and Vulnerabilities	Establishing Strategies, Procedures and Other steps
2 – Established	2 – Established	2 – Established	2 – Established

Question 5 Free Text: Financial and Administrative Controls (PIIA Section: 3357(d))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: AmeriCorps has implemented GAO’s Framework for Managing Fraud Risk in the Federal Government. A Fraud Risk Management governance body is a part of this implementation. This body identifies and analyzes fraud risks and vulnerabilities and establishing steps to address those identified. Additionally, AmeriCorps has created an agency fraud risk profile and performs routine internal control testing over the identified fraud risk controls.

AmeriCorps will continue to strengthen its procedures in identifying and addressing fraud risks by performing an assessment in FY 2021 to determine if new fraud risks have developed.

Question 6 Free Text: Statutory Thresholds and Risk Assessments (PIIA Section: 3352(a) (3) (C))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Risk assessments were last performed in FY 2018 and, unless substantial changes occur in any program or activity prior, they will occur again in FY 2022. No substantial changes in legislation, program operations, or funding occurred at the agency, program, or activity level in FY 2020. AmeriCorps does acknowledge that the agency’s Transformation and Sustainability Plan is currently underway. The activities of the Transformation and Sustainability Plan, which will not be fully implemented until 2021, may result in the need to reassess the program's risk susceptibility during the next annual cycle.

The Retired and Senior Volunteer Program (RSVP)

Question 1: Annual Performance Appraisal Criteria (PIIA Section: 3352(d) (5) (A) and (B))

Please describe the steps the program has taken and plans to take (including timeline) to ensure that agency managers (including the agency head), accountable officers, program official/owner, and States and localities (where appropriate) are held accountable for reducing and recapturing IPs through annual performance appraisal criteria for each of the following:

- *Meeting applicable improper payments reduction targets;*
- *Preventing improper payments from being made; and*
- *Promptly detecting and recovering improper payments that are made.*

ANSWER:

Performance Appraisal Criteria
meeting applicable improper payments reduction targets
prevent improper payments from being made
promptly detect and recover improper payments that are made

Question 1 Free Text: Annual Performance Appraisal Criteria (PIIA Section: 3352(d) (5) (A) and (B))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: The accountable officials at AmeriCorps include the Chief Executive Officer (CEO), the Chief Risk Officer (CRO), the Director of AmeriCorps State and National and the Director of AmeriCorps Seniors. The CEO is ultimately responsible for agency compliance, while the CRO is responsible for compliance with the improper payments audit, and the program directors are responsible for rates within the programs they head. These accountable officials collaborate by reporting to the CEO on progress at least biannually on achieving compliance goals and by requiring reporting on progress towards core business improvement, which includes a remediation effort for the largest cause of AmeriCorps' improper payments.

In FY 2019-2020, to make significant agency progress on meeting applicable improper payment reduction targets and preventing improper payments, the accountable officials focused on implementing the agency's National Service Criminal History Check (NSCHC) vendor solution. This solution reduced the barrier for NSCHC compliance for grantees. In FY 2021, the agency and accountable officials will assess the efficacy of the vendor solution based upon FY20 payment integrity and routine monitoring results. Additional actions that will be taken include mandatory vendor participation for grantees found to have files out of compliance with NSCHC requirements and potential grant suspension or termination if there is systemic non-compliance. AmeriCorps is also in progress of updating regulations to clarify the criminal history check requirements for all national service participants. This regulation update would further reduce barriers through simplified and straight-forward requirements. AmeriCorps will continue to refer found improper payments during its annual assessment for recovery.

The four susceptible programs at AmeriCorps are administrated by grantees and AmeriCorps does not directly disburse the funds that are being assessed for improper payments. They are made by individual organizations. The agency’s payment integrity process reviews individual payments for compliance with statute and regulation. To better detect additional improper payments within the grantee portfolio, the agency is in the process of including improper payment results into its real-time grantee risk assessment, and is implementing a process where the different functions throughout the agency can make monitoring referrals for any issues arising in day-to-day operations. These referrals could lead to monitoring results, but, at minimum, will be included in the grantee risk assessment. These additional reporting structures can lead to additional visibility into grantees with compliance issues resulting in improper payments and recovery of funds.

Question 7: Improper Payment Rate Reduction (PIIA Section: 3352(d) (2))

Please indicate whether lowering the improper payment rate beyond the current level would be cost prohibitive because applying additional mitigation strategies or corrective actions for improper payment prevention would cost more to implement than the amount that would be saved.

ANSWER:

Cost Prohibitive (Yes/No)	Indicate Root Cause if known	Indicate which corrective action
NO	11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)
NO	13. Insufficient Documentation to Determine	3-Training (how to complete contracts)
NO	13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)

Question 7 Free Text: Improper Payment Rate Reduction (PIIA Section: 3352(d) (2))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: None of AmeriCorps’ mitigation strategies or corrective actions are cost prohibitive. AmeriCorps improper payments fall into two categories, Administrative or Process Errors Made by Other Party and Insufficient Documentation to Determine.

Administrative errors occur when AmeriCorps finds errors in grantee payment calculations, when unallowable charges are coded to the grant, and when errors were found and corrected. To lower improper payments due to administrative error, the results of the payment integrity process are shared with program leadership stakeholders for awareness into the identified issues. Corrective actions have and will continue to focus on ensuring grantees are aware these issues are occurring, have access to the information needed to correct these issues, and understand the importance of strong internal controls and quality assurance checks. Targeted training and technical assistance do not require additional funding or resources and are therefore not cost prohibitive.

Most of AmeriCorps improper payments fall into the Insufficient Documentation to Determine category, specifically due to non-compliant National Service Criminal History Checks (NSCHC). In FY 2019, Over 67% of the improper payments in the insufficient documentation category had a non-compliant NSCHC. AmeriCorps has extensively invested in addressing this root cause by reducing the barriers to compliance by offering an optional NSCHC vendor check solution implemented in FY 2019-2020. This solution led to a significant reduction in AmeriCorps' improper payment rates in FY 2020.

AmeriCorps continues to encourage the use of the NSCHC vendor solution. Additional ongoing actions include an updated disallowance policy for NSCHC non-compliance that results in more significant financial consequences for non-compliance. Additionally, if NSCHC non-compliance is found, grantees are required to use the vendor solution for rechecks and for all future checks under the grant award. Grant suspension or termination can occur if there is systemic non-compliance. AmeriCorps is also in progress of updating regulations to require consistent NSCHC requirements for all national service participants. AmeriCorps revised NSCHC policies and procedures and continued training and technical assistance are attainable with the agency's current level of funding and are not cost prohibitive.

Question 8: Tolerable Rate

Do you believe the program has reached a tolerable rate of improper payments?

ANSWER:

Indicate Yes or No
NO

Question 8 Free Text: Tolerable Rate

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: The rate will not be considered tolerable until it is under both \$10M and 10%. AmeriCorps continues to work towards achieving those thresholds.

Question 9: Internal Controls, Human Capital, Information Systems and other Infrastructure and Program Needs (PIIA Section: 3352(d) (2) (A) through (C)3352(d) (3))

Does the program have the internal controls, human capital, and information systems and other infrastructure it needs to reduce IPs to the levels the agency has targeted? Please indicate additional program needs to reduce IPs to the levels the program has targeted.

ANSWER:

Indicate 'yes' or 'no'	Indicate program needs
YES	5. Other: Explain

Question 9 Free Text: Internal Controls, Human Capital, Information Systems and other Infrastructure and Program Needs (PIIA Section: 3352(d) (2) (A) through (C)3352(d) (3))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Please not 5. "Other" was selected because N/A was not an option.

AmeriCorps has the internal controls, human capital, information systems and other infrastructure to reduce its improper payments to the level the agency has targeted. The agency has focused its efforts for improper payment reduction on reducing a primary barrier to compliance – National Service Criminal History Check. As anticipated, AmeriCorps’ implementation of its vendor has resulted in a significant reduction in the agency’s improper payment rates. The continued use of the vendor along with additional changes in National Service Criminal History Checks and the National Service Criminal History Check Guide to Enforcement Action will serve as resources to further reduce the agency’s improper payment rates.

Question 10: Corrective Actions Taken (PIIA Section: 3352(d) (1))

Please indicate which corrective action(s) the program HAS TAKEN to prevent improper payments.

ANSWER:

Indicate identified root cause	Indicate corrective action(s) taken	Select the actual completion date for action(s) taken	If other completion date, please indicate
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)	FY2020 Q3	
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)	FY2020 Q3	
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)	FY2019 Q4	

Question 10 Free Text: Corrective Actions Taken (PIIA Section: 3352(d) (1))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Administrative errors are payments that grantees made that were unallowable, improperly coded to the grant, outside the period of performance, or errors that led to an overpayment or underpayment. AmeriCorps corrective actions focused on training and technical assistance to ensure grantees are aware these issues are occurring, have access to the information needed to correct these

issues, and understand the importance of strong internal controls and quality assurance checks. In FY 2019 Q4 AmeriCorps shared detailed findings with applicable program and grants offices to ensure these for awareness and potential remediation. AmeriCorps also covers financial management and grant management in on-going routine trainings such symposiums, regional trainings, and virtual trainings available on CNCS’s online platform for grantees. In FY 2020 Q2, AmeriCorps required payment integrity training for grantees selected for improper payment testing and highlighted common types of administrative errors. The agency also established new policy and training positions to provide consistent guidance to regional offices and grantees.

Improper payments under Insufficient Documentation to Determine are payments that have insufficient supporting documentation such as missing or inadequate administrative documents, timesheets, eligibility forms, etc. to verify the accuracy of the payment. These also include payments where grantees did not perform all the required components of the NSCHC on national service participants and staff prior to the date of the tested payment or there are missing or inadequate NSCHC components. To address other issues with insignificant documentation to determine, in FY 2020 Q1, AmeriCorps updated its communications to grantees to make them clearer and more prescriptive about documentation requirements. In FY 2020 Q2, AmeriCorps updated its improper training resources to stress the documentation needed to successfully complete an improper payment review. Two virtual trainings each were provided internally to staff and externally to grantees.

To address payments with a root cause of Insufficient Documentation to Determine due to NSCHC, AmeriCorps reduced the barriers to NSCHC compliance with the implementation of its vendor solutions which allow grantees access to all required components of a compliant check. Though the Exemption Recheck Period was optional, over 85 percent of grantees selected for testing chose to use the vendors resulting in a substantial decrease in improper payments within each of the four susceptible programs. In FY 2019 Q4, to further encourage use of the vendors, AmeriCorps employed the National Service Criminal History Check Guide to Enforcement Action, which requires grantees to use the vendors for rechecks and criminal history checks moving forward if NSCHC non-compliance is found.

Please note the last quarter training was conducted was selected rather than listing all quarters.

Question 11: Corrective Actions to be Taken (PIIA Section: 3352(d) (1))

Please indicate which corrective action(s) the program WILL TAKE to prevent improper payments.

ANSWER:

Indicate identified root cause	Indicate planned corrective action(s)	Select the planned completion date for action(s) program will take	Other planned completion date
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other	3-Training (how to complete contracts)	FY2021	

Indicate identified root cause	Indicate planned corrective action(s)	Select the planned completion date for action(s) program will take	Other planned completion date
organization administering Federal dollars)			
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)	FY2021	
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)	FY2021	

Question 11 Free Text: Corrective Actions to be Taken (PIIA Section: 3352(d) (1))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: AmeriCorps expects to complete its corrective actions in FY 2021. The agency will continue to conduct regular trainings on financial and grant management that can address administrative errors and improper payments stemming from inadequate record keeping, which is classified as insufficient documentation to determine. AmeriCorps will continue to share detailed findings with regional offices and program leadership to ensure regular visibility into common issues found during payment integrity testing. Grantees selected for payment integrity testing will be required to access live or recorded trainings that explain proper documentation standards to ensure a successful assessment.

AmeriCorps will continue to implement and enforce its new policies and procedures to address NSCHC non-compliance with insufficient documentation to determine, which has historically been the bulk of AmeriCorps’ improper payments. Grantee use of AmeriCorps NSCHC vendor solutions has significantly reduced AmeriCorps’ improper payment rates. AmeriCorps will focus its corrective actions on encouraging use of the vendors, specifically via the National Service Criminal History Check Guide to Enforcement Action. If NSCHC non-compliance is found, grantees are required to use the vendors for rechecks and NSCHC for the remainder of the grant period. Potential grant suspension or termination can occur if there is systemic non-compliance. Additionally, AmeriCorps is in progress of updating regulations to require consistent NSCHC requirements for all national service participants which would simplify the NSCHC process and reduce barriers toward a compliant check. This regulation change is expected to be enacted in 2021.

In FY 2020 Q3, the Office of Monitoring began its monitoring plan which establishes a holistic framework to monitor and identify potential improper payments in grantee portfolios. The agency has integrated improper payment results and NSCHC non-compliance into its grantee risk assessment which informs grantee monitoring plans. Additionally, agency offices can make monitoring referrals when non-compliance is found in daily operations. These new reporting structures can identify and prevent future

improper payments. The effects of AmeriCorps new monitoring structure and grantee risk assessment are expected to be seen in FY 2022.

Question 12: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Please indicate which of the six (6) criteria (if any) were determined to be non-compliant in the most recent IG compliance review.

ANSWER:

Indicate compliant or non-compliant	Compliance criteria
Compliant	1. Publish an AFR or PAR
Compliant	2. Conduct Program-Specific Risk Assessment
Non-Compliant	3. Publish Improper Payment Estimates
Compliant	4. Publish Programmatic Corrective Action Plans
Non-Compliant	5. Publish and Meet Annual Reduction Targets
Non-Compliant	6. Report a gross Improper Payment Rate of Less than 10%

Question 12 Free Text: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Regarding Compliance Criteria 3 “Publish Improper Payment Estimates,” while this criterion was deemed to be non-compliant, AmeriCorps did not concur with the audit finding and affirms the reported FY 2019 improper payment rates were complete, accurate and valid. AmeriCorps followed the longstanding sampling methodology prepared by its statisticians, who asserted the rate was statistically valid.

Regarding Compliance Criteria 5 “Publish and Meet Annual Reduction Targets” AmeriCorps concurred with the non-compliant determination. In FY 2020, AmeriCorps was able to meet the published targets for all four susceptible programs.

Regarding Compliance Criteria 6 “Report a Gross Improper Rate of Less than 10%,” AmeriCorps concurred with this non-compliance finding. In FY 2020, while the agency was not able to report a gross improper payment rate of less than 10% in all programs deemed susceptible to significant improper payments, AmeriCorps was successful in reducing its gross improper rates from FY 2019 for all four susceptible programs. AmeriCorps will continue its progress by assessing the effectiveness of past corrective actions and identifying potential future corrective actions.

Question 13: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Please indicate how many consecutive years this program was deemed non-compliant as of the most recent IG compliance review (regardless of which of the six (6) criteria were determined non-compliant).

ANSWER:

Indicate consecutive years
8

Question 13 Free Text: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: For eight (8) consecutive years, beginning in FY 2012, AmeriCorps has been deemed non-compliant with the Office of the Inspector General’s Compliance review. Over the past several years, AmeriCorps has made considerable efforts to refine its improper payment process to come into compliance. Through the improper payment assessment, the agency has obtained data regarding its largest programs allowing AmeriCorps to identify the root cause of non-compliance trends and initiate extensive, agency-wide corrective actions to address the primary driver of improper payments – National Service Criminal History Checks. Moreover, AmeriCorps has dedicated significant financial and staffing resources to its process. These process improvements have resulted in considerable reductions in improper payments as demonstrated in this year’s FY 2020 improper payments testing results. AmeriCorps will continue to refine and invest in the improper payment assessment as it strives to come into full compliance.

Question 14: Bringing the program into compliance (PIIA Section: 3353(b) (5))

If deemed to be non-compliant in the most recent fiscal year, please briefly describe the plan the executive agency will take to bring the program into compliance.

ANSWER:

Indicate root cause	Indicate planned corrective actions
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)

**Question 14 Free Text: Bringing the program into compliance (PIIA Section: 3353(b)
(5))**

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: AmeriCorps' Improper Payments Program was found to be noncompliant in three out of the six criteria from the most recent Inspector General (IG) Compliance review: Publish Improper Payment Estimates, Publish and Meet Annual Reduction Targets, and Report a gross Improper Payment Rate of Less than 10%. The non-compliant findings stem from the agency's susceptible programs only. There are no non-compliant findings related to any program or activity that has not been deemed susceptible to significant improper payments.

AmeriCorps is committed to continuous improvement in its improper payment testing process. To ensure the accuracy of AmeriCorps improper payment estimates, the agency will continue to consistently follow its testing and sampling methodology, require all reviewers and supervisors to take updated training to ensure consistent and accurate testing, and continue to implement effective quality control of testing determinations and documentation.

All of AmeriCorps' improper payments in its four susceptible programs are made by grant recipients. To make agency progress on meeting applicable improper payment reduction targets and lowering the improper payment rate to less than 10%, AmeriCorps will continue to focus on encouraging and, in some cases, requiring the NSCHC vendor solution. This solution reduces the barrier for NSCHC compliance for grantees and has shown to significantly reduce the improper payment rates in FY 2020 testing. AmeriCorps will also encourage the use of the vendor through the National Service Criminal History Check Guide to Enforcement Action. If NSCHC non-compliance is found, grantees are required to use the vendors for rechecks and NSCHC moving forward. Potential grant suspension or termination can occur if there is systemic non-compliance. Additionally, AmeriCorps is in progress of updating regulations to require consistent NSCHC requirements for all national service participants which would simplify the NSCHC process and reduce barriers toward a compliant check.

To reduce administrative errors and missing documentation, AmeriCorps will continue to share its findings from the improper payment assessment to appropriate staff to ensure these topics are covered in regular training and technical assistance.

Question 15: Creating accountability to achieve compliance (PIIA Section: 3353(b) (1) (B))

For any program or activity deemed to be non-compliant in the most recent fiscal year please briefly describe and identify the following:

- The measurable milestones to be accomplished
- The senior executive agency official responsible
- Establishment of an accountability mechanism
- Incentives
- Consequences

ANSWER:

Measurable milestones	Target Date	If other date, please specify	Senior Executive Agency Official	Accountability Mechanism	Incentives	Consequences
Develop corrective actions including, but not limited to, identifying training or correspondence required to address frequent causes of found improper payments in monitoring and payment integrity testing	FY2021		AmeriCorps Seniors Director, AmeriCorps Director	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal
Provide annual payment integrity results, root causes, and issues to program directors	FY2021		CRO	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal
Report compliance efforts to Risk Management Council quarterly	FY2021		CRO	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal
Present and report compliance efforts, issues identified in routine	FY2021		CEO, CRO, AmeriCorps Seniors Director,	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal

Measurable milestones	Target Date	If other date, please specify	Senior Executive Agency Official	Accountability Mechanism	Incentives	Consequences
monitoring and payment integrity testing, and planned actions at least biannually to CEO			AmeriCorps Director			

Question 15 Free Text: Creating accountability to achieve compliance (PIIA Section: 3353(b) (1) (B))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Accountable officials will continue to report efforts towards compliance to the CEO at minimum, biannually. Additional reporting on efforts toward compliance will be reported to the Risk Management Council quarterly. The CRO will present individual and aggregate findings to program accountable officials in the form of an interactive dashboard to the accountable officials responsible for the rates within the programs they head. Additional actions will be required from the program accountable officials on how the findings will be addressed to proactively address deficiencies in understanding within the grant portfolios. All milestones will be a subject of discussion within performance appraisals for the Senior Accountable Officials.

Question 16: Do Not Pay Initiative (PIIA Section: 3354(b) (5))

Please indicate whether the program uses the DNP (yes/no) and whether the Do Not Pay Initiative has reduced/prevented improper payments (yes/no). Additionally, please provide the frequency of corrections (week/month range) or identification of incorrect information (range of false hits?).

ANSWER:

Does the program use the Do Not Pay Initiative (DNP) (yes/no)	Has the DNP reduced/prevented improper payments (yes/no)	How frequently are corrections made?	How frequently is incorrect information identified?
NO	N/A	Annually	Annually

Question 16 Free Text: Do Not Pay Initiative (PIIA Section: 3354(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Please not the "how frequently are corrections made" and "how frequently is incorrect information identified" required a selection but are not applicable because DNP is not used.

AmeriCorps’ susceptible programs are not administered at the federal level and the grantees making the payments do not have access to the DNP databases. It is not used to reduce or prevent improper payments at the grantee individual payment level, which is the basis for AmeriCorps’ payment integrity testing. AmeriCorps does utilize systems such as the System for Award Management prior to award to ensure the grantee organizations and the authorized officials are eligible to receive federal funding.

The Senior Companion Program (SCP)

Question 1: Annual Performance Appraisal Criteria (PIIA Section: 3352(d) (5) (A) and (B))

Please describe the steps the program has taken and plans to take (including timeline) to ensure that agency managers (including the agency head), accountable officers, program official/owner, and States and localities (where appropriate) are held accountable for reducing and recapturing IPs through annual performance appraisal criteria for each of the following:

- Meeting applicable improper payments reduction targets;
- Preventing improper payments from being made; and
- Promptly detecting and recovering improper payments that are made.

ANSWER:

Performance Appraisal Criteria
meeting applicable improper payments reduction targets
prevent improper payments from being made
promptly detect and recover improper payments that are made

Question 1 Free Text: Annual Performance Appraisal Criteria (PIIA Section: 3352(d) (5) (A) and (B))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: The accountable officials at AmeriCorps include the Chief Executive Officer (CEO), the Chief Risk Officer (CRO), the Director of AmeriCorps State and National and the Director of AmeriCorps Seniors. The CEO is ultimately responsible for agency compliance, while the CRO is responsible for compliance with the improper payments audit, and the program directors are responsible for rates within the programs they head. These accountable officials collaborate by reporting to the CEO on progress at least biannually on achieving compliance goals and by requiring reporting on progress towards core business improvement, which includes a remediation effort for the largest cause of AmeriCorps’ improper payments.

In FY 2019-2020, to make significant agency progress on meeting applicable improper payment reduction targets and preventing improper payments, the accountable officials focused on implementing the agency’s National Service Criminal History Check (NSCHC) vendor solution. This solution reduced the barrier for NSCHC compliance for grantees. In FY 2021, the agency and accountable officials will assess the efficacy of the vendor solution based upon FY20 payment integrity and routine monitoring results. Additional actions that will be taken include mandatory vendor participation for grantees found to have files out of compliance with NSCHC requirements and potential grant suspension or termination if there

is systemic non-compliance. AmeriCorps is also in progress of updating regulations to clarify the criminal history check requirements for all national service participants. This regulation update would further reduce barriers through simplified and straight-forward requirements. AmeriCorps will continue to refer found improper payments during its annual assessment for recovery.

The four susceptible programs at AmeriCorps are administrated by grantees and AmeriCorps does not directly disburse the funds that are being assessed for improper payments. They are made by individual organizations. The agency’s payment integrity process reviews individual payments for compliance with statute and regulation. To better detect additional improper payments within the grantee portfolio, the agency is in the process of including improper payment results into its real-time grantee risk assessment, and is implementing a process where the different functions throughout the agency can make monitoring referrals for any issues arising in day-to-day operations. These referrals could lead to monitoring results, but, at minimum, will be included in the grantee risk assessment. These additional reporting structures can lead to additional visibility into grantees with compliance issues resulting in improper payments and recovery of funds.

Question 7: Improper Payment Rate Reduction (PIIA Section: 3352(d) (2))

Please indicate whether lowering the improper payment rate beyond the current level would be cost prohibitive because applying additional mitigation strategies or corrective actions for improper payment prevention would cost more to implement than the amount that would be saved.

ANSWER:

Cost Prohibitive (Yes/No)	Indicate Root Cause if known	Indicate which corrective action
NO	11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)
NO	13. Insufficient Documentation to Determine	3-Training (how to complete contracts)
NO	13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)

Question 7 Free Text: Improper Payment Rate Reduction (PIIA Section: 3352(d) (2))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: None of AmeriCorps’ mitigation strategies or corrective actions are cost prohibitive. AmeriCorps improper payments fall into two categories, Administrative or Process Errors Made by Other Party and Insufficient Documentation to Determine.

Administrative errors occur when AmeriCorps finds errors in grantee payment calculations, when unallowable charges are coded to the grant, and when errors were found and corrected. To lower improper payments due to administrative error, the results of the payment integrity process are shared with program leadership stakeholders for awareness into the identified issues. Corrective actions have and will continue to focus on ensuring grantees are aware these issues are occurring, have access to the information needed to correct these issues, and understand the importance of strong internal controls and quality assurance checks. Targeted training and technical assistance do not require additional funding or resources and are therefore not cost prohibitive.

Most of AmeriCorps improper payments fall into the Insufficient Documentation to Determine category, specifically due to non-compliant National Service Criminal History Checks (NSCHC). In FY 2019, Over 67% of the improper payments in the insufficient documentation category had a non-compliant NSCHC. AmeriCorps has extensively invested in addressing this root cause by reducing the barriers to compliance by offering an optional NSCHC vendor check solution implemented in FY 2019-2020. This solution led to a significant reduction in AmeriCorps' improper payment rates in FY 2020.

AmeriCorps continues to encourage the use of the NSCHC vendor solution. Additional ongoing actions include an updated disallowance policy for NSCHC non-compliance that results in more significant financial consequences for non-compliance. Additionally, if NSCHC non-compliance is found, grantees are required to use the vendor solution for rechecks and for all future checks under the grant award. Grant suspension or termination can occur if there is systemic non-compliance. AmeriCorps is also in progress of updating regulations to require consistent NSCHC requirements for all national service participants. AmeriCorps revised NSCHC policies and procedures and continued training and technical assistance are attainable with the agency's current level of funding and are not cost prohibitive.

Question 8: Tolerable Rate

Do you believe the program has reached a tolerable rate of improper payments?

ANSWER:

Indicate Yes or No
NO

Question 8 Free Text: Tolerable Rate

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: The intention is to report any program that is reporting under both \$10M in estimated improper payments and under a 10% improper payment rate, regardless of the rate, as "tolerable." If both criteria are met, then the programs would be under the statutory threshold for susceptible improper payments and meet audit compliance standards. For any programs over \$10M in estimated improper payment or over 10% improper payment rate, we would indicate the rate is not tolerable, and would work to achieve those thresholds.

The rate will not be considered tolerable until it is under both \$10M and 10%. AmeriCorps continues to work towards achieving those thresholds.

Question 9: Internal Controls, Human Capital, Information Systems and other Infrastructure and Program Needs (PIIA Section: 3352(d) (2) (A) through (C)3352(d) (3))

Does the program have the internal controls, human capital, and information systems and other infrastructure it needs to reduce IPs to the levels the agency has targeted? Please indicate additional program needs to reduce IPs to the levels the program has targeted.

ANSWER:

Indicate 'yes' or 'no'	Indicate program needs
YES	5. Other: Explain

Question 9 Free Text: Internal Controls, Human Capital, Information Systems and other Infrastructure and Program Needs (PIIA Section: 3352(d) (2) (A) through (C)3352(d) (3))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Please not 5. "Other" was selected because N/A was not an option.

AmeriCorps has the internal controls, human capital, information systems and other infrastructure to reduce its improper payments to the level the agency has targeted. The agency has focused its efforts for improper payment reduction on reducing a primary barrier to compliance – National Service Criminal History Check. As anticipated, AmeriCorps’ implementation of its vendor has resulted in a significant reduction in the agency’s improper payment rates. The continued use of the vendor along with additional changes in National Service Criminal History Checks and the National Service Criminal History Check Guide to Enforcement Action will serve as resources to further reduce the agency’s improper payment rates.

Question 10: Corrective Actions Taken (PIIA Section: 3352(d) (1))

Please indicate which corrective action(s) the program HAS TAKEN to prevent improper payments.

ANSWER:

Indicate identified root cause	Indicate corrective action(s) taken	Select the actual completion date for action(s) taken	If other completion date, please indicate
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)	FY2020 Q3	

Indicate identified root cause	Indicate corrective action(s) taken	Select the actual completion date for action(s) taken	If other completion date, please indicate
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)	FY2020 Q3	
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)	FY2019 Q4	

Question 10 Free Text: Corrective Actions Taken (PIIA Section: 3352(d) (1))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Administrative errors are payments that grantees made that were unallowable, improperly coded to the grant, outside the period of performance, or errors that led to an overpayment or underpayment. AmeriCorps corrective actions focused on training and technical assistance to ensure grantees are aware these issues are occurring, have access to the information needed to correct these issues, and understand the importance of strong internal controls and quality assurance checks. In FY 2019 Q4 AmeriCorps shared detailed findings with applicable program and grants offices to ensure these for awareness and potential remediation. AmeriCorps also covers financial management and grant management in on-going routine trainings such symposiums, regional trainings, and virtual trainings available on CNCS’s online platform for grantees. In FY 2020 Q2, AmeriCorps required payment integrity training for grantees selected for improper payment testing and highlighted common types of administrative errors. The agency also established new policy and training positions to provide consistent guidance to regional offices and grantees.

Improper payments under Insufficient Documentation to Determine are payments that have insufficient supporting documentation such as missing or inadequate administrative documents, timesheets, eligibility forms, etc. to verify the accuracy of the payment. These also include payments where grantees did not perform all the required components of the NSCHC on national service participants and staff prior to the date of the tested payment or there are missing or inadequate NSCHC components. To address other issues with insignificant documentation to determine, in FY 2020 Q1, AmeriCorps updated its communications to grantees to make them clearer and more prescriptive about documentation requirements. In FY 2020 Q2, AmeriCorps updated its improper training resources to stress the documentation needed to successfully complete an improper payment review. Two virtual trainings each were provided internally to staff and externally to grantees.

To address payments with a root cause of Insufficient Documentation to Determine due to NSCHC, AmeriCorps reduced the barriers to NSCHC compliance with the implementation of its vendor solutions which allow grantees access to all required components of a compliant check. Though the Exemption Recheck Period was optional, over 85 percent of grantees selected for testing chose to use the vendors

resulting in a substantial decrease in improper payments within each of the four susceptible programs. In FY 2019 Q4, to further encourage use of the vendors, AmeriCorps employed the National Service Criminal History Check Guide to Enforcement Action, which requires grantees to use the vendors for rechecks and criminal history checks moving forward if NSCHC non-compliance is found.

Please note the last quarter training was conducted was selected rather than listing all quarters.

Question 11: Corrective Actions to be Taken (PIIA Section: 3352(d) (1))

Please indicate which corrective action(s) the program WILL TAKE to prevent improper payments.

ANSWER:

Indicate identified root cause	Indicate planned corrective action(s)	Select the planned completion date for action(s) program will take	Other planned completion date
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)	FY2021	
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)	FY2021	
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)	FY2021	

Question 11 Free Text: Corrective Actions to be Taken (PIIA Section: 3352(d) (1))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: AmeriCorps expects to complete its corrective actions in FY 2021. The agency will continue to conduct regular trainings on financial and grant management that can address administrative errors and improper payments stemming from inadequate record keeping, which is classified as insufficient documentation to determine. AmeriCorps will continue to share detailed findings with regional offices and program leadership to ensure regular visibility into common issues found during payment integrity testing. Grantees selected for payment integrity testing will be required to access live or recorded trainings that explain proper documentation standards to ensure a successful assessment.

AmeriCorps will continue to implement and enforce its new policies and procedures to address NSCHC non-compliance with insufficient documentation to determine, which has historically been the bulk of AmeriCorps’ improper payments. Grantee use of AmeriCorps NSCHC vendor solutions has significantly reduced AmeriCorps’ improper payment rates. AmeriCorps will focus its corrective actions on

encouraging use of the vendors, specifically via the National Service Criminal History Check Guide to Enforcement Action. If NSCHC non-compliance is found, grantees are required to use the vendors for rechecks and NSCHC for the remainder of the grant period. Potential grant suspension or termination can occur if there is systemic non-compliance. Additionally, AmeriCorps is in progress of updating regulations to require consistent NSCHC requirements for all national service participants which would simplify the NSCHC process and reduce barriers toward a compliant check. This regulation change is expected to be enacted in 2021.

In FY 2020 Q3, the Office of Monitoring began its monitoring plan which establishes a holistic framework to monitor and identify potential improper payments in grantee portfolios. The agency has integrated improper payment results and NSCHC non-compliance into its grantee risk assessment which informs grantee monitoring plans. Additionally, agency offices can make monitoring referrals when non-compliance is found in daily operations. These new reporting structures can identify and prevent future improper payments. The effects of AmeriCorps new monitoring structure and grantee risk assessment are expected to be seen in FY 2022.

Question 12: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Please indicate which of the six (6) criteria (if any) were determined to be non-compliant in the most recent IG compliance review.

ANSWER:

Indicate compliant or non-compliant	Compliance criteria
Compliant	1. Publish an AFR or PAR
Compliant	2. Conduct Program-Specific Risk Assessment
Non-Compliant	3. Publish Improper Payment Estimates
Compliant	4. Publish Programmatic Corrective Action Plans
Non-Compliant	5. Publish and Meet Annual Reduction Targets
Non-Compliant	6. Report a gross Improper Payment Rate of Less than 10%

Question 12 Free Text: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Regarding Compliance Criteria 3 “Publish Improper Payment Estimates,” while this criterion was deemed to be non-compliant, AmeriCorps did not concur with the audit finding and affirms the reported FY 2019 improper payment rates were complete, accurate and valid. AmeriCorps followed the longstanding sampling methodology prepared by its statisticians, who asserted the rate was statistically valid.

Regarding Compliance Criteria 5 “Publish and Meet Annual Reduction Targets” AmeriCorps concurred with the non-compliant determination. In FY 2020, AmeriCorps was able to meet the published targets for all four susceptible programs.

Regarding Compliance Criteria 6 “Report a Gross Improper Rate of Less than 10%,” AmeriCorps concurred with this non-compliance finding. In FY 2020, while the agency was not able to report a gross improper payment rate of less than 10% in all programs deemed susceptible to significant improper payments, AmeriCorps was successful in reducing its gross improper rates from FY 2019 for all four susceptible programs. AmeriCorps will continue its progress by assessing the effectiveness of past corrective actions and identifying potential future corrective actions.

Question 13: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Please indicate how many consecutive years this program was deemed non-compliant as of the most recent IG compliance review (regardless of which of the six (6) criteria were determined non-compliant).

ANSWER:

Indicate consecutive years
8

Question 13 Free Text: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: For eight (8) consecutive years, beginning in FY 2012, AmeriCorps has been deemed non-compliant with the Office of the Inspector General’s Compliance review. Over the past several years, AmeriCorps has made considerable efforts to refine its improper payment process to come into compliance. Through the improper payment assessment, the agency has obtained data regarding its largest programs allowing AmeriCorps to identify the root cause of non-compliance trends and initiate extensive, agency-wide corrective actions to address the primary driver of improper payments – National Service Criminal History Checks. Moreover, AmeriCorps has dedicated significant financial and staffing resources to its process. These process improvements have resulted in considerable reductions in improper payments as demonstrated in this year’s FY 2020 improper payments testing results. AmeriCorps will continue to refine and invest in the improper payment assessment as it strives to come into full compliance.

Question 14: Bringing the program into compliance (PIIA Section: 3353(b) (5))

If deemed to be non-compliant in the most recent fiscal year, please briefly describe the plan the executive agency will take to bring the program into compliance.

ANSWER:

Indicate root cause	Indicate planned corrective actions
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)

Question 14 Free Text: Bringing the program into compliance (PIIA Section: 3353(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: AmeriCorps' Improper Payments Program was found to be noncompliant in three out of the six criteria from the most recent Inspector General (IG) Compliance review: Publish Improper Payment Estimates, Publish and Meet Annual Reduction Targets, and Report a gross Improper Payment Rate of Less than 10%. The non-compliant findings stem from the agency's susceptible programs only. There are no non-compliant findings related to any program or activity that has not been deemed susceptible to significant improper payments.

AmeriCorps is committed to continuous improvement in its improper payment testing process. To ensure the accuracy of AmeriCorps improper payment estimates, the agency will continue to consistently follow its testing and sampling methodology, require all reviewers and supervisors to take updated training to ensure consistent and accurate testing, and continue to implement effective quality control of testing determinations and documentation.

All of AmeriCorps' improper payments in its four susceptible programs are made by grant recipients. To make agency progress on meeting applicable improper payment reduction targets and lowering the improper payment rate to less than 10%, AmeriCorps will continue to focus on encouraging and, in some cases, requiring the NSCHC vendor solution. This solution reduces the barrier for NSCHC compliance for grantees and has shown to significantly reduce the improper payment rates in FY 2020 testing. AmeriCorps will also encourage the use of the vendor through the National Service Criminal History Check Guide to Enforcement Action. If NSCHC non-compliance is found, grantees are required to use the vendors for rechecks and NSCHC moving forward. Potential grant suspension or termination can occur if there is systemic non-compliance. Additionally, AmeriCorps is in progress of updating regulations to

require consistent NSCHC requirements for all national service participants which would simplify the NSCHC process and reduce barriers toward a compliant check.

To reduce administrative errors and missing documentation, AmeriCorps will continue to share its findings from the improper payment assessment to appropriate staff to ensure these topics are covered in regular training and technical assistance.

Question 15: Creating accountability to achieve compliance (PIIA Section: 3353(b) (1) (B))

For any program or activity deemed to be non-compliant in the most recent fiscal year please briefly describe and identify the following:

- *The measurable milestones to be accomplished*
- *The senior executive agency official responsible*
- *Establishment of an accountability mechanism*
- *Incentives*
- *Consequences*

ANSWER:

Measurable milestones	Target Date	If other date, please specify	Senior Executive Agency Official	Accountability Mechanism	Incentives	Consequences
Present and report compliance efforts, issues identified in routine monitoring and payment integrity testing, and planned actions at least biannually to CEO	FY2021		CEO, CRO, AmeriCorps Seniors Director, AmeriCorps Director	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal
Report compliance efforts to Risk Management Council quarterly	FY2021		CRO	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal
Provide annual payment integrity results, root causes, and issues to program directors	FY2021		CRO	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal

Measurable milestones	Target Date	If other date, please specify	Senior Executive Agency Official	Accountability Mechanism	Incentives	Consequences
Develop corrective actions including, but not limited to, identifying training or correspondence required to address frequent causes of found improper payments in monitoring and payment integrity testing	FY2021		AmeriCorps Seniors Director, AmeriCorps Director	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal

Question 15 Free Text: Creating accountability to achieve compliance (PIIA Section: 3353(b) (1) (B))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Accountable officials will continue to report efforts towards compliance to the CEO at minimum, biannually. Additional reporting on efforts toward compliance will be reported to the Risk Management Council quarterly. The CRO will present individual and aggregate findings to program accountable officials in the form of an interactive dashboard to the accountable officials responsible for the rates within the programs they head. Additional actions will be required from the program accountable officials on how the findings will be addressed to proactively address deficiencies in understanding within the grant portfolios. All milestones will be a subject of discussion within performance appraisals for the Senior Accountable Officials.

Question 16: Do Not Pay Initiative (PIIA Section: 3354(b) (5))

Please indicate whether the program uses the DNP (yes/no) and whether the Do Not Pay Initiative has reduced/prevented improper payments (yes/no). Additionally, please provide the frequency of corrections (week/month range) or identification of incorrect information (range of false hits?).

ANSWER:

Does the program use the Do Not Pay Initiative (DNP) (yes/no)	Has the DNP reduced/prevented improper payments (yes/no)	How frequently are corrections made?	How frequently is incorrect information identified?
NO	N/A	Annually	Annually

Question 16 Free Text: Do Not Pay Initiative (PIIA Section: 3354(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Please not the "how frequently are corrections made" and "how frequently is incorrect information identified" required a selection but are not applicable because DNP is not used.

AmeriCorps' susceptible programs are not administered at the federal level and the grantees making the payments do not have access to the DNP databases. It is not used to reduce or prevent improper payments at the grantee individual payment level, which is the basis for AmeriCorps' payment integrity testing. AmeriCorps does utilize systems such as the System for Award Management prior to award to ensure the grantee organizations and the authorized officials are eligible to receive federal funding.

The Foster Grandparent Program (FGP)

Question 1: Annual Performance Appraisal Criteria (PIIA Section: 3352(d) (5) (A) and (B))

Please describe the steps the program has taken and plans to take (including timeline) to ensure that agency managers (including the agency head), accountable officers, program official/owner, and States and localities (where appropriate) are held accountable for reducing and recapturing IPs through annual performance appraisal criteria for each of the following:

- Meeting applicable improper payments reduction targets;
- Preventing improper payments from being made; and
- Promptly detecting and recovering improper payments that are made.

ANSWER:

Performance Appraisal Criteria
meeting applicable improper payments reduction targets
prevent improper payments from being made
promptly detect and recover improper payments that are made

Question 1 Free Text: Annual Performance Appraisal Criteria (PIIA Section: 3352(d) (5) (A) and (B))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: The accountable officials at AmeriCorps include the Chief Executive Officer (CEO), the Chief Risk Officer (CRO), the Director of AmeriCorps State and National and the Director of AmeriCorps Seniors. The CEO is ultimately responsible for agency compliance, while the CRO is responsible for compliance with the improper payments audit, and the program directors are responsible for rates within the programs they head. These accountable officials collaborate by reporting to the CEO on progress at least biannually on achieving compliance goals and by requiring reporting on progress towards core business improvement, which includes a remediation effort for the largest cause of AmeriCorps' improper payments.

In FY 2019-2020, to make significant agency progress on meeting applicable improper payment reduction targets and preventing improper payments, the accountable officials focused on implementing the agency’s National Service Criminal History Check (NSCHC) vendor solution. This solution reduced the barrier for NSCHC compliance for grantees. In FY 2021, the agency and accountable officials will assess the efficacy of the vendor solution based upon FY20 payment integrity and routine monitoring results. Additional actions that will be taken include mandatory vendor participation for grantees found to have files out of compliance with NSCHC requirements and potential grant suspension or termination if there is systemic non-compliance. AmeriCorps is also in progress of updating regulations to clarify the criminal history check requirements for all national service participants. This regulation update would further reduce barriers through simplified and straight-forward requirements. AmeriCorps will continue to refer found improper payments during its annual assessment for recovery.

The four susceptible programs at AmeriCorps are administrated by grantees and AmeriCorps does not directly disburse the funds that are being assessed for improper payments. They are made by individual organizations. The agency’s payment integrity process reviews individual payments for compliance with statute and regulation. To better detect additional improper payments within the grantee portfolio, the agency is in the process of including improper payment results into its real-time grantee risk assessment, and is implementing a process where the different functions throughout the agency can make monitoring referrals for any issues arising in day-to-day operations. These referrals could lead to monitoring results, but, at minimum, will be included in the grantee risk assessment. These additional reporting structures can lead to additional visibility into grantees with compliance issues resulting in improper payments and recovery of funds.

Question 7: Improper Payment Rate Reduction (PIIA Section: 3352(d) (2))

Please indicate whether lowering the improper payment rate beyond the current level would be cost prohibitive because applying additional mitigation strategies or corrective actions for improper payment prevention would cost more to implement than the amount that would be saved.

ANSWER:

Cost Prohibitive (Yes/No)	Indicate Root Cause if known	Indicate which corrective action
NO	11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)
NO	13. Insufficient Documentation to Determine	3-Training (how to complete contracts)
NO	13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)

Question 7 Free Text: Improper Payment Rate Reduction (PIIA Section: 3352(d) (2))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: None of AmeriCorps' mitigation strategies or corrective actions are cost prohibitive. AmeriCorps improper payments fall into two categories, Administrative or Process Errors Made by Other Party and Insufficient Documentation to Determine.

Administrative errors occur when AmeriCorps finds errors in grantee payment calculations, when unallowable charges are coded to the grant, and when errors were found and corrected. To lower improper payments due to administrative error, the results of the payment integrity process are shared with program leadership stakeholders for awareness into the identified issues. Corrective actions have and will continue to focus on ensuring grantees are aware these issues are occurring, have access to the information needed to correct these issues, and understand the importance of strong internal controls and quality assurance checks. Targeted training and technical assistance do not require additional funding or resources and are therefore not cost prohibitive.

Most of AmeriCorps improper payments fall into the Insufficient Documentation to Determine category, specifically due to non-compliant National Service Criminal History Checks (NSCHC). In FY 2019, Over 67% of the improper payments in the insufficient documentation category had a non-compliant NSCHC. AmeriCorps has extensively invested in addressing this root cause by reducing the barriers to compliance by offering an optional NSCHC vendor check solution implemented in FY 2019-2020. This solution led to a significant reduction in AmeriCorps' improper payment rates in FY 2020.

AmeriCorps continues to encourage the use of the NSCHC vendor solution. Additional ongoing actions include an updated disallowance policy for NSCHC non-compliance that results in more significant financial consequences for non-compliance. Additionally, if NSCHC non-compliance is found, grantees are required to use the vendor solution for rechecks and for all future checks under the grant award. Grant suspension or termination can occur if there is systemic non-compliance. AmeriCorps is also in progress of updating regulations to require consistent NSCHC requirements for all national service participants. AmeriCorps revised NSCHC policies and procedures and continued training and technical assistance are attainable with the agency's current level of funding and are not cost prohibitive.

Question 8: Tolerable Rate

Do you believe the program has reached a tolerable rate of improper payments?

ANSWER:

Indicate Yes or No
NO

Question 8 Free Text: Tolerable Rate

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: The rate will not be considered tolerable until it is under both \$10M and 10%. AmeriCorps continues to work towards achieving those thresholds.

Question 9: Internal Controls, Human Capital, Information Systems and other Infrastructure and Program Needs (PIIA Section: 3352(d) (2) (A) through (C)3352(d) (3))

Does the program have the internal controls, human capital, and information systems and other infrastructure it needs to reduce IPs to the levels the agency has targeted? Please indicate additional program needs to reduce IPs to the levels the program has targeted.

ANSWER:

Indicate 'yes' or 'no'	Indicate program needs
YES	5. Other: Explain

Question 9 Free Text: Internal Controls, Human Capital, Information Systems and other Infrastructure and Program Needs (PIIA Section: 3352(d) (2) (A) through (C)3352(d) (3))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Please not 5. "Other" was selected because N/A was not an option.

AmeriCorps has the internal controls, human capital, information systems and other infrastructure to reduce its improper payments to the level the agency has targeted. The agency has focused its efforts for improper payment reduction on reducing a primary barrier to compliance – National Service Criminal History Check. As anticipated, AmeriCorps’ implementation of its vendor has resulted in a significant reduction in the agency’s improper payment rates. The continued use of the vendor along with additional changes in National Service Criminal History Checks and the National Service Criminal History Check Guide to Enforcement Action will serve as resources to further reduce the agency’s improper payment rates.

Question 10: Corrective Actions Taken (PIIA Section: 3352(d) (1))

Please indicate which corrective action(s) the program HAS TAKEN to prevent improper payments.

ANSWER:

Indicate identified root cause	Indicate corrective action(s) taken	Select the actual completion date for action(s) taken	If other completion date, please indicate
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)	FY2020 Q3	
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)	FY2020 Q3	
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)	FY2019 Q4	

Question 10 Free Text: Corrective Actions Taken (PIIA Section: 3352(d) (1))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Administrative errors are payments that grantees made that were unallowable, improperly coded to the grant, outside the period of performance, or errors that led to an overpayment or underpayment. AmeriCorps corrective actions focused on training and technical assistance to ensure grantees are aware these issues are occurring, have access to the information needed to correct these issues, and understand the importance of strong internal controls and quality assurance checks. In FY 2019 Q4 AmeriCorps shared detailed findings with applicable program and grants offices to ensure these for awareness and potential remediation. AmeriCorps also covers financial management and grant management in on-going routine trainings such symposiums, regional trainings, and virtual trainings available on CNCS’s online platform for grantees. In FY 2020 Q2, AmeriCorps required payment integrity training for grantees selected for improper payment testing and highlighted common types of administrative errors. The agency also established new policy and training positions to provide consistent guidance to regional offices and grantees.

Improper payments under Insufficient Documentation to Determine are payments that have insufficient supporting documentation such as missing or inadequate administrative documents, timesheets, eligibility forms, etc. to verify the accuracy of the payment. These also include payments where grantees did not perform all the required components of the NSCHC on national service participants and staff prior to the date of the tested payment or there are missing or inadequate NSCHC components. To address other issues with insignificant documentation to determine, in FY 2020 Q1, AmeriCorps updated its communications to grantees to make them clearer and more prescriptive about documentation requirements. In FY 2020 Q2, AmeriCorps updated its improper training resources to stress the

documentation needed to successfully complete an improper payment review. Two virtual trainings each were provided internally to staff and externally to grantees.

To address payments with a root cause of Insufficient Documentation to Determine due to NSCHC, AmeriCorps reduced the barriers to NSCHC compliance with the implementation of its vendor solutions which allow grantees access to all required components of a compliant check. Though the Exemption Recheck Period was optional, over 85 percent of grantees selected for testing chose to use the vendors resulting in a substantial decrease in improper payments within each of the four susceptible programs. In FY 2019 Q4, to further encourage use of the vendors, AmeriCorps employed the National Service Criminal History Check Guide to Enforcement Action, which requires grantees to use the vendors for rechecks and criminal history checks moving forward if NSCHC non-compliance is found.

Please note the last quarter training was conducted was selected rather than listing all quarters.

Question 11: Corrective Actions to be Taken (PIIA Section: 3352(d) (1))

Please indicate which corrective action(s) the program WILL TAKE to prevent improper payments.

ANSWER:

Indicate identified root cause	Indicate planned corrective action(s)	Select the planned completion date for action(s) program will take	Other planned completion date
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)	FY2021	
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)	FY2021	
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)	FY2021	

Question 11 Free Text: Corrective Actions to be Taken (PIIA Section: 3352(d) (1))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: AmeriCorps expects to complete its corrective actions in FY 2021. The agency will continue to conduct regular trainings on financial and grant management that can address administrative errors and improper payments stemming from inadequate record keeping, which is classified as insufficient documentation to determine. AmeriCorps will continue to share detailed findings with regional offices and program leadership to ensure regular visibility into common issues found during payment integrity

testing. Grantees selected for payment integrity testing will be required to access live or recorded trainings that explain proper documentation standards to ensure a successful assessment.

AmeriCorps will continue to implement and enforce its new policies and procedures to address NSCHC non-compliance with insufficient documentation to determine, which has historically been the bulk of AmeriCorps’ improper payments. Grantee use of AmeriCorps NSCHC vendor solutions has significantly reduced AmeriCorps’ improper payment rates. AmeriCorps will focus its corrective actions on encouraging use of the vendors, specifically via the National Service Criminal History Check Guide to Enforcement Action. If NSCHC non-compliance is found, grantees are required to use the vendors for rechecks and NSCHC for the remainder of the grant period. Potential grant suspension or termination can occur if there is systemic non-compliance. Additionally, AmeriCorps is in progress of updating regulations to require consistent NSCHC requirements for all national service participants which would simplify the NSCHC process and reduce barriers toward a compliant check. This regulation change is expected to be enacted in 2021.

In FY 2020 Q3, the Office of Monitoring began its monitoring plan which establishes a holistic framework to monitor and identify potential improper payments in grantee portfolios. The agency has integrated improper payment results and NSCHC non-compliance into its grantee risk assessment which informs grantee monitoring plans. Additionally, agency offices can make monitoring referrals when non-compliance is found in daily operations. These new reporting structures can identify and prevent future improper payments. The effects of AmeriCorps new monitoring structure and grantee risk assessment are expected to be seen in FY 2022.

Question 12: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Please indicate which of the six (6) criteria (if any) were determined to be non-compliant in the most recent IG compliance review.

ANSWER:

Indicate compliant or non-compliant	Compliance criteria
Compliant	1. Publish an AFR or PAR
Compliant	2. Conduct Program-Specific Risk Assessment
Non-Compliant	3. Publish Improper Payment Estimates
Compliant	4. Publish Programmatic Corrective Action Plans
Non-Compliant	5. Publish and Meet Annual Reduction Targets
Non-Compliant	6. Report a gross Improper Payment Rate of Less than 10%

Question 12 Free Text: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Regarding Compliance Criteria 3 “Publish Improper Payment Estimates,” while this criterion was deemed to be non-compliant, AmeriCorps did not concur with the audit finding and affirms the reported FY 2019 improper payment rates were complete, accurate and valid. AmeriCorps followed the longstanding sampling methodology prepared by its statisticians, who asserted the rate was statistically valid.

Regarding Compliance Criteria 5 “Publish and Meet Annual Reduction Targets” AmeriCorps concurred with the non-compliant determination. In FY 2020, AmeriCorps was able to meet the published targets for all four susceptible programs.

Regarding Compliance Criteria 6 “Report a Gross Improper Rate of Less than 10%,” AmeriCorps concurred with this non-compliance finding. In FY 2020, while the agency was not able to report a gross improper payment rate of less than 10% in all programs deemed susceptible to significant improper payments, AmeriCorps was successful in reducing its gross improper rates from FY 2019 for all four susceptible programs. AmeriCorps will continue its progress by assessing the effectiveness of past corrective actions and identifying potential future corrective actions.

Question 13: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Please indicate how many consecutive years this program was deemed non-compliant as of the most recent IG compliance review (regardless of which of the six (6) criteria were determined non-compliant).

ANSWER:

Indicate consecutive years
8

Question 13 Free Text: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: For eight (8) consecutive years, beginning in FY 2012, AmeriCorps has been deemed non-compliant with the Office of the Inspector General’s Compliance review. Over the past several years, AmeriCorps has made considerable efforts to refine its improper payment process to come into compliance. Through the improper payment assessment, the agency has obtained data regarding its largest programs allowing AmeriCorps to identify the root cause of non-compliance trends and initiate extensive, agency-wide corrective actions to address the primary driver of improper payments – National Service Criminal History Checks. Moreover, AmeriCorps has dedicated significant financial and staffing resources to its process. These process improvements have resulted in considerable reductions in improper

payments as demonstrated in this year’s FY 2020 improper payments testing results. AmeriCorps will continue to refine and invest in the improper payment assessment as it strives to come into full compliance.

Question 14: Bringing the program into compliance (PIIA Section: 3353(b) (5))

If deemed to be non-compliant in the most recent fiscal year, please briefly describe the plan the executive agency will take to bring the program into compliance.

ANSWER:

Indicate root cause	Indicate planned corrective actions
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)

Question 14 Free Text: Bringing the program into compliance (PIIA Section: 3353(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: AmeriCorps’ Improper Payments Program was found to be noncompliant in three out of the six criteria from the most recent Inspector General (IG) Compliance review: Publish Improper Payment Estimates, Publish and Meet Annual Reduction Targets, and Report a gross Improper Payment Rate of Less than 10%. The non-compliant findings stem from the agency’s susceptible programs only. There are no non-compliant findings related to any program or activity that has not been deemed susceptible to significant improper payments.

AmeriCorps is committed to continuous improvement in its improper payment testing process. To ensure the accuracy of AmeriCorps improper payment estimates, the agency will continue to consistently follow its testing and sampling methodology, require all reviewers and supervisors to take updated training to ensure consistent and accurate testing, and continue to implement effective quality control of testing determinations and documentation.

All of AmeriCorps’ improper payments in its four susceptible programs are made by grant recipients. To make agency progress on meeting applicable improper payment reduction targets and lowering the improper payment rate to less than 10%, AmeriCorps will continue to focus on encouraging and, in some cases, requiring the NSCHC vendor solution. This solution reduces the barrier for NSCHC compliance for grantees and has shown to significantly reduce the improper payment rates in FY 2020 testing.

AmeriCorps will also encourage the use of the vendor through the National Service Criminal History Check Guide to Enforcement Action. If NSCHC non-compliance is found, grantees are required to use the vendors for rechecks and NSCHC moving forward. Potential grant suspension or termination can occur if there is systemic non-compliance. Additionally, AmeriCorps is in progress of updating regulations to require consistent NSCHC requirements for all national service participants which would simplify the NSCHC process and reduce barriers toward a compliant check.

To reduce administrative errors and missing documentation, AmeriCorps will continue to share its findings from the improper payment assessment to appropriate staff to ensure these topics are covered in regular training and technical assistance.

Question 15: Creating accountability to achieve compliance (PIIA Section: 3353(b) (1) (B))

For any program or activity deemed to be non-compliant in the most recent fiscal year please briefly describe and identify the following:

- *The measurable milestones to be accomplished*
- *The senior executive agency official responsible*
- *Establishment of an accountability mechanism*
- *Incentives*
- *Consequences*

ANSWER:

Measurable milestones	Target Date	If other date, please specify	Senior Executive Agency Official	Accountability Mechanism	Incentives	Consequences
Present and report compliance efforts, issues identified in routine monitoring and payment integrity testing, and planned actions at least biannually to CEO	FY2021		CEO, CRO, AmeriCorps Senior Director, AmeriCorps Director	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal
Report compliance efforts to Risk Management Council quarterly	FY2021		CRO	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal
Provide annual payment integrity	FY2021		CRO	Adherence will be discussed in	Adherence will be	Adherence will be discussed in

Measurable milestones	Target Date	If other date, please specify	Senior Executive Agency Official	Accountability Mechanism	Incentives	Consequences
results, root causes, and issues to program directors				performance appraisal	discussed in performance appraisal	performance appraisal
Develop corrective actions including, but not limited to, identifying training or correspondence required to address frequent causes of found improper payments in monitoring and payment integrity testing	FY2021		AmeriCorps Senior Director, AmeriCorps Director	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal

Question 15 Free Text: Creating accountability to achieve compliance (PIIA Section: 3353(b) (1) (B))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Accountable officials will continue to report efforts towards compliance to the CEO at minimum, biannually. Additional reporting on efforts toward compliance will be reported to the Risk Management Council quarterly. The CRO will present individual and aggregate findings to program accountable officials in the form of an interactive dashboard to the accountable officials responsible for the rates within the programs they head. Additional actions will be required from the program accountable officials on how the findings will be addressed to proactively address deficiencies in understanding within the grant portfolios. All milestones will be a subject of discussion within performance appraisals for the Senior Accountable Officials.

Question 16: Do Not Pay Initiative (PIIA Section: 3354(b) (5))

Please indicate whether the program uses the DNP (yes/no) and whether the Do Not Pay Initiative has reduced/prevented improper payments (yes/no). Additionally, please provide the frequency of corrections (week/month range) or identification of incorrect information (range of false hits?).

ANSWER:

Does the program use the Do Not Pay Initiative (DNP) (yes/no)	Has the DNP reduced/prevented improper payments (yes/no)	How frequently are corrections made?	How frequently is incorrect information identified?
NO	N/A	Annually	Annually

Question 16 Free Text: Do Not Pay Initiative (PIIA Section: 3354(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Please not the "how frequently are corrections made" and "how frequently is incorrect information identified" required a selection but are not applicable because DNP is not used.

AmeriCorps’ susceptible programs are not administered at the federal level and the grantees making the payments do not have access to the DNP databases. It is not used to reduce or prevent improper payments at the grantee individual payment level, which is the basis for AmeriCorps’ payment integrity testing. AmeriCorps does utilize systems such as the System for Award Management prior to award to ensure the grantee organizations and the authorized officials are eligible to receive federal funding.

AmeriCorps

Question 1: Annual Performance Appraisal Criteria (PIIA Section: 3352(d) (5) (A) and (B))

Please describe the steps the program has taken and plans to take (including timeline) to ensure that agency managers (including the agency head), accountable officers, program official/owner, and States and localities (where appropriate) are held accountable for reducing and recapturing IPs through annual performance appraisal criteria for each of the following:

- Meeting applicable improper payments reduction targets;
- Preventing improper payments from being made; and
- Promptly detecting and recovering improper payments that are made.

ANSWER:

Performance Appraisal Criteria
meeting applicable improper payments reduction targets
prevent improper payments from being made
promptly detect and recover improper payments that are made

Question 1 Free Text: Annual Performance Appraisal Criteria (PIIA Section: 3352(d) (5) (A) and (B))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: The accountable officials at AmeriCorps include the Chief Executive Officer (CEO), the Chief Risk Officer (CRO), the Director of AmeriCorps State and National and the Director of AmeriCorps Seniors. The CEO is ultimately responsible for agency compliance, while the CRO is responsible for compliance with the improper payments audit, and the program directors are responsible for rates within the programs they head. These accountable officials collaborate by reporting to the CEO on progress at least biannually on achieving compliance goals and by requiring reporting on progress towards core business improvement, which includes a remediation effort for the largest cause of AmeriCorps' improper payments.

In FY 2019-2020, to make significant agency progress on meeting applicable improper payment reduction targets and preventing improper payments, the accountable officials focused on implementing the agency's National Service Criminal History Check (NSCHC) vendor solution. This solution reduced the barrier for NSCHC compliance for grantees. In FY 2021, the agency and accountable officials will assess the efficacy of the vendor solution based upon FY20 payment integrity and routine monitoring results. Additional actions that will be taken include mandatory vendor participation for grantees found to have files out of compliance with NSCHC requirements and potential grant suspension or termination if there is systemic non-compliance. AmeriCorps is also in progress of updating regulations to clarify the criminal history check requirements for all national service participants. This regulation update would further reduce barriers through simplified and straight-forward requirements. AmeriCorps will continue to refer found improper payments during its annual assessment for recovery.

The four susceptible programs at AmeriCorps are administrated by grantees and AmeriCorps does not directly disburse the funds that are being assessed for improper payments. They are made by individual organizations. The agency's payment integrity process reviews individual payments for compliance with statute and regulation. To better detect additional improper payments within the grantee portfolio, the agency is in the process of including improper payment results into its real-time grantee risk assessment, and is implementing a process where the different functions throughout the agency can make monitoring referrals for any issues arising in day-to-day operations. These referrals could lead to monitoring results, but, at minimum, will be included in the grantee risk assessment. These additional reporting structures can lead to additional visibility into grantees with compliance issues resulting in improper payments and recovery of funds.

Question 7: Improper Payment Rate Reduction (PIIA Section: 3352(d) (2))

Please indicate whether lowering the improper payment rate beyond the current level would be cost prohibitive because applying additional mitigation strategies or corrective actions for improper payment prevention would cost more to implement than the amount that would be saved.

ANSWER:

Cost Prohibitive (Yes/No)	Indicate Root Cause if known	Indicate which corrective action
NO	11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)
NO	13. Insufficient Documentation to Determine	3-Training (how to complete contracts)
NO	13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)

Question 7 Free Text: Improper Payment Rate Reduction (PIIA Section: 3352(d) (2))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: The following is applicable to all four susceptible programs at AmeriCorps – AmeriCorps State and National, Foster Grandparent Program (FGP), RSVP, and Senior Companion Program (SCP). The improper payments and root causes are the same.

None of AmeriCorps’ mitigation strategies or corrective actions are cost prohibitive. AmeriCorps improper payments fall into two categories, Administrative or Process Errors Made by Other Party and Insufficient Documentation to Determine.

Administrative errors occur when AmeriCorps finds errors in grantee payment calculations, when unallowable charges are coded to the grant, and when errors were found and corrected. To lower improper payments due to administrative error, the results of the payment integrity process are shared with program leadership stakeholders for awareness into the identified issues. Corrective actions have and will continue to focus on ensuring grantees are aware these issues are occurring, have access to the information needed to correct these issues, and understand the importance of strong internal controls and quality assurance checks. Targeted training and technical assistance do not require additional funding or resources and are therefore not cost prohibitive.

Most of AmeriCorps improper payments fall into the Insufficient Documentation to Determine category, specifically due to non-compliant National Service Criminal History Checks (NSCHC). In FY 2019, Over

67% of the improper payments in the insufficient documentation category had a non-compliant NSCHC. AmeriCorps has extensively invested in addressing this root cause by reducing the barriers to compliance by offering an optional NSCHC vendor check solution implemented in FY 2019-2020. This solution led to a significant reduction in AmeriCorps' improper payment rates in FY 2020.

AmeriCorps continues to encourage the use of the NSCHC vendor solution. Additional ongoing actions include an updated disallowance policy for NSCHC non-compliance that results in more significant financial consequences for non-compliance. Additionally, if NSCHC non-compliance is found, grantees are required to use the vendor solution for rechecks and for all future checks under the grant award. Grant suspension or termination can occur if there is systemic non-compliance. AmeriCorps is also in progress of updating regulations to require consistent NSCHC requirements for all national service participants. AmeriCorps revised NSCHC policies and procedures and continued training and technical assistance are attainable with the agency's current level of funding and are not cost prohibitive.

Question 8: Tolerable Rate

Do you believe the program has reached a tolerable rate of improper payments?

ANSWER:

Indicate Yes or No
NO

Question 8 Free Text: Tolerable Rate

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: The rate will not be considered tolerable until it is under both \$10M and 10%. AmeriCorps continues to work towards achieving those thresholds.

Question 9: Internal Controls, Human Capital, Information Systems and other Infrastructure and Program Needs (PIIA Section: 3352(d) (2) (A) through (C)3352(d) (3))

Does the program have the internal controls, human capital, and information systems and other infrastructure it needs to reduce IPs to the levels the agency has targeted? Please indicate additional program needs to reduce IPs to the levels the program has targeted.

ANSWER:

Indicate 'yes' or 'no'	Indicate program needs
YES	5. Other: Explain

Question 9 Free Text: Internal Controls, Human Capital, Information Systems and other Infrastructure and Program Needs (PIIA Section: 3352(d) (2) (A) through (C)3352(d) (3))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Please not 5. "Other" was selected because N/A was not an option.

AmeriCorps has the internal controls, human capital, information systems and other infrastructure to reduce its improper payments to the level the agency has targeted. The agency has focused its efforts for improper payment reduction on reducing a primary barrier to compliance – National Service Criminal History Check. As anticipated, AmeriCorps’ implementation of its vendor has resulted in a significant reduction in the agency’s improper payment rates. The continued use of the vendor along with additional changes in National Service Criminal History Checks and the National Service Criminal History Check Guide to Enforcement Action will serve as resources to further reduce the agency’s improper payment rates.

Question 10: Corrective Actions Taken (PIIA Section: 3352(d) (1))

Please indicate which corrective action(s) the program HAS TAKEN to prevent improper payments.

ANSWER:

Indicate identified root cause	Indicate corrective action(s) taken	Select the actual completion date for action(s) taken	If other completion date, please indicate
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)	FY2019 Q4	
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)	FY2020 Q3	
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)	FY2020 Q3	

Question 10 Free Text: Corrective Actions Taken (PIIA Section: 3352(d) (1))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Administrative errors are payments that grantees made that were unallowable, improperly coded to the grant, outside the period of performance, or errors that led to an overpayment or underpayment. AmeriCorps corrective actions focused on training and technical assistance to ensure grantees are aware these issues are occurring, have access to the information needed to correct these

issues, and understand the importance of strong internal controls and quality assurance checks. In FY 2019 Q4 AmeriCorps shared detailed findings with applicable program and grants offices to ensure these for awareness and potential remediation. AmeriCorps also covers financial management and grant management in on-going routine trainings such symposiums, regional trainings, and virtual trainings available on CNCS's online platform for grantees. In FY 2020 Q2, AmeriCorps required payment integrity training for grantees selected for improper payment testing and highlighted common types of administrative errors. The agency also established new policy and training positions to provide consistent guidance to regional offices and grantees.

Improper payments under Insufficient Documentation to Determine are payments that have insufficient supporting documentation such as missing or inadequate administrative documents, timesheets, eligibility forms, etc. to verify the accuracy of the payment. These also include payments where grantees did not perform all the required components of the NSCHC on national service participants and staff prior to the date of the tested payment or there are missing or inadequate NSCHC components. To address other issues with insignificant documentation to determine, in FY 2020 Q1, AmeriCorps updated its communications to grantees to make them clearer and more prescriptive about documentation requirements. In FY 2020 Q2, AmeriCorps updated its improper training resources to stress the documentation needed to successfully complete an improper payment review. Two virtual trainings each were provided internally to staff and externally to grantees.

To address payments with a root cause of Insufficient Documentation to Determine due to NSCHC, AmeriCorps reduced the barriers to NSCHC compliance with the implementation of its vendor solutions which allow grantees access to all required components of a compliant check. Though the Exemption Recheck Period was optional, over 85 percent of grantees selected for testing chose to use the vendors resulting in a substantial decrease in improper payments within each of the four susceptible programs. In FY 2019 Q4, to further encourage use of the vendors, AmeriCorps employed the National Service Criminal History Check Guide to Enforcement Action, which requires grantees to use the vendors for rechecks and criminal history checks moving forward if NSCHC non-compliance is found.

Please note the last quarter training was conducted was selected rather than listing all quarters.

Question 11: Corrective Actions to be Taken (PIIA Section: 3352(d) (1))

Please indicate which corrective action(s) the program WILL TAKE to prevent improper payments.

ANSWER:

Indicate identified root cause	Indicate planned corrective action(s)	Select the planned completion date for action(s) program will take	Other planned completion date
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)	FY2021	
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)	FY2021	
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)	FY2021	

Question 11 Free Text: Corrective Actions to be Taken (PIIA Section: 3352(d) (1))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: AmeriCorps expects to complete its corrective actions in FY 2021. The agency will continue to conduct regular trainings on financial and grant management that can address administrative errors and improper payments stemming from inadequate record keeping, which is classified as insufficient documentation to determine. AmeriCorps will continue to share detailed findings with regional offices and program leadership to ensure regular visibility into common issues found during payment integrity testing. Grantees selected for payment integrity testing will be required to access live or recorded trainings that explain proper documentation standards to ensure a successful assessment.

AmeriCorps will continue to implement and enforce its new policies and procedures to address NSCHC non-compliance with insufficient documentation to determine, which has historically been the bulk of AmeriCorps’ improper payments. Grantee use of AmeriCorps NSCHC vendor solutions has significantly reduced AmeriCorps’ improper payment rates. AmeriCorps will focus its corrective actions on encouraging use of the vendors, specifically via the National Service Criminal History Check Guide to Enforcement Action. If NSCHC non-compliance is found, grantees are required to use the vendors for rechecks and NSCHC for the remainder of the grant period. Potential grant suspension or termination can occur if there is systemic non-compliance. Additionally, AmeriCorps is in progress of updating regulations to require consistent NSCHC requirements for all national service participants which would simplify the NSCHC process and reduce barriers toward a compliant check. This regulation change is expected to be enacted in 2021.

In FY 2020 Q3, the Office of Monitoring began its monitoring plan which establishes a holistic framework to monitor and identify potential improper payments in grantee portfolios. The agency has integrated improper payment results and NSCHC non-compliance into its grantee risk assessment which informs grantee monitoring plans. Additionally, agency offices can make monitoring referrals when non-compliance is found in daily operations. These new reporting structures can identify and prevent future improper payments. The effects of AmeriCorps new monitoring structure and grantee risk assessment are expected to be seen in FY 2022.

Question 12: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Please indicate which of the six (6) criteria (if any) were determined to be non-compliant in the most recent IG compliance review.

ANSWER:

Indicate compliant or non-compliant	Compliance criteria
Compliant	1. Publish an AFR or PAR
Compliant	2. Conduct Program-Specific Risk Assessment
Non-Compliant	3. Publish Improper Payment Estimates
Compliant	4. Publish Programmatic Corrective Action Plans
Non-Compliant	5. Publish and Meet Annual Reduction Targets
Non-Compliant	6. Report a gross Improper Payment Rate of Less than 10%

Question 12 Free Text: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Regarding Compliance Criteria 3 “Publish Improper Payment Estimates,” while this criterion was deemed to be non-compliant, AmeriCorps did not concur with the audit finding and affirms the reported FY 2019 improper payment rates were complete, accurate and valid. AmeriCorps followed the longstanding sampling methodology prepared by its statisticians, who asserted the rate was statistically valid.

Regarding Compliance Criteria 5 “Publish and Meet Annual Reduction Targets” AmeriCorps concurred with the non-compliant determination. In FY 2020, AmeriCorps was able to meet the published targets for all four susceptible programs.

Regarding Compliance Criteria 6 “Report a Gross Improper Rate of Less than 10%,” AmeriCorps concurred with this non-compliance finding. In FY 2020, while the agency was not able to report a gross improper payment rate of less than 10% in all programs deemed susceptible to significant improper payments, AmeriCorps was successful in reducing its gross improper rates from FY 2019 for all four susceptible programs. AmeriCorps will continue its progress by assessing the effectiveness of past corrective actions and identifying potential future corrective actions.

Question 13: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Please indicate how many consecutive years this program was deemed non-compliant as of the most recent IG compliance review (regardless of which of the six (6) criteria were determined non-compliant).

ANSWER:

Indicate consecutive years
8

Question 13 Free Text: Inspector General Compliance (PIIA Section: 3352(f) (2) (A) and (B); 3353(b) (1) (A); 3353(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: For eight (8) consecutive years, beginning in FY 2012, AmeriCorps has been deemed non-compliant with the Office of the Inspector General’s Compliance review. Over the past several years, AmeriCorps has made considerable efforts to refine its improper payment process to come into compliance. Through the improper payment assessment, the agency has obtained data regarding its largest programs allowing AmeriCorps to identify the root cause of non-compliance trends and initiate extensive, agency-wide corrective actions to address the primary driver of improper payments – National Service Criminal History Checks. Moreover, AmeriCorps has dedicated significant financial and staffing resources to its process. These process improvements have resulted in considerable reductions in improper payments as demonstrated in this year’s FY 2020 improper payments testing results. AmeriCorps will continue to refine and invest in the improper payment assessment as it strives to come into full compliance.

Question 14: Bringing the program into compliance (PIIA Section: 3353(b) (5))

If deemed to be non-compliant in the most recent fiscal year, please briefly describe the plan the executive agency will take to bring the program into compliance.

ANSWER:

Indicate root cause	Indicate planned corrective actions
11. Administrative or Process Errors Made by: Other Party (e.g., participating lender, health care provider, or any other organization administering Federal dollars)	3-Training (how to complete contracts)
13. Insufficient Documentation to Determine	3-Training (how to complete contracts)
13. Insufficient Documentation to Determine	4-Change Process (instructions, checklist, policy)

**Question 14 Free Text: Bringing the program into compliance (PIIA Section: 3353(b)
(5))**

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: AmeriCorps' Improper Payments Program was found to be noncompliant in three out of the six criteria from the most recent Inspector General (IG) Compliance review: Publish Improper Payment Estimates, Publish and Meet Annual Reduction Targets, and Report a gross Improper Payment Rate of Less than 10%. The non-compliant findings stem from the agency's susceptible programs only. There are no non-compliant findings related to any program or activity that has not been deemed susceptible to significant improper payments.

AmeriCorps is committed to continuous improvement in its improper payment testing process. To ensure the accuracy of AmeriCorps improper payment estimates, the agency will continue to consistently follow its testing and sampling methodology, require all reviewers and supervisors to take updated training to ensure consistent and accurate testing, and continue to implement effective quality control of testing determinations and documentation.

All of AmeriCorps' improper payments in its four susceptible programs are made by grant recipients. To make agency progress on meeting applicable improper payment reduction targets and lowering the improper payment rate to less than 10%, AmeriCorps will continue to focus on encouraging and, in some cases, requiring the NSCHC vendor solution. This solution reduces the barrier for NSCHC compliance for grantees and has shown to significantly reduce the improper payment rates in FY 2020 testing. AmeriCorps will also encourage the use of the vendor through the National Service Criminal History Check Guide to Enforcement Action. If NSCHC non-compliance is found, grantees are required to use the vendors for rechecks and NSCHC moving forward. Potential grant suspension or termination can occur if there is systemic non-compliance. Additionally, AmeriCorps is in progress of updating regulations to require consistent NSCHC requirements for all national service participants which would simplify the NSCHC process and reduce barriers toward a compliant check.

To reduce administrative errors and missing documentation, AmeriCorps will continue to share its findings from the improper payment assessment to appropriate staff to ensure these topics are covered in regular training and technical assistance.

Question 15: Creating accountability to achieve compliance (PIIA Section: 3353(b) (1) (B))

For any program or activity deemed to be non-compliant in the most recent fiscal year please briefly describe and identify the following:

- The measurable milestones to be accomplished
- The senior executive agency official responsible
- Establishment of an accountability mechanism
- Incentives
- Consequences

ANSWER:

Measurable milestones	Target Date	If other date, please specify	Senior Executive Agency Official	Accountability Mechanism	Incentives	Consequences
Present and Report compliance efforts, issues, identified in routine monitoring and payment integrity testing, and planned corrective actions at least biannually to the CEO.	FY2021		CEO, CRO, AmeriCorps Director, AmeriCorps Seniors Director	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal
Report compliance efforts to Risk Management Council Quarterly	FY2021		CRO	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal
Provide annual payment integrity results, root causes, and issues to program directors	FY2021		CRO	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal
Develop corrective actions including, but not limited to, identifying training or correspondence	FY2021		AmeriCorps Seniors Director, AmeriCorps Director	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal	Adherence will be discussed in performance appraisal

Measurable milestones	Target Date	If other date, please specify	Senior Executive Agency Official	Accountability Mechanism	Incentives	Consequences
required to address frequent causes of found improper payments in monitoring and payment integrity testing						

Question 15 Free Text: Creating accountability to achieve compliance (PIIA Section: 3353(b) (1) (B))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Accountable officials will continue to report efforts towards compliance to the CEO at minimum, biannually. Additional reporting on efforts toward compliance will be reported to the Risk Management Council quarterly. The CRO will present individual and aggregate findings to program accountable officials in the form of an interactive dashboard to the accountable officials responsible for the rates within the programs they head. Additional actions will be required from the program accountable officials on how the findings will be addressed to proactively address deficiencies in understanding within the grant portfolios. All milestones will be a subject of discussion within performance appraisals for the Senior Accountable Officials.

Question 16: Do Not Pay Initiative (PIIA Section: 3354(b) (5))

Please indicate whether the program uses the DNP (yes/no) and whether the Do Not Pay Initiative has reduced/prevented improper payments (yes/no). Additionally, please provide the frequency of corrections (week/month range) or identification of incorrect information (range of false hits?).

ANSWER:

Does the program use the Do Not Pay Initiative (DNP) (yes/no)	Has the DNP reduced/prevented improper payments (yes/no)	How frequently are corrections made?	How frequently is incorrect information identified?
NO	N/A	Annually	Annually

Question 16 Free Text: Do Not Pay Initiative (PIIA Section: 3354(b) (5))

Based on your selection(s) above, provide additional information below. Please note there is a 3000 character limit.

ANSWER: Please not the "how frequently are corrections made" and "how frequently is incorrect information identified" required a selection but are not applicable because DNP is not used.

AmeriCorps' susceptible programs are not administered at the federal level and the grantees making the payments do not have access to the DNP databases. It is not used to reduce or prevent improper payments at the grantee individual payment level, which is the basis for AmeriCorps' payment integrity testing. AmeriCorps does utilize systems such as the System for Award Management prior to award to ensure the grantee organizations and the authorized officials are eligible to receive federal funding.