PHEAA PROGRAM REVIEW

James Snyder, Manager
Institution Compliance & Eligibility
PHEAA
PROGRAM REVIEW-WHAT NOW

- BEFORE
- DURING
- AFTER
PROGRAM REVIEW-BACKGROUND

THE HISTORY OF PROGRAM REVIEWS
PROGRAM REVIEW- WHY

1. TO VERIFY THAT SCHOOLS ARE MANAGING PROGRAMS
2. TO VERIFY, SUPPORT AND PRESERVE TAXPAYERS FUNDING
3. TO ASSIST WITH INTERACTION BETWEEN PHEAA AND THE INSTITUTIONS
PROGRAM REVIEW - WHY

TYPES OF REVIEWS

- Routine Program Review
- Follow Up Review
- Probationary Review
- Unannounced Audit
- Closing Review
PROGRAM REVIEW- TYPE

COMPLETED ON A TWO YEAR CYCLE

Reviews student accounts to verify State Grant and Special Programs are awarded and recorded correctly.
Completed the following year after a Routine Review produces an outcome of an Error Rate of 4.1% to 8.9%

The 2016-17 Award Year introduces administrative findings that would produce follow up or probationary reviews.
• Completed after 2 consecutive reviews produce an Error Rate higher than 8.9%.

The 2016-17 Award Year introduces administrative findings that would produce follow up or probationary reviews.
PROGRAM REVIEW- TYPE

AUDIT

UNANNOUNCED

COMPLETED WHEN FRAUD IS SUSPECTED OR REPORTED
Conducted when an institution ceases operation.

Special procedures apply – all students files are reviewed and may require two award years.

**ATTEMPT TO SCHEDULE WITHIN THE LAST WEEK OF CLASSES OR WITHIN 30 DAYS OF LAST STUDENT ATTENDANCE.**
PROGRAM REVIEW-UNDER REVIEW

- PENNSYLVANIA STATE GRANT
- STATE GRANT DISTANCE EDUCATION PILOT PROGRAM (SGDEPP)
- READY TO SUCCEED SCHOLARSHIP (RTSS)
- PARTNERSHIP FOR ACCESS TO HIGHER EDUCATION (PATH)
- PENNSYLVANIA NATIONAL GUARDS EDUCATION ASSISTANCE PROGRAM (EAP)
- BLIND OR DEAF BENEFIT GRANT (BDBG)
- CHAFEE EDUCATION AND TRAINING GRANT (ETG)
- STATE WORK STUDY PROGRAM (SWSP)
PROGRAM REVIEW-UNDER REVIEW

- ACT 101
- PENNSYLVANIA TARGETED INDUSTRY PROGRAM (PA-TIP)
- INSTITUTIONAL ASSISTANCE GRANT (IAG)
- MATCHING FUNDS PROGRAM FEDERAL WORK-STUDY
PROGRAM REVIEW – THE START

THE CALL FROM COMPLIANCE
NOTIFICATION LETTER IS SENT THROUGH EMAIL
PROGRAM REVIEW-BEFORE

- GATHER AND SUBMIT TO YOUR COMPLIANCE COORDINATOR

1. TUITION REFUND POLICY
2. SATISFACTORY ACADEMIC POLICY
3. ALL POLICIES REGARDING ONLINE AND HYBRID COURSES

NOTIFY INDIVIDUALS FROM THE BURSAR AND REGISTRAR OFFICE OF THE DATE FOR THE REVIEW AS A REPRESENTATIVE WILL BE REQUIRED TO ATTEND THE ENTRANCE INTERVIEW
• INFORM THE COMPLIANCE COORDINATOR

1. THE PHYSICAL ADDRESS OF YOUR BUILDING IF DIFFERENT FROM THE MAILING ADDRESS.
2. IF YOUR OFFICES HAVE MOVED SINCE THE LAST REVIEW.
3. IF THERE IS A NEED FOR A PARKING PASS AND WHERE TO PARK.
4. WILL THERE BE AN INTERNET CONNECTION
PROGRAM REVIEW-DURING

THE ENTRANCE INTERVIEW

HAVE A LIST OF NAMES AND PHONE NUMBERS OF THOSE PARTICIPATING IN THE MEETING.

YOU WILL RECEIVE THE STUDENT SAMPLE LISTING

ASK QUESTIONS.
PROGRAM REVIEW- DURING

- Sample of students provided
  - Up to 30 State Grant students and 10 students per Special Program can be sampled
  - Overlapping student eligibility is permissible (ex: State Grant, PATH, and SWSP eligibility)
  - 100% of eligible students provided during Closing Reviews
## PROGRAM REVIEW - DURING

### THE COVERSHEET

<table>
<thead>
<tr>
<th>Program: SO-XX Award Year</th>
<th>Year</th>
<th>QTR 1</th>
<th>Program</th>
<th>Year</th>
<th>QTR 2</th>
<th>Program</th>
<th>Year</th>
<th>QTR 3</th>
<th>Program</th>
<th>Year</th>
<th>QTR 4</th>
<th>Program</th>
<th>Year</th>
<th>QTR 5</th>
</tr>
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<tbody>
<tr>
<td>Tuition</td>
<td>Year</td>
<td>QTR 1</td>
<td>Program</td>
<td>Year</td>
<td>QTR 2</td>
<td>Program</td>
<td>Year</td>
<td>QTR 3</td>
<td>Program</td>
<td>Year</td>
<td>QTR 4</td>
<td>Program</td>
<td>Year</td>
<td>QTR 5</td>
</tr>
<tr>
<td>$18,000.00</td>
<td></td>
<td></td>
<td>Tuition</td>
<td>$6,000.00</td>
<td></td>
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</tr>
<tr>
<td>Cost Override Limit T&amp;F</td>
<td></td>
<td></td>
<td>$13,800.00</td>
<td>$4,800.00</td>
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<td></td>
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<td></td>
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</tr>
<tr>
<td>$22,000 cap: max CO for indep stud w/ T&amp;F &gt; $7,000</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

### Checklist:
- [ ] 1. All students must meet graduation requirements
- [ ] 2. All students must meet financial aid eligibility requirements
- [ ] 3. All students must meet cumulative GPA requirements
- [ ] 4. All students must meet coursework requirements

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**Checklist:**
- [ ] 1. All students must meet graduation requirements
- [ ] 2. All students must meet financial aid eligibility requirements
- [ ] 3. All students must meet cumulative GPA requirements
- [ ] 4. All students must meet coursework requirements

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- [ ] 2. All students must meet financial aid eligibility requirements
- [ ] 3. All students must meet cumulative GPA requirements
- [ ] 4. All students must meet coursework requirements
### Program Review During

#### The Sample Sheet

<table>
<thead>
<tr>
<th>School:</th>
<th>Best University</th>
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<tbody>
<tr>
<td>Review Begin Date:</td>
<td>6/1/2017</td>
</tr>
<tr>
<td>OE Code:</td>
<td>12345678</td>
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<tr>
<td>Academic Year Reviewed:</td>
<td>2015-16</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>SSN</th>
<th>Name</th>
<th>State Grant Recipient</th>
<th>SGDEPP Recipient</th>
<th>RTSS Recipient</th>
<th>PATIP Recipient</th>
<th>EAP Recipient</th>
<th>PATH Recipient</th>
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<tbody>
<tr>
<td>000-00-1234</td>
<td>APPLE, JOE</td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>000-00-2345</td>
<td>BANANA, ANNA</td>
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<td></td>
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<tr>
<td>000-00-3456</td>
<td>CAR, SMALL</td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>000-00-4567</td>
<td>DEAR, ONE</td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>000-00-5678</td>
<td>ERASER, PEN</td>
<td>Y</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>000-00-6789</td>
<td>FLAP, PER</td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>000-00-7890</td>
<td>GAS, GO</td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>000-00-8901</td>
<td>HAPPY, FEET</td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>000-00-0123</td>
<td>ICE, NO MORE</td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>000-00-1123</td>
<td>JAM, GRAPE</td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Data provided on output file:

- Output files based on school participation status
  - Institution-based programs – Allocation, refunds, total dollars disbursed, certification statements, program budgets, program narratives, and total number of students
  - Student-based programs – Term enrollment status, term/total award value, prior award counters, program of study, student-level refunds, remedial counters, evening status, hours worked, and student earnings
PROGRAM REVIEW - DURING

• EXIT INTERVIEW-POINT SHEET

School ___________________________ DE Code ________________
PHEAA Code __________ Date __________ Compliance Coordinator __________

FINDING(S)

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

INITIAL MANAGEMENT RESPONSE

School officials should include appropriate documentation to support their position and/or resolve the Coordinator’s concern.

____________________________________________________________________

The school official’s signature confirms that this information was presented to you by the Compliance Coordinator. Your signature does not necessarily constitute agreement with the finding.

Signature __________ Date __________

Title
PROGRAM REVIEW-AFTER

• WHAT HAPPENS AFTER THE EXIT?
• REVIEW THE CONCERN SHEET AND GATHER INFORMATION.
• THE LETTERS-INITIAL OR NO-ERROR
• INITIAL-MEANS FIRST LETTER AND REQUIRES ADDITIONAL RESPONSE WITHIN 60 DAYS.
  (CHANGING TO 30 DAYS STARTING 9-1-17)
• NO-ERROR-A RESPONSE IS NOT REQUIRED.
THE INITIAL/NO ERROR LETTER IS SENT TO THE PRESIDENT OF THE SCHOOL THROUGH THE U.S. POSTAL SERVICE. COPIES ARE SENT TO THE FINANCIAL AID DIRECTOR, AND INDIVIDUAL/OFFICE GUIDING FINANCIAL AID.
**PROGRAM REVIEW-AFTER**

- WHEN RETURNING FUNDS THAT HAVE BEEN REQUESTED-USE THE REQUIRED FORM AND ALWAYS SUBMIT WITH A RETURN LETTER.

**NOTICE:** FORWARDED THIS FORM WITH APPROPRIATE CHECK ATTACHED.

**SEND TO:** PHEAA, PROGRAM REVIEW/COMPLIANCE, 1200 NORTH SEVENTH STREET, HARRISBURG, PA 17102

**PROGRAM REVIEW REPORT- REFUND(S) DUE PHEAA**

<table>
<thead>
<tr>
<th>NAME OF INSTITUTION:</th>
<th>OE# CODE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The attached refund check in the amount of $_________ dated ________________ is submitted as a refund of State Grant or special programs payment for the following student(s) for the academic term(s) indicated.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME/SS#</th>
<th>TERM(S)/AMOUNT DUE</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

(*) Example: 2015-16 Fall Semester/ $200

**TELEPHONE NUMBER:** ____________________________

**SIGNATURE:** ____________________________

**TITLE:** ____________________________

**AGENCY ACTION**

<table>
<thead>
<tr>
<th>TO</th>
<th>DATE</th>
<th>RECEIVED BY</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comptroller’s Office</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fiscal Service</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grant Division</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

27
<table>
<thead>
<tr>
<th>Issue</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Approved Program</td>
<td>1</td>
</tr>
<tr>
<td>Withdrawal/Drops to less than 50% Classroom Attendance</td>
<td>1</td>
</tr>
<tr>
<td>Not Enrolled at least half time</td>
<td>1</td>
</tr>
<tr>
<td>State Grant credited to incorrect term</td>
<td>1</td>
</tr>
<tr>
<td>Awards not credited to account</td>
<td>2</td>
</tr>
<tr>
<td>Remedial Exception Student not reported</td>
<td>1</td>
</tr>
<tr>
<td>Amount credited disagrees with amount disbursed</td>
<td>2</td>
</tr>
<tr>
<td>Drop/Withdraw to less than half time</td>
<td>2</td>
</tr>
<tr>
<td>Drop/Withdraw to less than full time</td>
<td>1</td>
</tr>
<tr>
<td>Acad. Prog.-Transf Student Documentation</td>
<td>1</td>
</tr>
<tr>
<td>Crediting after withdrawal</td>
<td>1</td>
</tr>
<tr>
<td>Differential Education Costs</td>
<td>5</td>
</tr>
<tr>
<td>Academic Progress-Transfer Student Documentation</td>
<td>2</td>
</tr>
<tr>
<td>Academic Progress</td>
<td>12</td>
</tr>
</tbody>
</table>

Series1
PROGRAM REVIEW

• Once the Compliance Coordinator completes the closing letter to the previous responding school official-the Program Review is considered closed.