

FFY 2021 TIER DEFINITIONS AND CORRECTION REQUIREMENTS**TIER 1 90-99% COMPLIANCE PERCENTAGE**

1. Correct identified child-specific noncompliance (as applicable)
2. Within one (1) month from the date of the findings letter complete and submit:
 - a. The FFY 2021 SPA Analysis of Noncompliance Spreadsheet
 - b. A letter of assurance
3. Optional participation in AzEIP technical assistance
4. Submit 3% (minimum of 2) AzEIP-verified consecutive compliant records (meet IDEA, Part C and AzEIP Policy and Procedure requirements) as soon as possible and no later than one (1) year from the date of the findings letter*

TIER 2 80-89% COMPLIANCE PERCENTAGE

1. Correct identified child-specific noncompliance (as applicable)
2. Within one (1) month from the date of the findings letter complete and submit:
 - a. The FFY 2021 SPA Analysis of Noncompliance Spreadsheet
 - b. A letter of assurance
3. Mandatory participation in AzEIP-identified technical assistance
4. Submit 5% (minimum of 2) AzEIP-verified consecutive compliant records (meet IDEA, Part C and AzEIP Policy and Procedure requirements) as soon as possible and no later than one (1) year from the date of the findings letter*

TIER 3 BELOW 80% COMPLIANCE PERCENTAGE

1. Correction of identified child-specific noncompliance (as applicable)
2. Within one (1) month from the date of the findings letter complete and submit:
 - a. The FFY 2021 SPA Analysis of Noncompliance Spreadsheet
 - b. A letter of assurance
 - c. Corrective Action Plan (CAP) using the information identified in the analysis of noncompliance
3. Mandatory participation in AzEIP-identified technical assistance
4. Submit 10% (minimum of 2) AzEIP-verified consecutive compliant records (meet IDEA, Part C and AzEIP Policy and Procedure requirements) as soon as possible and no later than one (1) year from the date of the findings letter*

*If AzEIP is unable to verify consecutive compliant records submitted by SPA within timelines identified in the FFY 2021 Correction of Noncompliance Guidance, SPA will be required to submit a **Corrective Action Plan (CAP)**.