

**Ways and Means Subcommittee Questions for  
Children, Adults and Families  
February 10, 2005**

**Children Adults and Families**

**Self Sufficiency**

**Temporary Assistance to Needy Families**

**1. KPM 10000-5 for TANF employment placement. Requestor: LFO, Requested: February 4, 2005**

**A. Can data be segregated for different groups, such as “chronic” TANF clients vs. new clients that may be more “work ready”?**

We are unable at this time to stratify data on JOBS placements by client characteristics, but believe the attached information will help describe our client population in general.

**2. Do we have roughly the same number coming into the TANF program that are exiting? Requestor: Representative Richardson, Requested February 7, 2005**

See Exhibit A, B, C, D, E

**3. Please provide a breakdown of how long consumers are on TANF excluding the 36% of TANF consumers that are not eligible for the JOBS program. Requestor: Representative Richardson, Requested: February 7, 2005**

See Exhibit A, B, C, D, E

**4. Before and after downturn: Requestors: Representative Richardson, Senator Winters, and Representative Hansen, Requested: February 7, 2005**

**A. What are the components of Administrative costs by county?**

- Administrative cost/workload
- Employment Rate
- Client Characteristics
- Caseload entry/exit chart
- Caseload/ staffing ratio

See Exhibits F-J

**B. What is the Food Stamp caseload count out of the Processing Center?**

See Exhibits F-J

## Employment Related Day Care

### **5. KPM 10000-8 for childcare provider enhanced rates. Requestor: LFO, Requested: February 4, 2005**

#### **A. What is DHS' role in providing training to providers to get the enhanced rate?**

DHS does not provide childcare provider training. This is primarily the responsibility of Oregon's Child Care Resource and Referral (CCR&R) system. The Employment Department's Child Care Division (CCD) contracts with the Oregon Child Care Resource & Referral Network (OCCRRN) to provide a wide range of services that include provider trainings; these services are offered in all 36 counties in Oregon. CCD funding for the 2003-2006 biennium is 5.7 million, all federally funded.

In addition, DHS contracts with the CCR&R Network to provide enhanced services to DHS JOBS and Employment Related Day Care (ERDC) clients and the providers who participate in the subsidy program. These services augment the regular CCR&R services by tailoring information and assistance to the needs of DHS clients. DHS funding for the 2003-2005 biennium is 1.7 million. 94 percent of this is federally funded. Given the turnover in the JOBS and ERDC programs, these services cost about \$20 per client. Services include:

1. Provider training required to qualify for the DHS Enhanced Rate
2. Recruitment of trained providers for DHS Child Care Programs
3. Technical assistance to providers regarding DHS payment and listing process issues, sponsorship of provider forums and workshops related to the DHS Child Care Programs
4. Assistance to providers who need help meeting DHS health and safety requirements.
5. Enhanced services to DHS clients to help them recognize, find and maintain quality child care

### **6. Number of employers over the past 10 years [or as far back as data are available] who provide oversight training around child care? How does it work? What does it cost? How much is out of the Employment Division? Any Federal mandated services? Requestor: Representative Richardson, Requested February 7, 2005**

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- Provider training required to qualify for the DHS Enhanced Rate
- Recruitment of trained providers for DHS Child Care Programs
- Technical assistance to providers regarding DHS payment and listing process issues, sponsorship of provider forums and workshops related to the DHS Child Care Programs
- Assistance to providers who need help meeting DHS health and safety requirements.
- Enhanced services to DHS clients to help them recognize, find and maintain quality child care.

The federal child care block grant does not mandate any services to providers. CAF will provide in another document, by program, those services that are federally mandated for clients.

### Food Stamps

#### **7. What is the error rate in terms of Food Stamp dollars? Requestor: Representative Hanna, Requested: February 7, 2005**

Based on federal fiscal year 2004 (October 2003-September 2004) quality control results of 7.79 percent error rate and assuming comparable precision to prior fiscal years of +/- 1.83 percent at 95 percent confidence.

Total Food Stamp benefits issued in FFY 2004	\$453,812,158
Agency caused over-issuances	\$9,983,867 (+/- \$2,314,442)
Agency caused under-issuances	\$5,218,839 (+/- \$1,225,292)
Net agency caused	\$4,765,028
Client caused over-issuance	\$17,108,718 (+/- \$3,948,165)
Client caused under-issuances	\$3,040,541 (+/- \$726,099)
Net client caused	\$14,068,177
Net overall	\$18,833,205 (+/- \$8,304,762) 4.15 percent of total allotments

#### **8-13. The answers to the following questions (8-13) are found in Exhibits K-P**

**8. Can we get a one-page summary of the major programs (TANF cash assistance, ERDC, Food Stamps, etc.) with eligibility criteria, number served, benefit levels (maximum, minimum, average)? Requestor: LFO, Requested: February 4, 2005**

See Exhibits K-P

**9. TANF Benefits: Are the benefits provided to CAF/TANF consumers, greater than those received by the taxpayers that provide them? [i.e., is TANF providing a higher standard of living than that enjoyed by taxpayers who are not eligible for TANF?] Requestors: Senator Bates and Representative Richardson, Requested: February 7, 2005**

See Exhibits K-P

**10. It would help to have some scenarios at different income levels showing the program benefits for families receiving multiple services – e.g., for a family of 3, at \$0, at \$500/month, at \$1000/month, at \$1,500/month, how much TANF cash assistance plus Food Stamps plus ERCD plus OHP for each scenario? Requestor:LFO, Requested: February 4, 2005**

See Exhibits K-P

**11. Is there an updated chart similar to the “Welfare to Work Spendable Income” chart used in the 2001 AFS budget presentation? Something that shows the combined impact at various benefit or hourly wage levels of TANF, Food Stamps, ERCD, salary and Earned Income Tax Credit, maybe OHP? Requestor: LFO, Requested: February 4, 2005**

See Exhibits K-P

**12. What would be the total level of funding for: Requestor: Representative Hanna, Requested: February 7, 2005**

- **Single Mother:**
- **Two parent household:**
- **Single parent in school:**
- **Married woman unemployed in abusive relationship:**

See Exhibits K-P

**13. Eligibility Matrix for TANF, ERDC, FS and Medicaid. Requestors: Representative Richardson, Senator Winters, and Representative Hansen, Requested: February 7, 2005**

**A. What services must be provided to meet Federal Requirements?**

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**B. What part of Eligibility requirements are Federally defined?**

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**C. Are there income limits?**

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**D. Are there benefit limits?**

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**E. Where is Oregon in relation to Federal limits?**

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**F. What are the residency requirements (if any) to be eligible for each of these programs?**

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**G. What expense items are included in determining eligibility for Food Stamps?**

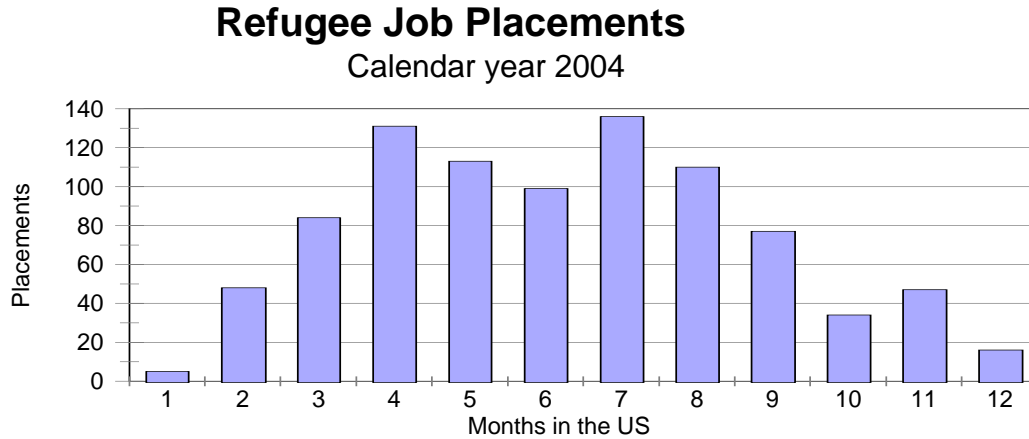
See Exhibits K-P

### **Refugee Program**

**14. Summary comparing benefits of refugees vs. immigrants. Requestor: Senator Bates, Requested: February 8, 2005**

See Exhibit L

**15. How quickly do refugees pass through to employment? Requestor: Senator Winters, Requested: February 8, 2005**



**16. What are the administrative costs? Requestor: Senator Winters, Requested: February 8, 2005**

For fiscal year 2004, the total state administrative expense for the refugee program was approximately \$556,000. This is 100 percent federal funding from the Office of Refugee Resettlement.

- Personnel \$333,500
- Services & Supplies \$222,500

Note:

\$101,000 of the total was related to field administration of the program at the DHS NE Portland Branch.

**17. How does Oregon compare to other states? Requestor: Senator Winter, Requested: February 8, 2005s**

The most recent statistics available are from the 2001 Office of Refugee Resettlement report to Congress. There is no national average published and a ranking of states is not very meaningful because of the very large difference in the size of the programs among resettlement states. Alaska does not have a resettlement program. The following compares Oregon with other neighboring states:

State	Caseload	Placement Rate
Oregon	2,467	47%
Washington	4,966	33%
Idaho	263	83%
California	8,996	42%

## Domestic Violence

**18. Does CAF have any outcomes [measures] specific to CAF DV programs? Requestor: Representative Hansen, Requested: February 7, 2005**

No mechanism is in place to track the number of times domestic violence happens in any given case. We do track the number of times cases reapply for domestic violence related services through the Domestic Violence-EA funds.

July 2003-June 2004

5789 cases received Domestic Violence - EA Funds (TA-DVS) once within the 12 month period

212 cases received TA-DVS twice within a 12 month period

6 cases received TA-DVS three times within a 12 month period

**19. Is there a chart showing the different funding streams for DV programs – CAF's; the AG's office? Requestor: Representative Hansen, Requested: February 7, 2005**

See Exhibit Q.

**20. Which DV programs are the most successful? Less successful? Requestor: Representative Hansen, Requested: February 7, 2005**

At this time, there are no evidence based program evaluations. Best practice has led us to incorporating successful intervention strategies including, collaboration with community based domestic violence service providers; collaboration with other funding sources; domestic violence advocates being out-stationed in DHS offices; training for staff on the cycle of violence and abuser behaviors; safety based practices and policies.

Domestic violence success is individualized. No one strategy works for all victims. The Department recognizes this by a commitment to individualized case planning.

**21. What percentage of women are re-victimized/ later victims of DV? Requestor: Representative Hansen, Requested: February 7, 2005**

Though there is no specific tracking of the number of times victims are re-victimized we do know that domestic violence is not generally a one time act. It is usually based on a pattern of multiple and escalating abusive behaviors, as demonstrated by The Oregon Women's Health and Safety Survey, 2001-2002 conducted by Health Services states the average number of violent incidents per victim (past 5 years) were 8 for physical assault and 12 for sexual assault.

## Child Welfare

### Child Protective Services

**22. One page summary describing the dual intervention/alternative response models of child protective services. Requestors: Senator Winters, Senator Bates, and Representative Richardson, Requested: February 8, 2005**

See Exhibit S

**23. Complaints About Workers: Requestors: Senator Winters, Senator Bates, and Representative Hansen, Requested: February 8, 2005**

**A. Number of complaints received by the GAO for child welfare?**

The GAO received over 5200 child welfare related calls, letters or e-mails in the past year. These calls include such reports as suspected child abuse, third party contacts regarding specific children in the child welfare system and complaints generated by the child welfare clients themselves.

From February 1, 2004 through February 1, 2005, the GAO opened 698 child welfare cases. GAO defines a “case” as one that the GAO needs to research and follow-up on. It is kept open for a period of time (weeks or months). An individual case may also have new or recurring issues that surface, in which the case is reopened for further action.

Although GAO has extensive case information in their data base, it is hard to capture it in a meaningful way for reporting purposes. An Ombudsman with computer skills has been assigned to and trained on the Filemaker system. Currently, this individual is in the final stages of developing a system to generate better data reports. At this time, GAO can only manually go through every individual case to gather details and count the numbers.

Ombudsmen are obligated to approach each initial review of a child welfare case with neutrality. Nonetheless, it has been the experience in most cases that the complaint registered or alleged wrongdoing is seldom substantiated or there are a myriad of other facets involved. While an Ombudsman may uncover misunderstandings, miscommunications, inadequate casework or errors in judgment, evidence is rarely discovered to corroborate that an actual policy was violated or a serious misconduct occurred.

**B. How many child welfare staff have disciplinary actions taken per year?**

DHS has not collected this data in a way to easily retrieve it. DHS has had such a request on the Information Systems' Priority List and this request has moved to a position where it appears the necessary computer tools will be available soon. Beginning on 2-16-05, DHS plans to implement a new data base to collect this information in a way easily retrievable.

**C. Information on labor agreement and laws.**

See Exhibit T (“Notes from Justice” by The Labor and Employment Section, Department of Justice). In addition, when DHS receives a request for records under the public records law, we seek the guidance of DOJ in nearly every situation. It is DOJ that performs the balancing test when we receive an official request.

**24. Example of brochure handed out when an allegation is being investigated. Requestors: Senator Winters and Representative Richardson, Requested: February 8, 2005**

Please see Brochures

**25. How many non-founded referrals have subsequent founded referrals? Requestor: Representative Hansen, Requested: February 8, 2005**

In federal fiscal year 2003 there were 11,727 families who were investigated for child abuse and neglect where the allegations were determined to be unfounded or unable to determine. Of these families, 1,002 families (8.5 percent) had a founded abuse within six months of the initial investigation.

**26. How many parents are using CPS as part of the custody fights? Requestor: Senator Winters, Requested: February 8, 2005**

The only data available indicates that the number of child abuse and neglect reports coming from (self-identified) former spouses account for 1.1 percent of child abuse/neglect reports. Caller information is considered based on the merit of the information and the first-hand knowledge of the caller, independent of the reporter's relationship with the subject of the report.

**27. What does neglect include? Requestor: Representative Richardson, Requested: February 8, 2005**

Neglect, including failure, through action or omission, to provide and maintain adequate food, clothing, shelter, medical care, supervision, protection, or nurturing. Chronic neglect is a persistent pattern of family functioning in which the parent or caregiver does not sustain or meet the basic needs of a child resulting in an accumulation of harm that can have long term effect on the child's overall physical, mental, or emotional development. Neglect includes the following:

**(A)** Physical neglect, which includes the failure to provide for the child's basic physical needs including adequate shelter, food, and clothing:

**(B)** Medical neglect is a refusal or failure to seek, obtain, or maintain necessary medical, dental, or mental health care. Medical neglect includes withholding medically indicated treatment from disabled infants with life threatening conditions. However, failure to provide the child with immunizations or routine well child care alone does not constitute medical neglect.

**(C)** Lack of supervision and protection, including failure to provide supervision and protection appropriate to the child's age, mental ability, and physical condition.

**(D)** Desertion, which includes the parent or caregiver leaving the child with another person and failing to reclaim the child, or parental or caregiver failure to provide information about their whereabouts, providing false information about their whereabouts, or failing to establish a legal guardian or custodian for the child.

**(E)** Psychological neglect, which includes serious inattention to the child's need for affection, support, nurturing, or emotional development. The parent or caregiver behavior must be related to the observable and substantial harm of the child's psychological, cognitive, emotional, or social well-being and functioning.

The following table shows the type of neglect affecting neglect victims:

### Type of Neglect for Neglect Incidents in FFY 2004

Description	Number	Percent of Neglect Incidents
Lack of supervision and protection	2,147	62.8%
Other neglect (psychological neglect)	756	22.1%
Inadequate shelter	744	21.8%
Failure to provide food, clothing	317	9.3%
Medical neglect	262	7.7%
Desertion/Abandonment	193	5.6%
Total Neglect Incidents	3,418	**

\*\*Does not sum to 100%. Each child experiencing neglect may have experienced more than one category of neglect

### 28. Chronology of changing definitions or policies of child abuse and neglect over time. *Requestor: Senator Winters, Requested: February 8, 2005*

#### Historical statutory changes in the definitions of child abuse

The Child Abuse Reporting Law, ORS 418.740 to 418.775, was enacted in 1971. This law was first amended in 1975 and 1977 when Children's Services Division was given responsibility to investigate reports of child abuse. Since 1971 the responsibility was that of Law Enforcements. It was also during this time frame when the reporting age was raised from age 15 to age 18 and sexual molestation was included as a reportable condition.

The next amendment occurred in 1985 when the Oregon Legislature revised the definitions of child abuse to strengthen the reporting law, and to include children who are victims of emotional abuse. Specifically, the 1985 Legislature added sexual exploitation, mental injury, threatened harm and negligent treatment or maltreatment of a child.

The 1993 language was added to the statutory definition of physical abuse to include assaults where previously the language only referred to physical injury. Also in 1993 rape of a child was added to the definitions of abuse.

In 1997 another category of abuse was added to the definition to include child selling.

Language was added in 2003 to include the following in the definition of abuse: Permitting a person under 18 years of age to enter or remain in a place where methamphetamines are being manufactured.

#### Historical administrative rule changes in the definitions of child abuse

After the initial rules were written, the definitions of child abuse in Oregon Administrative Rules were not revised until 1986. The 1986 revisions significantly broadened the child abuse definitions by both adding detail and including new categories of abuse. All of the changes at this time reflected the 1985 statutory changes.

It was not until 1998 that substantive changes were again made to the rules. Language was added to include child selling as a category of abuse, which is consistent with the statute.

The change made by 2003 Legislature to the child abuse reporting law is not reflected in Oregon Administrative Rule. A draft has been written and the rule will be filed with an effective date of spring 2005.

**29. What are the 2004 outcomes for reabuse? Requestor: Representative Hanna, Requested: February 8, 2005**

KPM 1000-14 is dated from the time of initial abuse. The subsequent abuse may be reported up to six months after the end of the period of initial abuse. For example, the federal fiscal year 2003 data includes subsequent abuse reported through March 31, 2004. Additionally, federal guidelines ask that states wait 90 days after the end of the reabuse period before pulling the data to allow for adequate time to make a child abuse/neglect determination. Federal fiscal year 2004 data for this measure will be available in early July 2005.

**30. The CAF State and National Comparisons handout lists Child Repeat Maltreatment outcome for 2004. Is that correct? Requestor: Representative Richardson, Requested: February 8, 2005**

The data are for federal fiscal year 2003; the 2004 date listed is a typo. For 2003 the recurrence of maltreatment was 7.6 percent. The 2004 recurrence of maltreatment data is not yet available.

**31. What resources exist for the agency to place children? Requestor: Senator Winters, Requested: February 8, 2005**

Since 2001, Oregon has grown in the overall numbers of family foster homes from 4,450 to 4,830 in the year 2004. This increase in overall capacity, while improving, is still not keeping up with the numbers of children coming into foster care. (Please refer to charts in binder - CAF, Appendices page 10 and 14).

**Foster Care**

**32. How many foster homes exist in each county over the past 5 years? How successful is recruiting? Requestor: Representative Richardson, Requested: February 9, 2005**

Prior to 2001, relatives were not required to be certified, therefore, records more than three years ago on this area would not be accurate.

See Exhibit R

**33. How does Idaho and Washington get higher a reunification outcome than Oregon? What are they doing differently? Are the data really comparable? Requestor: Representative Richardson, Requested: February 9, 2005**

This question will take more time to answer. Requests have been made to the State of Idaho and Washington to request information pertaining to their reunification program and services.

**34. What other information is available by resources other than DHS? Requestor: Senator Bates, Requested: February 9, 2005**

Children, Adults, and Families utilizes several resources of information as reference tools, sources of additional information and comparison data. Most notable is the Federal Government - Administration for Children and Families. <http://www.acf.dhhs.gov/programs/cb/dis/index.htm>

In addition some of the national foundations which provide research and best practices for child welfare is the Child Welfare League of America <http://www.cwla.org/default.htm> , Annie E. Casey Foundation <http://www.aecf.org/kidscount/> . The Casey Family Program <http://www.casey.org/Home>

**35. How many unduplicated children were served in foster care over the past 5 years? Requestor: Senator Bates, Requested: February 9, 2005**

From January 1, 2000 through December 31, 2004 there were a total of 38,578 children who served at least one day in some form of foster care.

**36. Is the rise the abuse in foster care due to inadequate foster care resources? Requestor: Representative Richardson, Requested: February 8, 2005**

The impact of the numbers of children in the foster care system and the limited numbers of families available does impact the care provided to children. The complexities and special needs of these children in care requires foster parents to have an increased support system from the department and the community as well as increased skill development through training courses.

**37. How many children are represented in the percent calculation of victims of abuse and neglect in foster care? Requestor: Senator Westlund, Requested: February 8, 2005**

For the most recent period, the number of children represented in the incidence of child abuse and/or neglect in foster care is 113 children.

**38. How great is the problem of alcohol abuse compared to drug abuse (i.e. met amphetamines)? Requestor: Representative Hansen, Requested: February 8, 2005**

For children entering foster care in FFY 2004, parental alcohol abuse was noted as the reason for removal 68 percent of the time, while parental drug abuse was noted as the reason for removal 71 percent of the time. (Please see page 11 of the CAF Appendices)

OMHAS tracks the primary drug of abuse for clients coming into public treatment agencies. In fiscal year 2002-03, 33 percent of all treatment clients were alcohol primary and 28 percent were Methamphetamine primary. Looking at that same year and tracking the child welfare clients who went to treatment in 2003, 25 percent of CW clients in treatment were alcohol primary but almost twice as many, 48 percent of CW clients in treatment, were methamphetamine primary. Not surprisingly, 72 percent of child welfare clients in treatment named methamphetamine as one of their top three drugs of abuse.

**39. What is the availability of inpatient and outpatient treatment resources for alcohol and drug abuse? Requestor: Representative Hansen, Requested: February 8, 2005**

There has been a major decrease in A&D treatment in Oregon in the past 2 years and it has negatively affected child welfare clients. Increasing wait list times and eliminating the eligibility of some child welfare parents has a major impact on whether children return to parents or stay in the foster care system for longer periods of time. From 2001 to 2003 approximately 6,500 less people were in treatment over the course of a year.

## Adoption

**40. What are the cost drivers on the increase in adoption assistance? Requestor: Representative Richardson, Requested: February 7, 2005**

The primary cost driver for the increase in Adoption Assistance is the number of children receiving a monthly monetary adoption subsidy benefit.

Once eligibility is determined, typically within the six months before an adoption is finalized, the child usually remains eligible until the age of 18. Each month, more children begin receiving subsidies than the number of children aging out or otherwise ending their subsidies.

The amount of subsidy for which a child is eligible is individually determined based on the needs of the child and other resources available to the adoptive family to meet those needs. The maximum amount of adoption subsidy available to the child is the amount that he or she would receive if they remained in foster care. Therefore, foster care payment rates are also a driver of adoption assistance costs. However, relatively few children receive the maximum available amount because not all services paid for the child while in foster care are eligible for payment in adoption assistance.

As older children age out of adoption assistance and are replaced by new children, the cost per daily average population rises. This is because a) in general, more children have more severe problems (such as those that result from prenatal drug exposure) than children had ten or fifteen years ago; and b) the foster care payment rates, which set the “ceiling” for a child’s individually determined adoption subsidy rate, have increased over time.

**41. Track the funding stream of where money comes from, where it goes to pay for assessment centers. Requestor: Senator Bates, Requested: February 7, 2005**

Funds for the assessment centers are administered through the Department of Justice.

**42. KPM 10000-13 re: Finalized Adoption time frames Requestor: LFO, Requested: February 4, 2005**  
**A. How does our performance of 35.8 months for the median for all children link to our performance of 23 percent of children being finalized in 24 months or less and the federal standard of 32 percent of children being finalized in 24 months or less?**

The federal standard that 32 percent of a state's children who exit foster care to a finalized adoption should achieve adoption in 24 months or less after their removal from home. This standard was established by the federal Administration on Children and Families as part of the Adoption and Safe Families Act of 1997. Between 2001 and 2004, every state, plus the District of Columbia and Puerto Rico, participated in an onsite federal Child and Family Services Review in which the time to adoption in relation to this standard was studied along with other performance measures. Only five states (Florida, Kansas, Michigan, North Dakota and Utah) and the District of Columbia achieved the federal benchmark of 32 percent of adoptions occurring in 24 months or less.

Oregon, along with other states that did not achieve the federal standard, individually negotiated with their federal regional offices a secondary measure for time to adoption. This measure, that the median time to adoption for all children exiting foster care to adoption should be 36 months

or less from removal from home. It was against this secondary measure that Oregon improved its performance, achieving the 36-month benchmark for three consecutive quarters.

The DHS Key Performance Measure 10000-13 tracks the median time from last removal from home to adoption for all children in DHS custody exiting foster care to a finalized adoption during the report period. This specific measure of performance was selected for two reasons:

1. Its consistency with the secondary federal measure, but with progressively more aggressive benchmarks: from 39.8 months in 2000 to 35.8 months 2003. DHS is performing well in relation to these benchmarks.
2. The median measure encourages DHS to focus efforts and resources on all of the children, including older children, children of color, sibling groups and children with multiple physical, emotional, and/or mentally challenging conditions, in its care who require adoption. By contrast, the federal measure described above may encourage concentration of adoption services on those children (usually under the age of 2, White, not part of a sibling group, and with relatively few special needs) for whom this federal benchmark is more easily achievable.

**A. Given the federal standard, should the later year targets be more aggressive?**

Benchmarks have not yet been established for DHS Key Performance Measure 1000-13 (Median Months to Adoption) beyond 2003. While it is reasonable to expect that the median time to adoption will continue to decline, as evidenced by 2004 performance (35 months), targets for later years should not be so aggressive as to sacrifice the best interests of children and good social work practice. There is some evidence among some of the states that performed well on the federal standard (32 percent of adoptions in 24 months or less) that, when considered alongside the number of children in those states who are still waiting for adoption and the length of time they have been waiting, the interests of older and longer-waiting children may be compromised in favor of expediting adoptions for younger, easier to place, children.

### **Office of Vocational Rehabilitation**

**43. KPM 100000-3 re: Office of Vocational Rehabilitation Services consumers' employment**

**A. When is updated data going to be available? Requestor: LFO, Requested: February 4, 2005**

The source of this chart was the most recent annual performance measure report, which did not include the data for 2003 and 2004. The annual data is now available and described below.

**B. The Data Sources From says the data is reported and collected in real time, so are we two years (2003 and 2004) behind in reporting? Or only one, based on 2003-04 and 2004-05 fiscal years?**

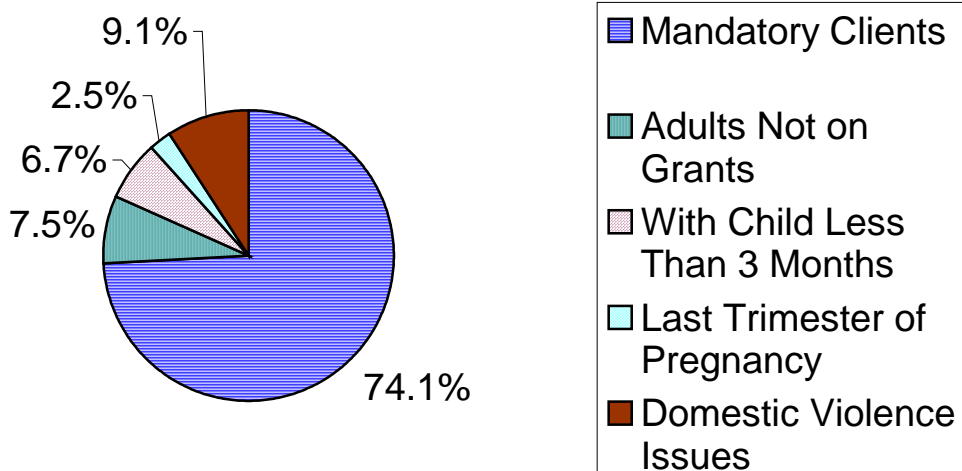
The current data is: 60 for 2003 and 56.5 for 2004.

## Exhibit A

### TANF Clients Participating In the JOBS Program at the End of December 2004

Type of Clients	Number	Percent
Mandatory Clients	6,521	74.1%
Adults Not on Grants	664	7.5%
With Child Less Than 3 Months	591	6.7%
Last Trimester of Pregnancy	220	2.5%
Domestic Violence Issues	800	9.1%

### TANF Clients Participating In JOBS

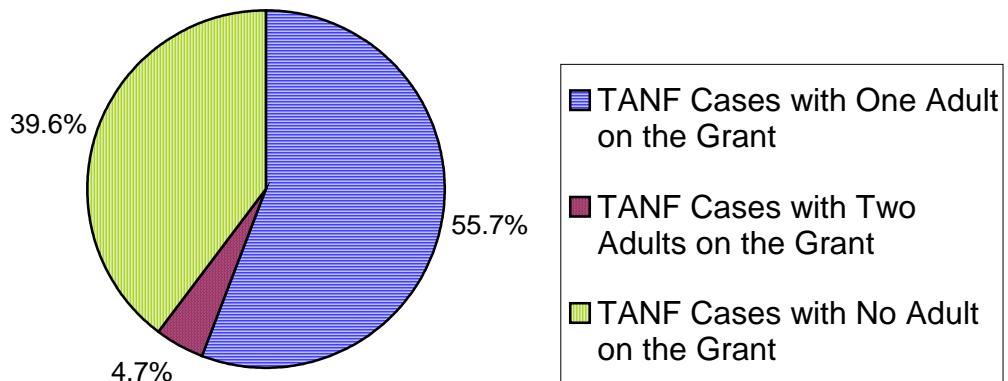


## Exhibit B

### TANF Clients By Grant Type at End of December 2004

Type of TANF Grant	Number Of Cases	Percent of Caseload
TANF Cases with One Adult on the Grant	9,785	55.7%
TANF Cases with Two Adults on the Grant	816	4.7%
TANF Cases with No Adult on the Grant	6,962	39.6%
<b>Types of No Adult Cases from Above</b>		
No Parent Household		41.2%
SSI Parent		22.3%
Ineligible Non-citizen Head of Household		24.0%
Disqualified Adult (JOBS, IPV, Other)		4.1%
Other		8.4%

### Percent of Caseload at the End of December 2004

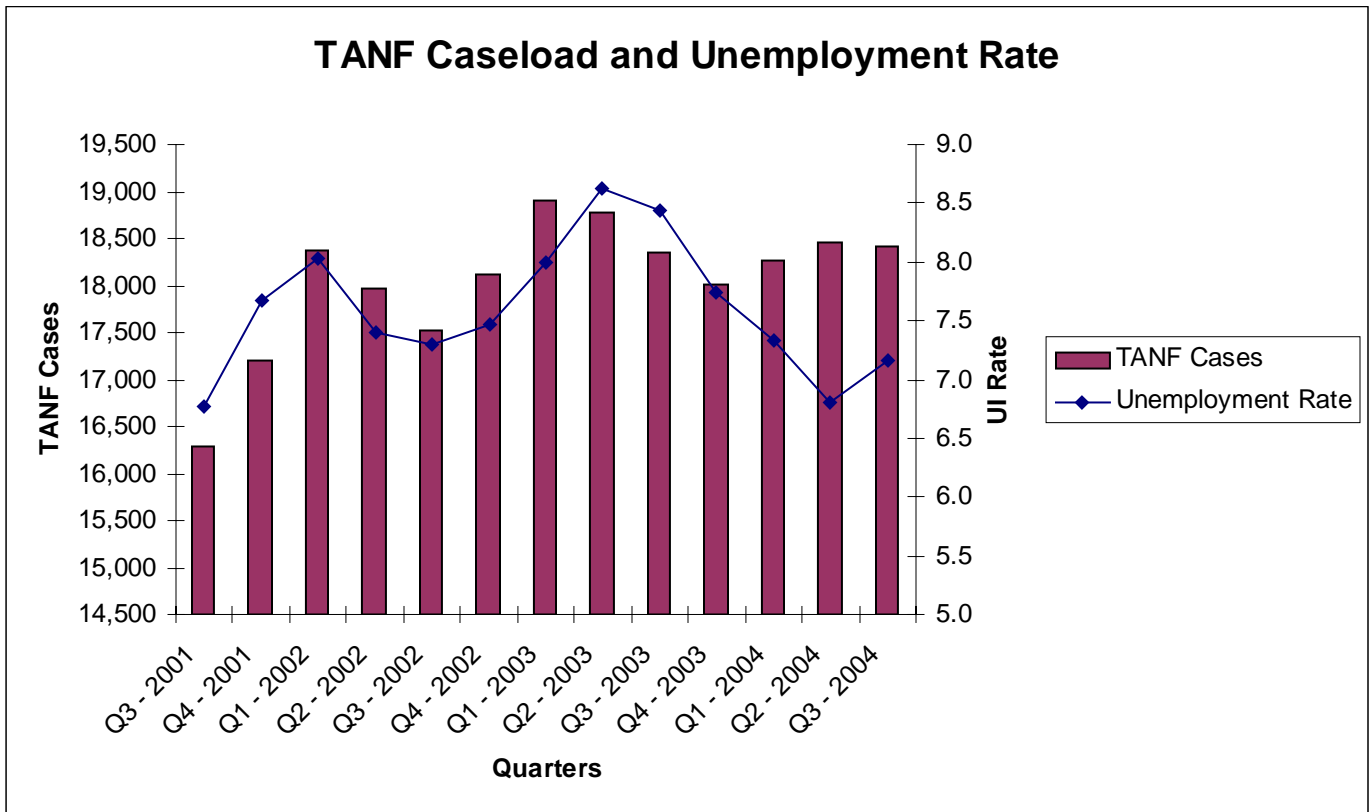


## Exhibit C

### TANF Caseloads Compared to Oregon Unemployment Rates

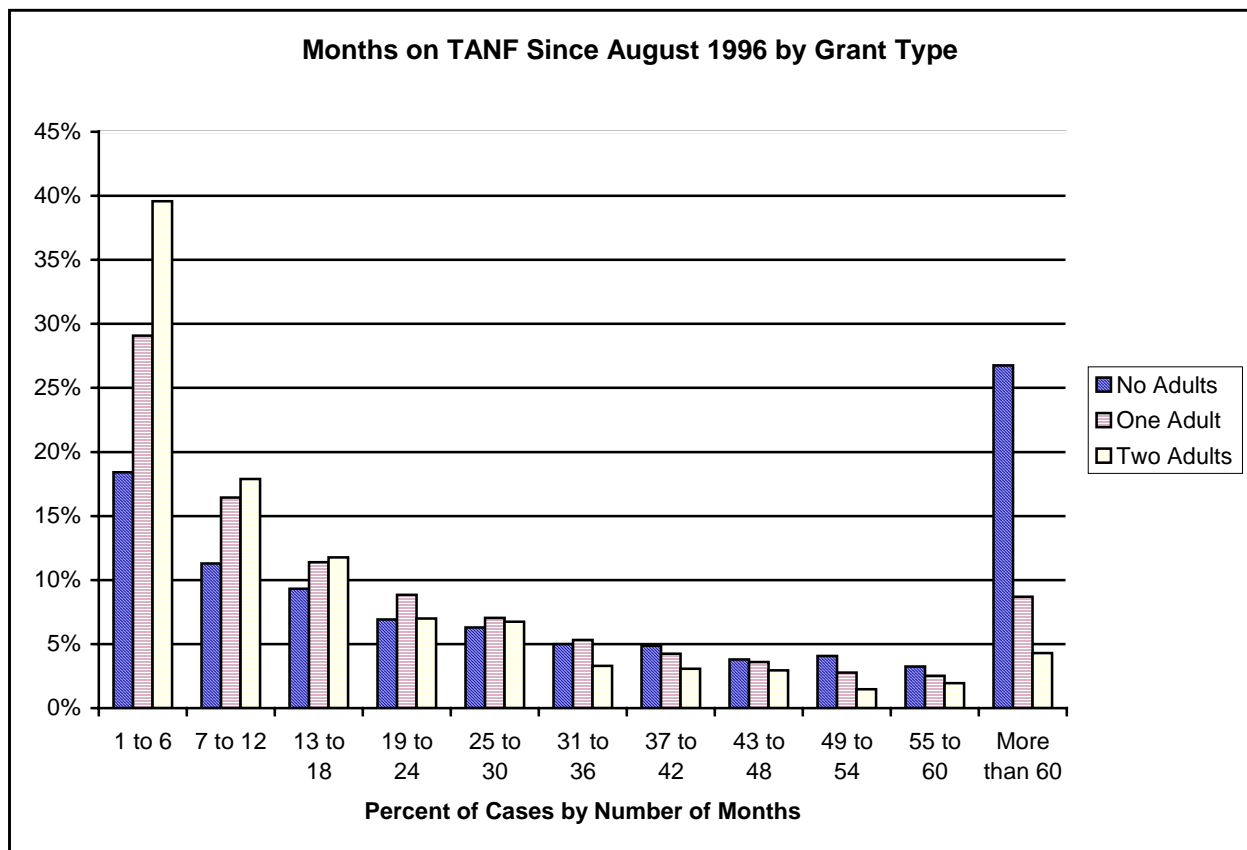
Monthly Average TANF Cases and Unemployment Rate By Quarter

Quarter	TANF Cases	Unemployment Rate
Q3 - 2001	16,282	6.8
Q4 - 2001	17,208	7.7
Q1 - 2002	18,366	8.0
Q2 - 2002	17,968	7.4
Q3 - 2002	17,527	7.3
Q4 - 2002	18,113	7.5
Q1 - 2003	18,897	8.0
Q2 - 2003	18,774	8.6
Q3 - 2003	18,357	8.4
Q4 - 2003	18,019	7.7
Q1 - 2004	18,276	7.3
Q2 - 2004	18,450	6.8
Q3 - 2004	18,408	7.2



## Exhibit D

Months On TANF	Entire Caseload		No Adults Receiving Cash		One Adult Receiving Cash		Two Adults Receiving Cash	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
1 to 6 Months	4,452	25.3%	1,282	18.4%	2,847	29.1%	323	39.6%
7 to 12 Months	2,540	14.5%	786	11.3%	1,608	16.4%	146	17.9%
13 to 18 Months	1,860	10.6%	648	9.3%	1,116	11.4%	96	11.8%
19 to 24 Months	1,404	8.0%	482	6.9%	865	8.8%	57	7.0%
25 to 30 Months	1,183	6.7%	438	6.3%	690	7.1%	55	6.7%
31 to 36 Months	896	5.1%	348	5.0%	521	5.3%	27	3.3%
37 to 42 Months	780	4.4%	340	4.9%	415	4.2%	25	3.1%
43 to 48 Months	641	3.6%	265	3.8%	352	3.6%	24	2.9%
49 to 54 Months	567	3.2%	283	4.1%	272	2.8%	12	1.5%
55 to 60 Months	490	2.8%	227	3.3%	247	2.5%	16	2.0%
More than Months	2,750	15.7%	1,863	26.8%	852	8.7%	35	4.3%
All Clients	17,563		6,962		9,785		816	
Average Months	29		39		23		17	
Percent of Cases at End of Dec. 2004			39.64%		55.71%		4.65%	



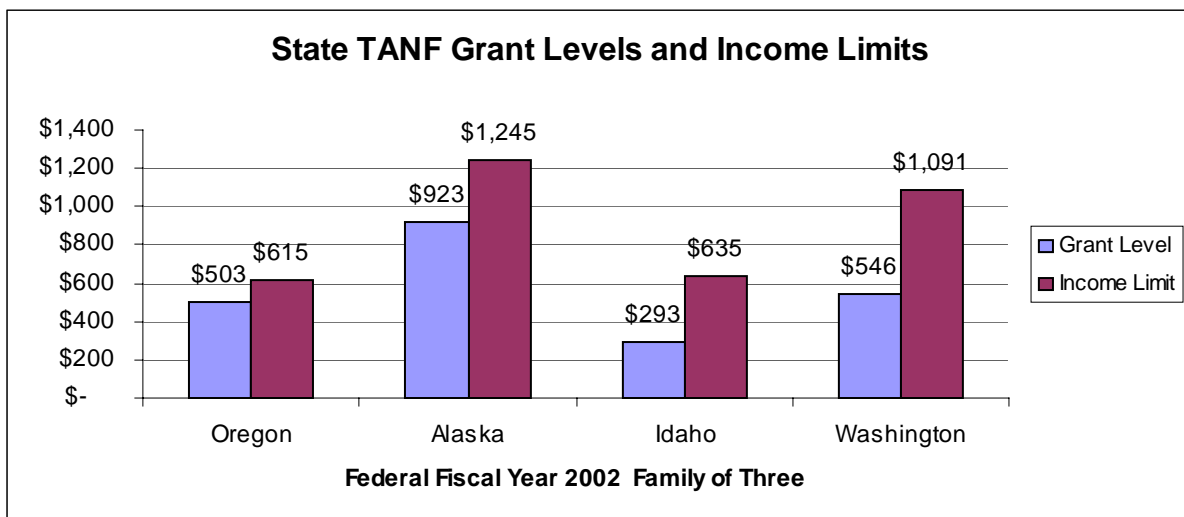
## Exhibit E

### Comparison of Oregon TANF Clients with Other States

Income Standards for Family of Three			Based on Federal Fiscal Year 2002		
State	Earning at Application	Percent of FPL	National Ranking	Earning at Close	Percent of FPL
Oregon	\$ 615	49%	31	\$ 616	49%
Alaska	\$ 1,245	80%	10	\$ 1,246	80%
Idaho	\$ 635	51%	29	\$ 637	51%
Washington	\$ 1,091	87%	7	\$ 1,092	87%

TANF Caseloads, Population, Poverty and Unemployment					
State	Average FFY 2002 TANF Families	July 2002 Population	Families Per 1,000	2001-02 2yr ave. Poverty Rate	Dec. 2004 Unemp. Rate
Oregon	17,946	3,523,281	5.1	11.3	6.8
Alaska	6,034	640,841	9.4	8.7	7.3
Idaho	1,369	1,343,194	1.0	11.4	4.0
Washington	54,188	6,067,146	8.9	10.8	5.8

Grant Payment Standards for a Family of Three FFY 2002			
State	Max Grant Level Family of Three	Percent of FPL	National Ranking
Oregon	\$ 503	40%	12
Alaska	\$ 923	59%	1
Idaho	\$ 293	23%	38
Washington	\$ 546	44%	9



## Exhibit F

### **Client Characteristics Affecting Employment and Self- Sufficiency**

Several years ago, Oregon conducted a survey to determine the challenges that Temporary Assistance to Needy Families (TANF) face in becoming employed. As DHS conducts an analysis of the JOBS program this spring, attention will be paid to this data, as trends and information from our local office indicates these percentages may be higher now than at the time the survey was done. Characteristics include:

- 75 percent of our clients have mental health issues, ranging from depression and anxiety to more serious conditions.
- 50 percent admit to having alcohol or drug issues.
- 50 percent admit they have been physically or sexually abused.
- 45 percent say they have unresolved childhood issues, such as physical or emotional abuse, which affect their employability.
- 30 percent have a criminal record of some type.
- 60 percent have a very limited or sporadic work history.
- 39 percent have other barriers to employment such as lack of transportation, or pending traffic or court fines.
- Though 70 percent of the children on welfare have their paternity legally established, only 17 percent of them receive child support.

In at least 17 percent of the households, the parent is physically incapacitated in some way.

## Exhibit G

### **Child Welfare Case Manager Staffing-Current and 05-07 Projected at GRB**

	Earned FTE	Assigned FTE	% of Earned
Oct 04 - Dec 04 (Avg Earned FTE)	1054.21	1053.50	99.93%
Nov 04 Rebalance	33.19		
	1087.40	1053.50	96.88%
05/07 Mandated Caseload	42.44		
	1129.84	1053.50	93.24%
5% Admin Cut		42.10	
	1129.84	1011.40	89.52%

### **Self Sufficiency Case Manager Staffing-Current and 05-07 Projected at GRB**

	Earned FTE	Assigned FTE	% of Earned
Oct 04 – Dec 04 (Avg Earned FTE)	847.77	812.00	95.78%
Nov 04 Rebalance	21.92		
	869.69	812.00	93.37%
05/07 Mandated Caseload	29.63		
	899.32	812.00	90.29%
5% Admin Cut		31.71	
	899.32	780.29	86.76%

Additional pre and post economic downturn administrative information is being prepared.

## Exhibit H

<b>Food Stamp Processing Center Caseload Data July 2001 to November 2004</b>							
	Metro*	East Co.*	Medford	K Falls	Albany	No. Valley**	Tigard***
Nov-04	11027	6612	4020	0	3287	6797	4551
Oct-04	13534	4128	3997	0	3195	7028	4588
Sep-04	15868	2865	3991	0	3418	7073	4844
Aug-04	15734	2861	4618	0	3179	6981	5082
Jul-04	17861	976	4717	0	3926	7531	5140
Jun-04	17861	976	4717	0	3926	7531	5140
May-04	18272	621	4760	0	4201	7951	5128
Apr-04	18096	650	4928	0	2139	8494	5006
Mar-04	17862	648	5400	3	1054	4903	4903
Feb-04	18403	590	5354	4	6	9704	4764
Jan-04	19583	0	5354	4	6	10306	4928
Dec-03	19759	0	5844	6	0	10030	4999
Nov-03	20766	0	5472	13	0	9867	3945
Oct-03	21952	439	5731	3009		9385	1764
Sep-03	21895	411	5924	3011		9350	1789
Aug-03	23236	0	5931	3481	0	10013	1921
Jul-03	22945	0	6072	3546	0	9985	2070
Jun-03	23064	0	6218	3607	0	9789	2256
May-03	22728	0	6040	3600	0	9708	2318
Apr-03	22102	0	5599	3582	0	9590	2349
Mar-03	21493	0	5043	3557	0	9660	2030
Feb-03	20740	0	4766	3412	0	9409	2135
Jan-03	20016	0	4429	3228	0	8979	2160
Dec-02	19187	0	3927	3162	0	8712	2181
Nov-02	18590	0	3679	3679	0	8135	2176
Oct-02	17761	0	3717	3088	0	7974	2231
Sep-02	17137	0	3976	3037	0	7386	2148
Aug-02	16719	0	3006	3105	0	7071	2226
Jul-02	16454	0	3188	3202	0	6755	2136
Jun-02	16638	0	3452	3214	0	6782	2147
May-02	16370	0	3209	3245	0	6604	2131
Apr-02	16291	0	3160	2970	0	6385	1970
Mar-02	15669	0	0	2895	0	5325	911
Feb-02	13000	0	0	2899	0	4600	636
Jan-02	10816	0	0	7	0	4005	215
Dec-01	10200	0	0	0	0	3580	1
Nov-01	9873	0	0	0	0	3452	0
Oct-01	9387	0	0	0	0	3201	0
Sep-01	8499	0	0	0	0	3614	0
Aug-01	6547	0	0	0	0	4001	0
Jul-01	5831	0	0	0	0	4029	0

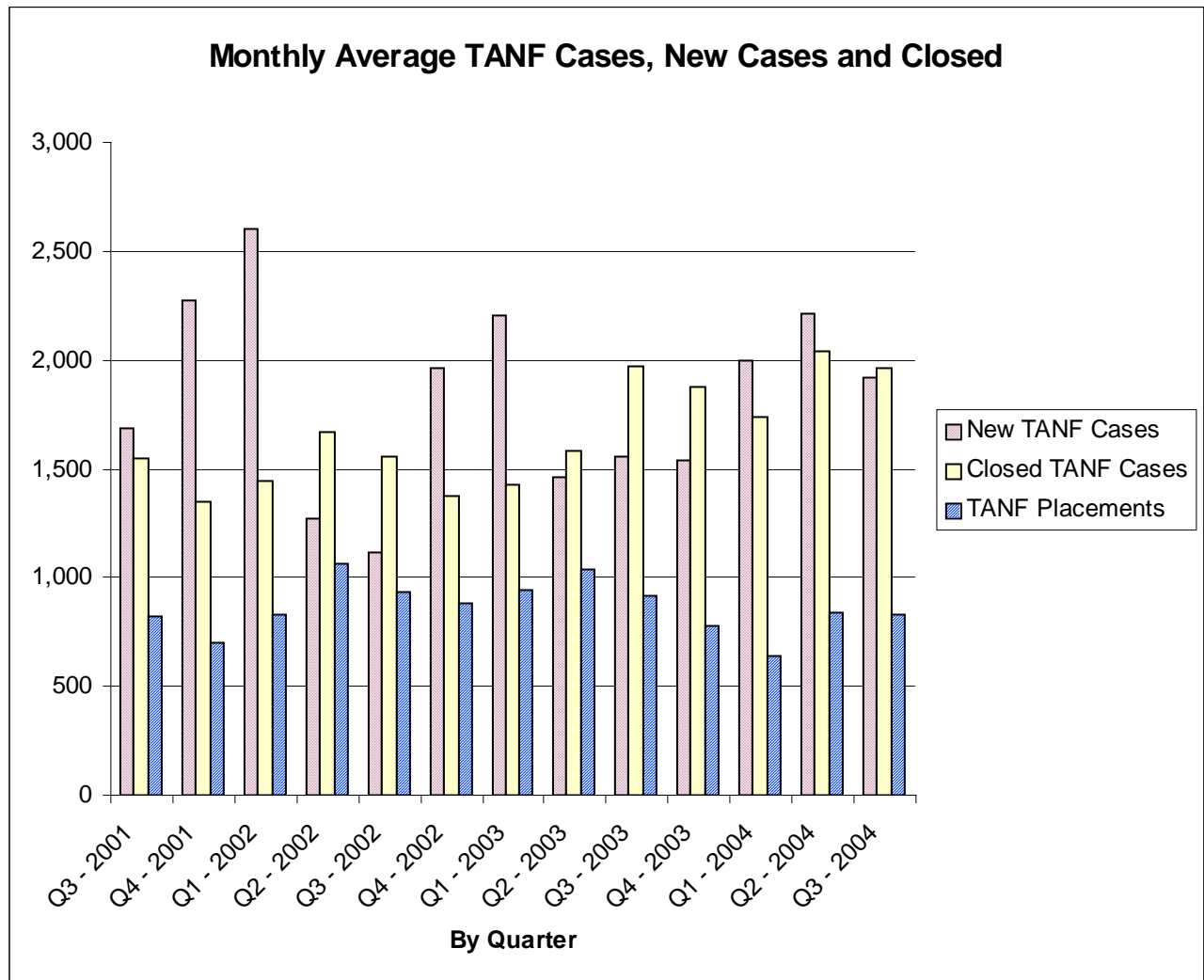
\*Metro and East Co are in SDA 2 (Multnomah). Metro "outgrew" their building, so East Co. was created in late 2003 to alleviate the overcrowding.

\*\*No. Valley serves SDA 3 (Marion, Polk, Yamhill) and is the original Food Stamp PC.

\*\*\*Tigard originally began as an ERDC PC for SDA's 2 (Mult.) and 16 (Washington). As of 11/03, Multnomah's ERDC cases were returned and the Tigard PC began serving both Food Stamp and ERDC clients in Washington County.

## Exhibit I

Monthly Average TANF Cases, New Cases and Closed Each Quarter				
Quarter	TANF Cases	New TANF Cases	Closed TANF Cases	TANF Placements
Q3 - 2001	16,282	1,682	1,548	822
Q4 - 2001	17,208	2,274	1,348	704
Q1 - 2002	18,366	2,602	1,444	832
Q2 - 2002	17,968	1,270	1,668	1,068
Q3 - 2002	17,527	1,116	1,556	933
Q4 - 2002	18,113	1,965	1,379	880
Q1 - 2003	18,897	2,207	1,424	945
Q2 - 2003	18,774	1,460	1,583	1,040
Q3 - 2003	18,357	1,553	1,969	921
Q4 - 2003	18,019	1,536	1,874	780
Q1 - 2004	18,276	1,994	1,737	642
Q2 - 2004	18,450	2,214	2,039	834
Q3 - 2004	18,408	1,922	1,964	833

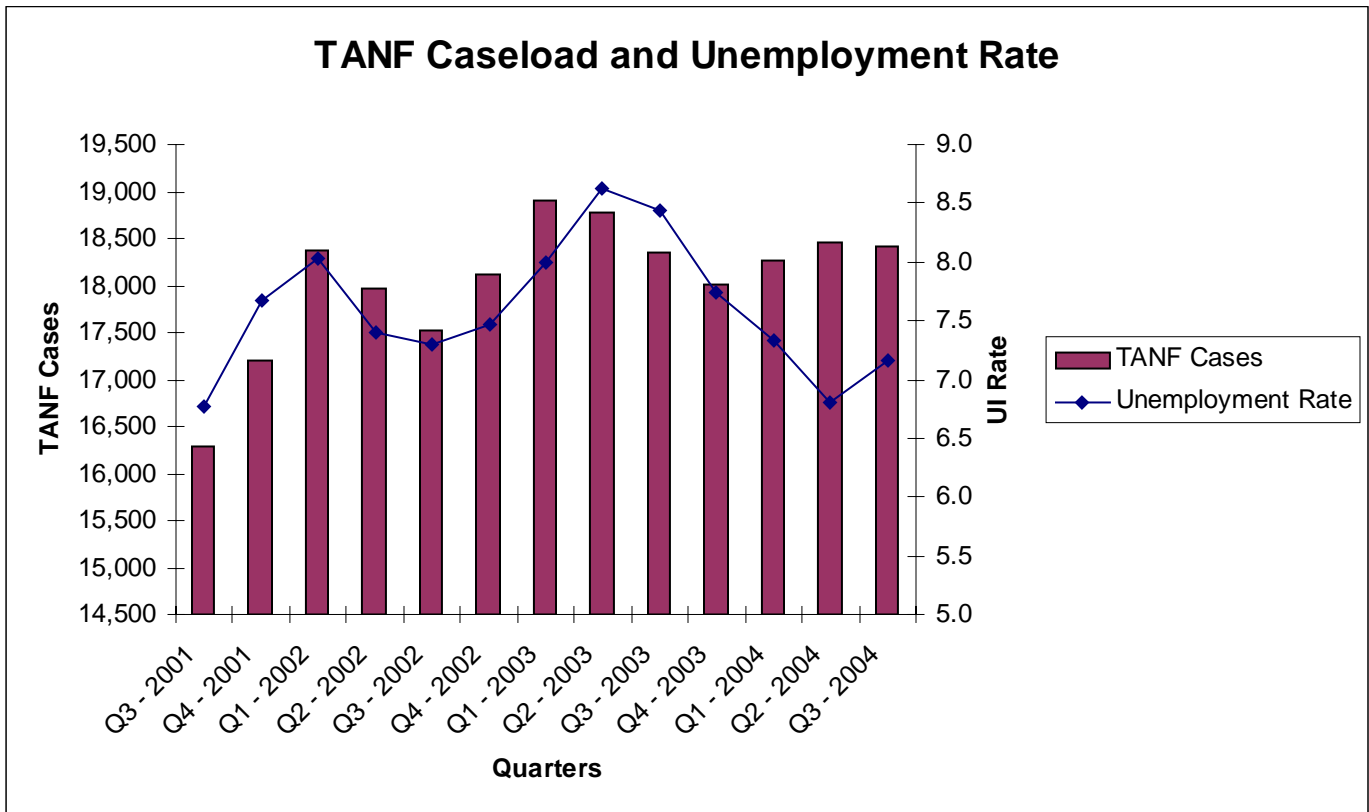


## Exhibit J

### TANF Caseloads Compared to Oregon Unemployment Rates

Monthly Average TANF Cases and Unemployment Rate By Quarter

Quarter	TANF Cases	Unemployment Rate
Q3 - 2001	16,282	6.8
Q4 - 2001	17,208	7.7
Q1 - 2002	18,366	8.0
Q2 - 2002	17,968	7.4
Q3 - 2002	17,527	7.3
Q4 - 2002	18,113	7.5
Q1 - 2003	18,897	8.0
Q2 - 2003	18,774	8.6
Q3 - 2003	18,357	8.4
Q4 - 2003	18,019	7.7
Q1 - 2004	18,276	7.3
Q2 - 2004	18,450	6.8
Q3 - 2004	18,408	7.2



## Exhibit K

Exhibit K is program comparison chart showing eligibility requirements, average payments and numbers served. For Food Stamps and Medicaid, for the most part, the eligibility requirements are federally mandated. We have listed the eligibility requirements that were of particular interest to the committee. Each program will have some number of unique requirements that have not been listed.

<b>Basic Self-Sufficiency Program Comparison Chart</b>				
<b>Eligibility Criteria</b>	<b>Temporary Assistance for Needy Families (TANF)</b>	<b>Food Stamp Program</b>	<b>Medical Programs (see attached for more details)</b>	<b>Child Care (ERDC)</b>
<b>Must be Resident of Oregon?</b>	Yes*	Yes	Yes	Yes*
<b>Minimum Time for Residency?</b>	No*	No	No	No*
<b>Need a Dependent Child?</b>	Yes	No	Yes	Yes**
<b>Citizenship Requirements</b>	See Attached	See Attached	See Attached	See Attached
<b>Income Limit/Family of 3</b>	\$616*	\$2416* – This amount is not federally mandated but is allowed up to 200% of the Federal Poverty Level  Expenses ***	TANF-related Medical: \$616  OHP - \$2,416 (for children and pregnant adults)  OHP - \$1,306 (for non-pregnant adults)	\$1959
<b>Resource Limit</b>	\$2,500 for applicants,  \$10,000 for those cooperating with case plan*	Unlimited for Categorically Eligible  \$3000 for households with one member over age 60 or disabled  \$2000 for all others	Varies by program	No*
<b>Federally Required Services</b>	- JOBS Services - Cooperation with the Child Support Agency	Employment and Training (OFSET)	Services based on the prioritized list of health services adopted by the Oregon Legislature	Focus on the working poor
<b>Number served</b>	19,850 families as of January, 2005	157,398 households served by CAF in December, 2004	297,693 persons served by CAF in December, 2004	21,072 children in care (10,187 cases) in December, 2004
<b>Average Benefit (See attached for income and benefit limits)</b>	\$403	\$213 per household	\$274 Capitation Fee Rate	Average co-pay \$119

\*Indicates that requirement is at state option – not mandated by federal law or regulation.

\*\*In order to receive ERDC, a household must have a dependent child who needs care, and is either under age 13 or under age 18 with special needs.

\*\*\* For Food Stamps: the allowable expenses are a 20% earned income disregard, Standard deduction, payment of child support, child care, medical costs (for those age 60 and over), and shelter costs.

## Exhibit L

### Non-Citizen Eligibility for Public Assistance

This chart is a simplified overview. Because the regulations governing non-citizen eligibility are complex, people need to check with the appropriate agency in order to determine their exact eligibility status. The chart applies to people admitted after August 22, 1996.

<b>Immigration Status</b>	<b>TANF</b>	<b>Food Stamp Benefits</b>	<b>Medicaid</b>	<b>Refugee</b>	<b>State/Local Benefit Programs</b>	<b>SSI</b>
Lawful permanent resident immigrant without 40 work quarters and less than 5 years US residency	eligible (state option)	not eligible	not eligible**	not eligible	state option	not eligible
Lawful permanent resident immigrant with either 40 work quarters or 5 years (or more) US residency	eligible	eligible	eligible (40 work quarters is not applicable)	not eligible	eligible	eligible
Refugee, Asylee, Cuban/Haitian entrant, Amerasian, Human Trafficking	eligible	eligible	eligible	eligible	eligible	seven year eligibility
Lawful permanent on active duty or veteran (spouse and dependents)	eligible	eligible	eligible	not eligible	eligible	eligible
Non-immigrants (ambassadors, visitors, aliens in transit, students, religious ministers, visa waiver program, etc.)	not eligible	not eligible	not eligible	not eligible	eligible	not eligible
Undocumented non-citizens	not eligible	not eligible	not eligible	not eligible	not eligible	not eligible

Non-citizens are eligible for emergency medical for life threatening illness or delivery.

\*\* Entered the US before 8/22/96, but did not receive their qualified status until after 8/22/96 and have been residing continuously in the US between 8/22/06 and the date their qualified status was granted.

## Exhibit M

### Medical Program Comparison Chart

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>INCOME</b>	<b>RESOURCE</b>	<b>AGE</b>	<b>BASIC ELIGIBILITY</b>	<b>HEALTH INSURANCE</b>
<b>Breast &amp; Cervical Cancer Medical (BCCM)</b>	Medicaid coverage for uninsured women who have been screened by the Oregon Breast and Cervical Cancer Program and found to need treatment for either breast or cervical cancer, including pre-cancerous conditions.	No income limit.	No resource limit.	Must be under age 65.	<p>Must have been found to need treatment following a screening by the Oregon Breast and Cervical Cancer Program. Must not be covered for treatment by health insurance. Must not be eligible for another Medicaid program.</p> <p>Must be an Oregon resident; meet the citizenship/alien status requirements; apply for SSN.</p>	Must not be covered for treatment by health insurance.

<b>Citizen/Alien Waived Emergent Medical (CAWEM)</b>	CAWEM provides limited medical assistance (emergency medical services and labor and delivery services) to people who are ineligible for Medicaid solely because they do not meet the citizenship/alien status requirements for Medicaid.	Must meet the income standard of the medical program for which they would otherwise be eligible.	Must meet the resource limit of the medical program for which they would otherwise be eligible.	Must meet the age requirements of the medical program for which they would otherwise be eligible.	Must meet all other eligibility requirements.  Issued a medical card indicating limited medical coverage (for emergency medical services and labor and delivery services).	Private health insurance pays before Medicaid.
<b>Extended Medical Assistance (EXT)</b>	Medical assistance for people who lose their eligibility for MAA or MAF due to an increase in earned income or child support. Medical assistance continues for 12 months if eligibility is lost due to an increase in earned income; 4 months if it is due to an increase in child support.	No income limit.	No resource limit.	Children must be age 18 and under. If 18 must be attending school full time.	Eligibility continues for the entire eligibility period, unless the family no longer includes an eligible child or they move out of state.	Private health insurance pays before Medicaid.  If cost effective and major medical coverage, may be eligible for Health Insurance Payment (HIP).

<p><b>General Assistance Medical (GAM)</b></p>	<p>Medical assistance to individuals and married couples with no dependent children. These individuals must have physical or mental impairments. They are waiting to be awarded Supplemental Security Income (SSI).</p>	<p>\$314.00 per individual.</p>	<p>Resource limit: \$2000 for individuals, \$3000 for couples.</p>	<p>Age 18 to 65. Qualified non-citizens 65 and over may be eligible.</p>	<p>These individuals must have physical or mental impairments. They are waiting to be awarded Supplemental Security Income (SSI).  Must be an Oregon resident; meet the citizenship/alien status requirements; apply for SSN.</p>	<p>Private health insurance pays before Medicaid.</p>
<p><b>Medical Assistance Assumed (MAA)</b></p>	<p>Medical assistance for people who are eligible for Medicaid using TANF program standards and methodologies.</p>	<p>TANF income standard.</p>	<p>TANF resource limits: \$2,500 for applicants and \$10,000 for recipients actively participating in the JOBS program.</p>	<p>Children must be age 18 and under. If 18 must be attending school full time.</p>	<p>Must be a dependent child that meets deprivation requirements.  Must be an Oregon resident, meet citizenship/alien status requirements, apply for SSN and pursue assets, including medical support.</p>	<p>Private health insurance pays before Medicaid.  If cost effective and major medical coverage, may be eligible for Health Insurance Payment (HIP).</p>

<b>Medical Assistance to Families (MAF)</b>	Medical assistance for people who are ineligible for MAA but are eligible for Medicaid using ADC program standards and methodologies that were in effect in July 1996.	TANF income standard.	Resource limit: \$2,500	Children must be age 18 and under. If 18 must be attending school full time.	Must be a dependent child that meets deprivation requirements. Must be an Oregon resident, meet citizenship/alien status requirements, apply for SSN and pursue assets, including medical support.	Private health insurance pays before Medicaid.  If cost effective and major medical coverage, may be eligible for Health Insurance Payment (HIP).
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PROGRAM	DESCRIPTION	INCOME	RESOURCE	AGE	BASIC ELIGIBILITY	HEALTH INSURANCE
<b>Oregon Health Plan Under 100% for Adults (OPU)</b>	<p>Medical assistance for non-pregnant adults who qualify under the 100% of FPL income standard.</p> <p>Persons eligible under this program are referred to as “new eligibles” who qualify for Medicaid as an expansion group under Oregon’s federal waiver.</p>	Below 100% of the Federal Poverty Level (FPL)	Resource limit: \$2,000	Must be 19 years of age or older.	<p>Currently closed to new eligibles.</p> <p>Must be uninsured and uninsured in the last 6 months.</p> <p>Must be an Oregon resident; meet the citizenship/alien status requirements; pay monthly premiums, if not exempt; apply for SSN; pursue medical coverage; select a Managed Health Care Plan or Primary Care Case Manager, if available.</p>	<p>Cannot be covered by private major medical health insurance and be eligible.</p> <p>If employer-sponsored insurance is available, must be referred to FHIAP.</p>
<b>Oregon Health Plan Under 100% for Children (OPC)</b>	Medical assistance for children who qualify under the 100% of FPL income standard.	Below 100% of the Federal Poverty Level (FPL)	No resource limit.	Must be under the age of 19.	<p>Must be an Oregon resident; meet the citizenship/alien status requirements; apply for SSN.</p>	<p>Private health insurance pays before Medicaid.</p> <p>If cost effective and major medical coverage, may be eligible for Health Insurance Payment (HIP).</p>

<b>Oregon Health Plan Children under age 6 (OP6)</b>	Medical assistance for children under 6 who qualify under the 133% of FPL income standard.	From 100% to 133% of the FPL.	No resource limit.	Must be under age 6.	Must be an Oregon resident; meet the citizenship/alien status requirements; apply for SSN.	Private health insurance pays before Medicaid.  If cost effective and major medical coverage, may be eligible for Health Insurance Payment (HIP).
<b>Oregon Health Plan Pregnant Females (OPP)</b>	Medical assistance for pregnant females and their newborn children.  (A child born to a mother eligible for and receiving Medicaid is eligible for Medicaid until age 1.)	Below 185% of the FPL	No resource limit.	Any age for pregnant females. Newborn children have protected coverage until age 1.	Must be an Oregon resident; meet the citizenship/alien status requirements; apply for SSN.	Private health insurance pays before Medicaid.  If cost effective and major medical coverage, may be eligible for Health Insurance Payment (HIP).
<b>Oregon Health Plan - Children's Health Plan (CHP)</b>  Also called SCHIP.	Medical assistance for children under the age of 19, authorized by the Children's Health Insurance Program (CHIP) provision of the 1997 Balanced Budget Act.	Under 185% of the FPL.	Resource limit: \$10,000.	Must be under age 19.	Must be uninsured and uninsured in the last 6 months.  Must be an Oregon resident; meet the citizenship/alien status requirements; apply for SSN.	Cannot be covered by private major medical health insurance and be eligible.

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>INCOME</b>	<b>RESOURCE</b>	<b>AGE</b>	<b>BASIC ELIGIBILITY</b>	<b>HEALTH INSURANCE</b>
<b>Oregon Supplemental Income Program Medical (OSIPM)</b>	Medicaid for the aged (OAA), blind (AB), or disabled (AD).	OSIPM income standard. (\$580.70 for one person.)  Countable Income Limit Standard is 300% of the SSI std. for institutionalized/waivered clients.	Resource limit: \$2,000 one person need group  \$3,000 two person need group	<u>OAA</u> = 65 or older <u>AB</u> = no req. <u>AD</u> = under 65	Must be an Oregon resident; meet the citizenship/alien status requirements; apply for SSN.  Must be an Oregon resident; must apply for SSN; must pursue assets.	Health insurance premiums allowed as deduction from countable income.
<b>OSIPM for Employed Persons with Disabilities (OSIPM-EPD)</b>	Medicaid for disabled individuals who are working.	Adjusted income must be less than 250% of FPL.	Resource limit: \$12,000	18 or older.	Must be disabled and employed.  Must be an Oregon resident; meet the citizenship/alien status requirements; apply for SSN.	Private health insurance pays before Medicaid.  May be eligible for Health Insurance Payment (HIP).

<b>Qualified Medicare Beneficiaries (QMB)</b>	<p>Payment of all or part of the Medicare Part A and Part B premiums, plus related costs, for people eligible for Medicare.</p> <p>(May also be eligible for Medicaid coverage through MAA, MAF or OSIPM.)</p>	<p>QMB-BAS = below 100% FPL</p> <p>QMB-SMB = below 135% FPL</p>	<p>Resource limit:</p> <p>\$4,000 for one person need group.</p> <p>\$6,000 for two or more need group.</p>	<p>Any age</p>	<p>QMB-BAS = Payment of Part A and Part B premiums and co-pays.</p> <p>QMB-SMB= Payment of all or part of Part B premium.</p> <p>Must be an Oregon resident; meet the citizenship/alien status requirements; apply for SSN.</p>	
<b>Refugee Medical (REFM)</b>	<p>Medical assistance for refugees and asylees who do not meet eligibility standards for other Medicaid programs during their first 8 months of residence in USA.</p>	<p>No income limit.</p>	<p>No resource limit.</p>	<p>Under age 65 and not blind or disabled.</p>	<p>Must not be eligible for another Medicaid program.</p>	

PROGRAM	DESCRIPTION	INCOME	RESOURCE	AGE	BASIC ELIGIBILITY	HEALTH INSURANCE
<b>Substitute and Adoptive Care (SAC)</b>	<p>Medicaid eligibility for a person who is under the age of 21 and is:</p> <ul style="list-style-type: none"> <li>- In substitute care for which a public agency is assuming at least partial financial responsibility, living in licensed psychiatric facility; or</li> <li>- The subject of an adoption assistance agreement.</li> </ul>	<p>TANF income standard. (\$345 countable income limit for one person.)</p>	<p>Resource limit: \$2,500</p>	<p>Must be under the age of 21.</p>	<p>Must be a person in substitute care for which a public agency is assuming at least partial financial responsibility, living in licensed psychiatric facility or the subject of an adoption assistance agreement.</p> <p>Must be an Oregon resident and meet citizen/alien status requirements</p>	<p>Private health insurance pays before Medicaid.</p> <p>If cost effective and major medical coverage, may be eligible for Health Insurance Payment (HIP).</p>

## Exhibit N

Exhibit N identifies the income limits for self-sufficiency programs and the maximum benefit amounts, in most cases, whether the person is an adult or child does not make a difference in terms of benefit amount. For example, a TANF family of three with no income will receive a maximum benefit of \$503. This is the amount whether the family is one parent and two children or two parents and one child.

<b>Medical and TANF Income/Payment Standards</b>					
Number in Family	Maximum Benefit	TANF Income Limit	OHP Income Limit		
			100%	133%	185%
1	336	\$345	\$776	\$1,032	\$1,435
2	427	499	1,041	1,384	1,926
3	503	616	1,306	1,737	2,416
4	617	795	1,571	2,089	2,906
5	712	932	1,836	2,442	3,396
6	830	1,060	2,101	2,794	3,887
7	915	1,206	2,366	3,147	4,377
8	1,034	1,346	2,631	3,499	4,867
9	1,094	1,450	2,896	3,851	5,357
10	1,199	1,622	3,161	4,204	5,848
+1	+105	+172	+265	+352	+490

<b>Food Stamp Standards</b>		
Number in Family	Income Limit	Maximum Benefit
1	\$1,435	\$149
2	1,926	274
3	2,416	393
4	2,906	499
5	3,396	592
6	3,887	711
7	4,377	786
8	4,867	898
+1	+490	+112

<b>Day Care Income Limit</b>	
Number in Family	Income Limit
2	\$1,561
3	\$1,959
4	\$2,356
5	\$2,754
6	\$3,151
7	\$3,549
8 or more	\$3,946

## Exhibit O

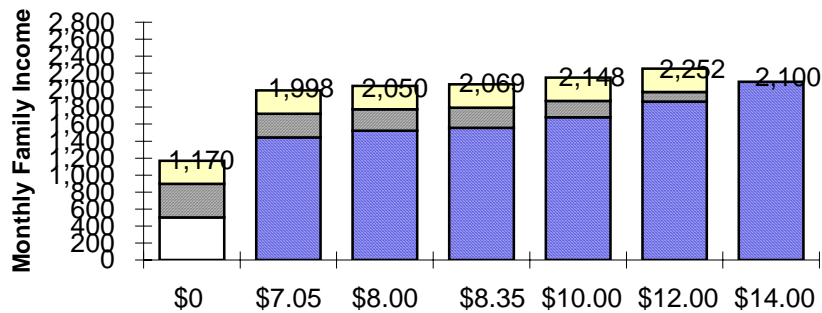
Exhibit O is a set of welfare and work charts showing three family situations and the benefits received at various income levels, their spendable income and a comparison of benefits provided to TANF consumers compared to taxpayers at specific income levels.

### A Family of Three; 1 Adult and 2 Children

Salary	\$0	\$7.25	\$8.00	8.35 *	\$10.00	\$12.00	\$14.00
Gross Wages	0	1,256	1,387	1,447	1,733	2,080	2,427
Percent of FPL for family of 3 (\$1306)	0.0%	96.2%	106.2%	110.8%	132.7%	159.3%	185.8%
Less Social Security/Medicare Tax	0	(96)	(106)	(111)	(132)	(159)	(186)
Less Workers' Comp	0	(3)	(3)	(3)	(3)	(3)	(3)
<b>Subtotal Net Income</b>	<b>0</b>	<b>1,157</b>	<b>1,278</b>	<b>1,333</b>	<b>1,598</b>	<b>1,918</b>	<b>2,238</b>
TANF	503	0	0	0	0	0	0
Less State Tax Liability	0	(31)	(42)	(64)	(113)	(123)	(61)
Plus State Credits	0	31	42	64	113	123	61
Less Federal Tax Liability	0	0	0	0	0	0	0
Plus Federal EITC	0	394	387	383	366	333	249
Less Child Care Costs	0	(106)	(142)	(161)	(282)	(387)	(387)
<b>Subtotal Salary</b>	<b>503</b>	<b>1,445</b>	<b>1,523</b>	<b>1,555</b>	<b>1,682</b>	<b>1,864</b>	<b>2,100</b>
Plus Capitated Health Plan	274	274	274	274	274	274	0
Plus Food Stamps	393	279	253	240	192	114	0
<b>Total Net Spendable Income</b>	<b>1,170</b>	<b>1,998</b>	<b>2,050</b>	<b>2,069</b>	<b>2,148</b>	<b>2,252</b>	<b>2,100</b>
Percent of FPL for family of 3 (\$1306)	89.6%	153.0%	156.9%	158.4%	164.5%	172.4%	160.8%

Assumptions include:

- Clients pay an average of \$500 per month for rent
- All clients file tax reports and receive the credits available
- Work hours are a total of 173.3 hours per month



Hourly Wage ->

□ TANF   ■ Net Spendable Income   ■ Food Stamps   ■ Capitated Health Plan

Note: Tax based on 2004 Tax Tables

Note: Based on 2004 Federal Poverty Level

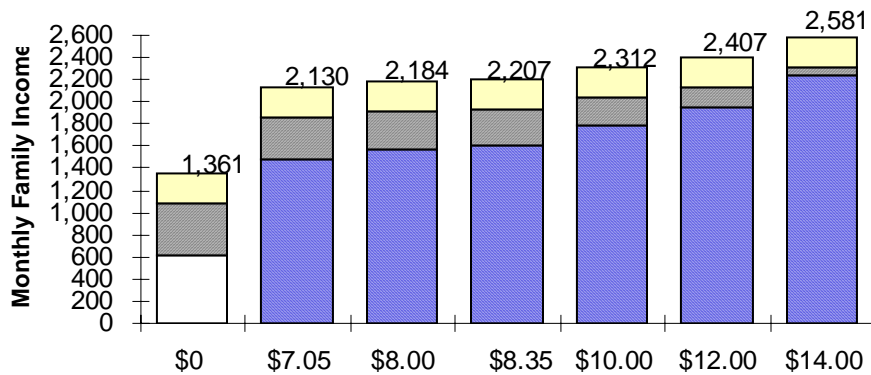
# Exhibit O

## A Family of Four; 1 Adult and 3 Children

<b>Salary</b>	<b>\$0</b>	<b>\$7.25</b>	<b>\$8.00</b>	<b>8.35 *</b>	<b>\$10.00</b>	<b>\$12.00</b>	<b>\$14.00</b>
Gross Wages	0	1,256	1,387	1,447	1,733	2,080	2,427
Percent of FPL for family of 4 (\$1571)	0.0%	79.9%	88.3%	92.1%	110.3%	132.4%	154.5%
Less Social Security/Medicare Tax	0	(96)	(106)	(111)	(132)	(159)	(186)
Less Workers' Comp	0	(3)	(3)	(3)	(3)	(3)	(3)
<i>Subtotal Net Income</i>	<i>0</i>	<i>1,157</i>	<i>1,278</i>	<i>1,333</i>	<i>1,598</i>	<i>1,918</i>	<i>2,238</i>
TANF	617	0	0	0	0	0	0
Less State Tax Liability	0	(27)	(37)	(42)	(72)	(98)	(63)
Plus State Credits	0	27	37	42	72	98	63
Less Federal Tax Liability	0	0	0	0	0	0	0
Plus Federal EITC	0	394	387	383	366	344	323
Less Child Care Costs	0	(68)	(92)	(104)	(178)	(318)	(318)
<i>Subtotal Salary</i>	<i>617</i>	<i>1,483</i>	<i>1,573</i>	<i>1,612</i>	<i>1,786</i>	<i>1,944</i>	<i>2,243</i>
Plus Capitated Health Plan	274	274	274	274	274	274	274
Plus Food Stamps	470	373	337	321	251	189	64
<b>Total Net Spendable Income</b>	<b>1,361</b>	<b>2,130</b>	<b>2,184</b>	<b>2,207</b>	<b>2,312</b>	<b>2,407</b>	<b>2,581</b>
Percent of FPL for family of 4 (\$1571)	86.7%	135.6%	139.0%	140.5%	147.1%	153.2%	164.3%

Assumptions include:

- Clients pay an average of \$500 per month for rent
- All clients file tax reports and receive the credits available
- Work hours are a total of 173.3 hours per month



Hourly Wage ->

TANF  
  Net Spendable Income  
  Food Stamps  
  Capitated Health Plan

Note: Tax based on 2004 Tax Tables

Note: Based on 2004 Federal Poverty Level

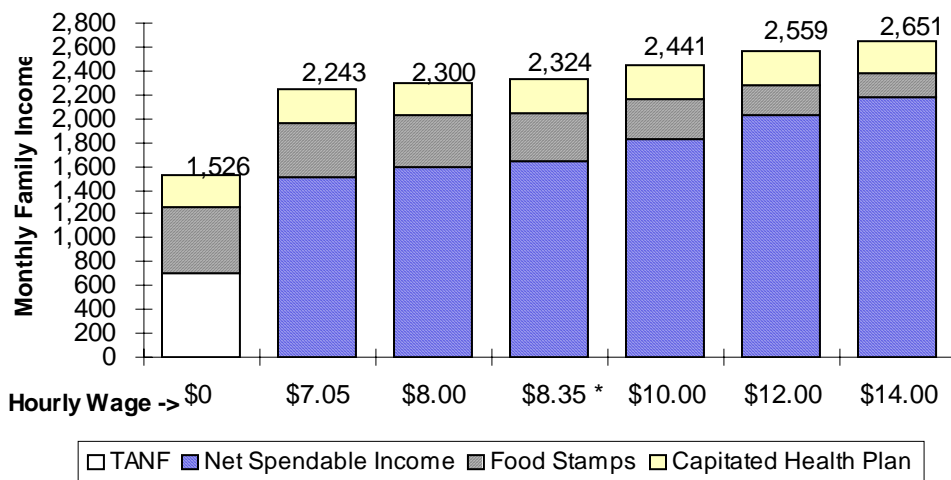
## Exhibit O

### A Family of Five; 1 Adult and 4 Children

Salary	\$0	\$7.25	\$8.00	8.35 *	\$10.00	\$12.00	\$14.00
Gross Wages	0	1,256	1,387	1,447	1,733	2,080	2,427
Percent of FPL for family of 4 (\$1836)	0.0%	68.4%	75.5%	78.8%	94.4%	113.3%	132.2%
Less Social Security/Medicare Tax	0	(96)	(106)	(111)	(132)	(159)	(186)
Less Workers' Comp	0	(3)	(3)	(3)	(3)	(3)	(3)
<i>Subtotal Net Income</i>	<i>0</i>	<i>1,157</i>	<i>1,278</i>	<i>1,333</i>	<i>1,598</i>	<i>1,918</i>	<i>2,238</i>
TANF	712	0	0	0	0	0	0
Less State Tax Liability	0	(27)	(37)	(42)	(72)	(98)	(63)
Plus State Credits	0	27	37	42	72	98	63
Less Federal Tax Liability	0	0	0	0	0	0	0
Plus Federal EITC	0	394	387	383	366	344	323
Less Child Care Costs	0	(48)	(66)	(75)	(129)	(226)	(376)
<i>Subtotal Salary</i>	<i>712</i>	<i>1,503</i>	<i>1,599</i>	<i>1,641</i>	<i>1,835</i>	<i>2,036</i>	<i>2,185</i>
Plus Capitated Health Plan	274	274	274	274	274	274	274
Plus Food Stamps	540	466	427	409	331	249	192
<b>Total Net Spendable Income</b>	<b>1,526</b>	<b>2,243</b>	<b>2,300</b>	<b>2,324</b>	<b>2,441</b>	<b>2,559</b>	<b>2,651</b>
Percent of FPL for family of 4 (\$1836)	83.1%	122.2%	125.3%	126.6%	132.9%	139.4%	144.4%

Assumptions include:

- Clients pay an average of \$500 per month for rent
- All clients file tax reports and receive the credits available
- Work hours are a total of 173.3 hours per month



Note: Tax based on 2004 Tax Tables

Note: Based on 2004 Federal Poverty Level

## **Exhibit P**

Exhibit P provides two scenarios intended to augment the above information with more specific benefits and services available to these created situations.

### **Temporary Assistance for Needy Families (TANF) Program Scenarios**

#### **Scenario 1**

DHS is serving a client who is a mother of two children, ages four and two. She is fleeing from her husband, who has been very abusive to her physically and emotionally. Since she has not been working, she does not have any recent work history. She is not receiving child support.

When she comes to DHS for assistance, she meets with a case manager, who discusses her needs with her. She and her children are eligible for medical coverage and Food Stamp Program benefits. Since she is also fleeing a domestic violence situation, she is eligible for Temporary Assistance for Domestic Violence Survivors (TA-DVS), which helps her with up to \$1,200 in cash benefits to increase her safety. In this case, she uses the \$1,200 to get into stable housing. Because she has two children and is not currently working, she is eligible for \$503 per month in TANF benefits to help meet her basic living expense needs. The case manager works out a case plan with her, which will include domestic violence counseling and finding child care for when she starts doing work search in a couple of weeks. After stabilizing her housing and getting her started with domestic violence counseling, the client begins to attend work search. She finds employment and is better able to meet her expenses. She still receives medical and Food Stamp Program benefits, as well as child care benefits.

#### **Scenario 2**

Another client is receiving \$427 per month in TANF benefits for herself and her child, age 11. She is receiving Food Stamp Program benefits, as well as medical benefits. Her case manager has noticed that this client has difficulty making it to JOBS program appointments. In the course of a screening, the client reveals that she has an alcohol abuse problem, and she wants help. The case manager is able to get the client connected with a substance abuse specialist while she continues to look for work.

## Exhibit Q

<b>FUNDING FOR GRANTS/CONTRACTS WITH LOCAL DOMESTIC VIOLENCE SERVICE PROVIDERS</b>			
<b>FY 04 *Annual Appropriations to Oregon</b>	<b>Source of Funds/Grant Name</b>	<b>Oregon Administering Agency</b>	<b>Funding Cycle</b>
*\$1,142,340 (Oct 04-Sept.05)	Federal Department of Health and Human Services.	Department of Human Services-Services to Children and Families (DHS-CAF)	October thru September
* \$562,380 (July 04-June 05)	State Marriage License Tax	DHS-CAF	July thru June
* \$1,119,112 (July 04-June 05)	State Criminal Fine Assessment Account/DV Fund	DHS-CAF	July thru June
* \$1,065,051 (July 04-June 05)	Federal Violence Against Women Act (VAWA)	Oregon Office of Homeland Security-Criminal Justice Services Division (OSP-CJSD)	July thru June
* \$959,278	Byrne Act (Competitive Funds)	Oregon Office of Homeland Security-Criminal Justice Services Division (OSP-CJSD)	July thru June
* \$1,152,094 (DV) (Oct . 04-Sept. 05)	Federal Victim of Crime Act (VOCA)	Department of Justice-Crime Victims Assistance Section (DOJ-CVAS)	October thru Sept
* \$983,836 (July 04-June 05)	Oregon Domestic & Sexual Violence Services Fund (ODSVS)	DOJ-CVAS	July thru June
* \$103,379 (2003 tax returns received through November 2004 – missing Dec. 2004).	Oregon State Income Tax Check-Off	OCADSV	January thru December
<b>\$7,291,976</b>	<b>TOTAL ANNUAL FUNDING TO DV/SA GRANTEEES</b>		
<b>DIRECT FUNDING TO CLIENTS THROUGH DOMESTIC VIOLENCE-EMERGENCY ASSISTANCE (TA-DVS)</b>			
*\$4,435,107 (July 04-June 05)	TANF – Domestic Violence - Emergency Assistance (TA-DVS)	DHS-CAF-Self Sufficiency (Funds issued directly to individuals served through DHS Self Sufficiency offices)	July thru June

## Exhibit R

**Number of Certified Foster Parents, By County**

<b>County</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>
BAKER	29	35	38
BENTON	46	51	55
CLACKAMAS	226	213	265
CLATSOP	43	46	60
COLUMBIA	84	82	89
COOS	112	126	126
CROOK	34	32	22
CURRY	25	26	35
DESCHUTES	103	101	112
DOUGLAS	104	126	149
GILLIAM	1	5	2
GRANT	26	29	27
HARNEY	16	15	21
HOOD RIVER	42	45	33
JACKSON	194	220	268
JEFFERSON	40	47	36
JOSEPHINE	70	97	97
KLAMATH	107	107	138
LAKE	28	32	26
LANE	459	499	567
LINCOLN	69	63	61
LINN	145	164	191
MALHEUR	38	45	51
MARION	461	401	439
MORROW	13	12	13
MULTNOMAH	1,055	1,027	1,037
POLK	82	80	85
SHERMAN	1	5	6
TILLAMOOK	28	31	36
UMATILLA	101	99	100
UNION	30	29	36
WALLOWA	8	7	6
WASCO	33	38	43
WASHINGTON	285	383	400
WHEELER	5	3	5
YAMHILL	99	107	108

Also, please refer to page 14 in the CAF Appendices for the statewide view of the number of foster homes.

## **Exhibit S**

### **Differential or Alternative Child Protective Service Response (Also referred to as Dual Track)**

#### **What is differential response?**

An emerging national trend in child welfare is differential or alternative response to reports of abuse or neglect in families deemed lower risk or for less severe situations. Safety remains the paramount concern, however, there is flexibility in the type of response. Immediate safety concerns and reports of more serious abuse or neglect, such as sexual abuse and significant physical injury, are assigned for traditional Child Protective Services investigations. Families with a history of multiple reports also receive full investigations. However, less serious abuse and neglect reports may be diverted to a differential, alternate, or family assessment response.

This approach is characterized as more family-oriented, less coercive, and more focused on services. There is less focus in alternative response family assessments upon determining whether maltreatment occurred, pursuing legal action, or identifying and recording perpetrators.

Differential response should not be confused with a third track of prevention-oriented approaches such as Oregon's Safety Net program, in which outreach is made and services offered to families seen as "at risk" where there are no abuse or neglect allegations present. Community partners make this outreach rather than the child welfare agency.

#### **States that have differential response systems**

In the National Study of Child Protective Services Systems and Reform Efforts by the U.S. Department of Health and Human Services Children's Bureau, CPS agencies across the country were surveyed in 2001. Twenty states reported a provision for an alternate response. Those states are: Alaska, Arizona, Georgia, Idaho, Kansas, Kentucky, Louisiana, Maine, Minnesota, Missouri, Nevada, Oklahoma, Pennsylvania, South Dakota, Utah, Virginia, Vermont, Washington, Wyoming, and West Virginia. While some states have alternate response only in demonstration or pilot sites, others provide for it statewide.

#### **Research evidence**

There is limited research evidence available at this time about the outcomes and effectiveness of differential response systems. A study of the Minnesota alternative response system by the Institute of Applied Research reported preliminary positive outcomes in its continuing longitudinal study. Findings in 2004 at the three-year mark were that child safety was not compromised but status of children improved with this approach because of increased engagement and service provision. Families receiving alternate response reported greater satisfaction and involvement than were reported by a control group. Initial costs for alternate response were greater because more services were provided and greater worker time was needed, but in the longer term, alternate response was found to be more cost effective.

#### **Issues and implementation challenges**

The DHHS National Study of Child Protective Services found that many states had to make significant revisions and systems improvements to their alternate response systems following initial implementation. Among the challenges they reported were:

- Need to assure that cases could be reassigned from alternative response to investigation
- Need to integrate CPS with other services, such as economic support
- Need to assess community capacity to support alternative response
- Need to train workers
- Recognition of staff workload impact

- Recognition of domestic violence as a safety issue

According to the National Child Welfare Resource Center for Family-Centered Practice, the safety of children should always be the paramount concern in the child welfare system. The priority in a differential response system must be to provide services to substantiated cases of abuse and neglect. For differential response to be effective, states must have available services to meet the needs of these families. It is critical that families in the assessment track not escape the oversight of one responsible agency even though services are voluntary. Cases that remain in the “investigation” track require more rigorous practice, as they are likely to be more serious. It may be necessary to reassign for traditional CPS assessment if more information is gathered during the less intrusive assessment process that suggests a higher level of intervention is needed. Partnerships and new working relationships with community agencies are needed. Extensive state policy revisions are required.

## Exhibit T

The Public Records Law explicitly encourages public agencies to “guarantee to its citizens the right to know about the activities of their government.” Requests from the public only pertain to existing documents; not information, because a public record is “any writing containing information relating to the conduct of the public’s business \* \* \* prepared, owned, used or retained by a public body.” Generally speaking, personnel disciplinary actions are exempt from disclosure. This includes records of “materials or documents supporting that action.” However, various exceptions weaken this exemption. This article explores when records of personnel disciplinary actions must be produced under the Public Records Law.

In a lawsuit seeking the production of personnel disciplinary action records a court first presumes that exemptions to the Public Records Law do not apply. In making this presumption, courts balance the public need to know the information against the employee’s right to privacy. Four significant factors can influence the balancing test; (1) the *status of the disciplinary investigation*, (2) the *status of the employee*, (3) the *nature of the conduct*, and, (4) *whether parallel legal proceedings* are in play. Courts are more likely to defer to a public agency’s refusal to produce the requested documents if the employee is *still being investigated*. If no decision has been made about disciplinary action courts recognize that compelling production may unduly interfere with the investigation and skew the findings. To a degree, even if the employer has completed the investigation, courts will permit the public agency time to consult with legal counsel as to whether and to what extent the requested documents must be produced.

In the past, Oregon courts held that a public agency must produce documented investigatory information. If the most critical investigatory information is undocumented a request for production that is granted by the court may be fruitless since the agency need not document everything in an investigation.

If an investigation is completed and disciplinary action was imposed against an employee, the balancing test is more favorable toward the employer. One reason Oregon courts defer to a public agency’s refusal to produce *after* discipline is imposed is because the existence of the discipline may be deemed sufficiently embarrassing to impact the disciplined employee’s privacy interests. But, if a public agency decides against discipline after an investigation is complete, the balancing test weighs more in favor of the public’s need to know because, arguably, there is no embarrassment for the employee.

The *status of an employee* may also affect the balancing test. Employees of high rank, within supervisory or leadership positions, enjoy less of an expectation of privacy. Oregon case law indicates that when high ranking public officials engage in even illegal off-duty conduct, courts are less likely to recognize such officials as having a sufficient privacy interest.

Employees who are promoted as a public image of model behavior also have less of a privacy interest. For instance, if a public employee trains others regarding proper workplace behavior, that employee has a diminished privacy interest in disciplinary records for behavior contrary to his or her promoted behavior. Sometimes the *nature of the conduct* from which a personnel disciplinary action or related investigation is based may tilt the balance in one direction or the other. As stated by the Oregon Supreme Court, if “the conduct involved directly bears on the possible compromise of a public official’s integrity in the context of his public employment” then the invasion of the official’s privacy is not unreasonable. The most salient example of the compromise of integrity occurs when a public employee commits a crime. However, the public agency should be wary of quickly producing personnel records related to charged crimes. Before production, criminal

proceedings must be completed and must have been public. Moreover, the criminal action must be related to the disciplinary action and the employee must enjoy a high profile position. Without all of these reasons, Oregon courts will tend to weigh more favorably for the privacy interests of the employee against the public's need to know.

The existence of *parallel legal proceedings* is also a factor in whether disciplinary records are exempt from production. Different production rules are triggered in a civil or criminal case. If the proceeding is a union initiated grievance, the union will tend to encapsulate all requests under the umbrella of the Public Employee Collective Bargaining Act (PECBA). Public Records in criminal and civil cases are frequently produced through subpoena power, or if challenged, through court orders to compel production. Thus, when multiple levels of litigation are in play, exemptions to the Public Records law rarely apply.

A public records request is not always a simple matter therefore public agencies may find their interests best served by seeking legal counsel when such requested are received.