



November 2021 Caseload Estimating Conference

RI Department of Human Services

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Caseload Testimony

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November 2021 Caseload Conference

Rhode Island Department of Human Services

The members of the Caseload Estimating Conference have requested that the Executive Office of Health and Human Services (EOHHS) and the Department of Human Services (DHS) provide written answers to various questions in addition to the presentation of their estimates. These answers are provided throughout the document and highlighted in red text.

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Rhode Island Works (RIW) Program

RI Works is Rhode Island's name for the federal Temporary Assistance to Needy Families (TANF) program. Authorized under Public Law 104-193 in 1996 (the welfare reform legislation "Personal Responsibility and Work Opportunity Reconciliation Act" or PRWORA), the TANF program is a block grant to states to achieve the following purposes:

- Assisting needy families so that children can be cared for in their own homes
- Reducing the dependency of needy parents by promoting job preparation, work and marriage
- Preventing out-of-wedlock pregnancies
- Encouraging the formation and maintenance of two-parent families

States create their own programs within the parameters of TANF. RIGL § 40-5.2 authorizes RI Works. It was previously known as the Family Independence Program (FIP) when enacted in 1997. In 2008, it was revised as the RI Works program to align with TANF's employment goals and policies and to help recipient families become employed and self-sufficient. The goal of RI Works is to eliminate or reduce the harmful effects of poverty on families and children by fostering employment and opportunity as a means to economic independence (RIGL § 40-5.2-6 (a)); and to eliminate the stigma of welfare by promoting a philosophy and a perception that the purpose of welfare is to eliminate or reduce the harmful effects of poverty on families and children by promoting work opportunities for all Rhode Island residents (RIGL § 40-5.2-6 (c)).

All activities and services provided through the RI Works program are intended to promote stability and economic progress for families through the provision of supportive services, the development of employment skills and intensive work readiness services. The RI Works Program supports adult family members to work by offering the following benefits and services:

- **Cash Assistance** is provided to needy families that meet certain guidelines
- **Comprehensive Assessment and Service Planning** for families receiving cash assistance
- **Child Care Assistance** is provided to support the family, when needed
- **Assistance with Job Training, Adult Education and Finding Work**
- **Food Assistance** is provided by Supplemental Nutrition Assistance Program (SNAP)
- **Transportation:** reimbursement and/or bus passes are available to support preparation for employment
- Parents are strongly encouraged to apply for **Healthcare** while on RI Works

The TANF Block Grant is the primary funding source for RI Works. In order to draw Rhode Island's \$94.7million federal grant, the State is required to maintain a historic level of investment in programs that serve low-income families. This investment is called Maintenance of Effort (MOE), and these expenditures are calculated each fiscal year and must be at least 80 percent of historic "qualified" state expenditures under the former Aid to Families with Dependent Children (AFDC) Program. In Rhode Island, 80 percent MOE is \$64.4million.

Profile of RI Works

Household Breakdown	Household Breakdown	
	Households with 1 parent	48.9%
	Households with 2 parents	1.6%
	Households with child-only cases	49.5%

Race and Ethnicity	Race and Ethnicity	
	American Indian or Alaskan Native, Non-Hispanic	1.14%
	Asian, Non-Hispanic	0.87%
	Black or African American, Non-Hispanic	14.26%
	Native Hawaiian or Other Pacific Islander, Non-Hispanic	0.09%
	White, Non-Hispanic	22.35%
	Hispanic, including Mexican, Puerto Rican, and Cuban	18.34%
	Unable to Determine the Ethnicity or Race	42.95%

Age	Age	
	Adults ages 18 and older	23.7%
	Children under age 18	76.3%

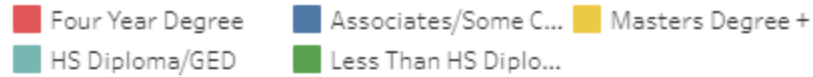
Recipients per Household	Recipients per Household	
	1 individual	31.72%
	2 individuals	33.13%
	3 individuals	19.16%
	4+ individuals	15.99%

Profile of RI Works (Continued)

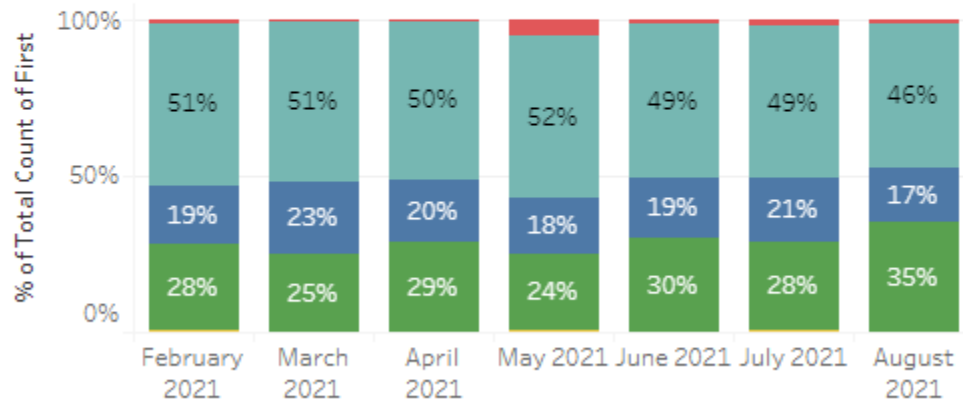
Education Achieved	English Speaking Adults		
	1st Grade & Below	< 1%	
	2nd-3rd Grade	0%	
	4th-5th Grade	0%	
	6th-7th Grade	< 1%	
	8th-9th Grade	8.9%	
	10th-11th Grade	20.2%	
	12 th Grade & Above	67.7%	
	Unknown	2.2%	

Education Achieved	Spanish Speaking Adults		
	1st Grade & Below	< 1%	
	2nd-3rd Grade	0%	
	4th-5th Grade	2.9%	
	6th-7th Grade	6.7%	
	8th-9th Grade	16.1%	
	10th-11th Grade	28.1%	
	12 th Grade & Above	45.2%	
	Unknown	1%	

Color Key



Education Level



RI Works Cases by City/Town

City/Town	City/Town	Cases	Individuals
	Barrington	3	9
	Bristol	14	28
	Burrillville	14	29
	Central Falls	86	197
	Charlestown	3	5
	Coventry	21	36
	Cranston	85	181
	Cumberland	20	49
	East Greenwich	9	16
	East Providence	73	152
	Exeter	0	0
	Foster	3	8
	Glocester	2	5
	Hopkinton	5	10
	Jamestown	4	7
	Johnston	29	49
	Lincoln	17	40
	Little Compton	2	4
	Middletown	23	52
	Narragansett	5	14
	New Shoreham	0	0

Newport	63	154
North Kingstown	22	50
North Providence	35	62
North Smithfield	5	17
Pawtucket	218	490
Portsmouth	5	12
Providence	798	1953
Richmond	5	10
Scituate	3	4
Smithfield	7	13
South Kingstown	14	27
Tiverton	14	23
Warren	11	21
Warwick	72	174
West Greenwich	3	5
West Warwick	60	135
Westerly	14	22
Woonsocket	215	488
Undetermined	7	22
Total	1989	4573

Question: Please provide a profile of current 1-parent, 2-parent, and child only cases by demographics (such as age and residence) and by duration of benefits.

Question: Please provide a profile of hardship cases by similar criteria as listed above.

Answer: Please see charts below.

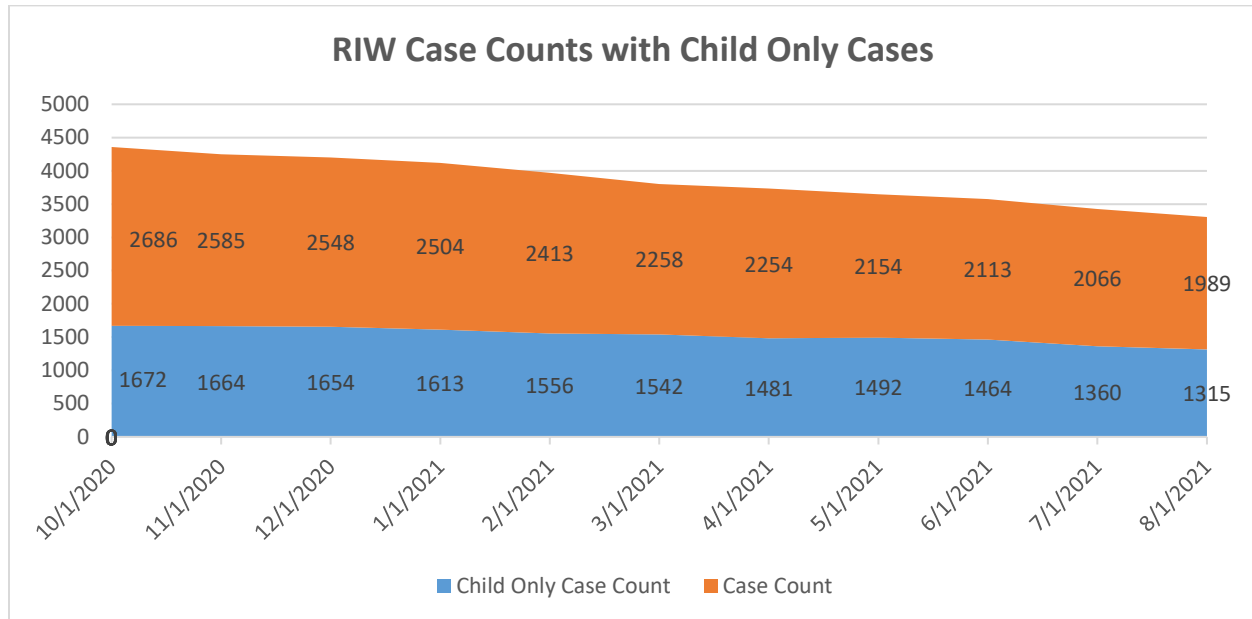
Family Type		Months on RI Works				
		0-24	25-48	49-60	>60	Total
	Single-Parent	338	468	101	65	972
	Two-Parent	14	14	2	2	32
	Total	352	482	103	67	1,004

		Cases		
City/Town	City/Town	Child-Only	Single-Parent	Two-Parent
	Barrington	0	3	0
	Bristol	4	10	0
	Burrillville	6	8	0
	Central Falls	50	34	2

Charlestown	1	2	0
Coventry	16	5	0
Cranston	45	39	1
Cumberland	9	11	0
East Greenwich	6	3	0
East Providence	33	39	1
Exeter	0	0	0
Foster	0	3	0
Glocester	1	1	0
Hopkinton	3	2	0
Jamestown	2	2	0
Johnston	20	9	0
Lincoln	7	10	0
Little Compton	0	2	0
Middletown	9	14	0
Narragansett	4	1	0
New Shoreham	0	0	0
Newport	27	36	0
North Kingstown	11	11	0
North Providence	18	17	0
North Smithfield	0	5	0
Pawtucket	105	111	2
Portsmouth	4	1	0
Providence	404	376	18
Richmond	2	3	0
Scituate	3	0	0
Smithfield	2	5	0
South Kingstown	11	3	0
Tiverton	7	7	0
Warren	5	6	0
Warwick	27	44	1
West Greenwich	2	0	1
West Warwick	26	34	0
Westerly	10	4	0
Woonsocket	102	107	6
Undetermined	3	4	0
Total	985	972	32

Question: How many child-only cases are included in the estimate for FY2021 and FY2022? How many families receive the payment(s)?

Answer: 38 percent of the caseload is projected to be child only cases for FY2022 and 35 percent for FY2023. The percentage of child only cases prior to COVID had been stable at 35 percent. The percentage of child only cases since COVID have varied from 26 percent to 41 percent. The projection was created using a weighted average of the past 24 months that encompasses both before COVID and during COVID.



Question: How many parents are currently without a plan due to:

a. Exemption from employment planning

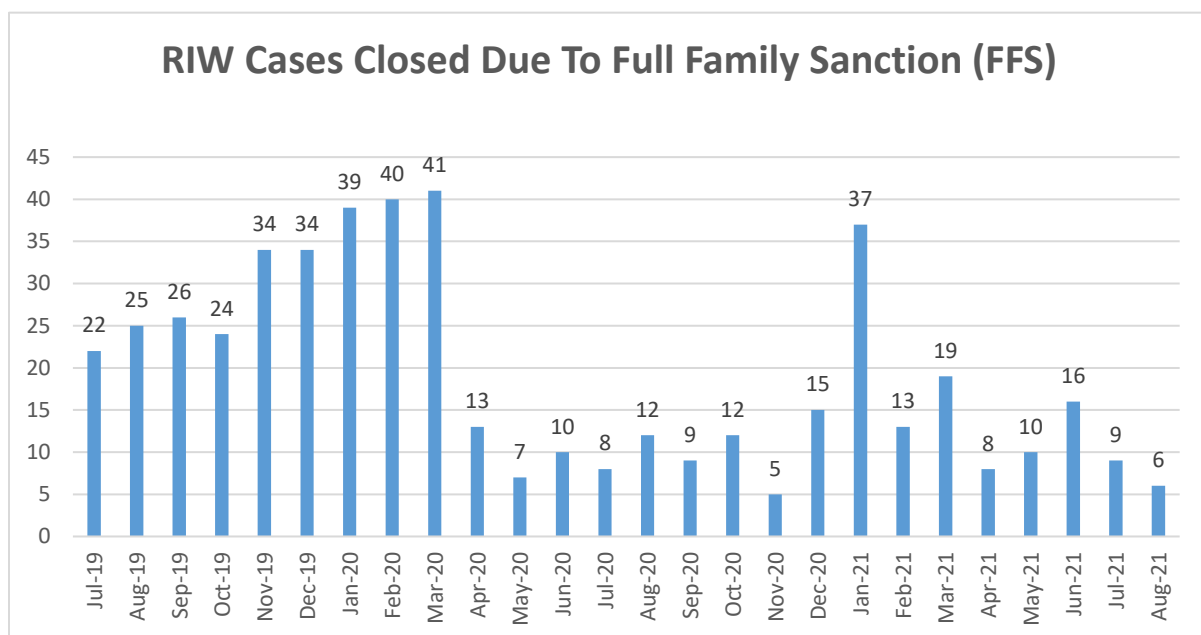
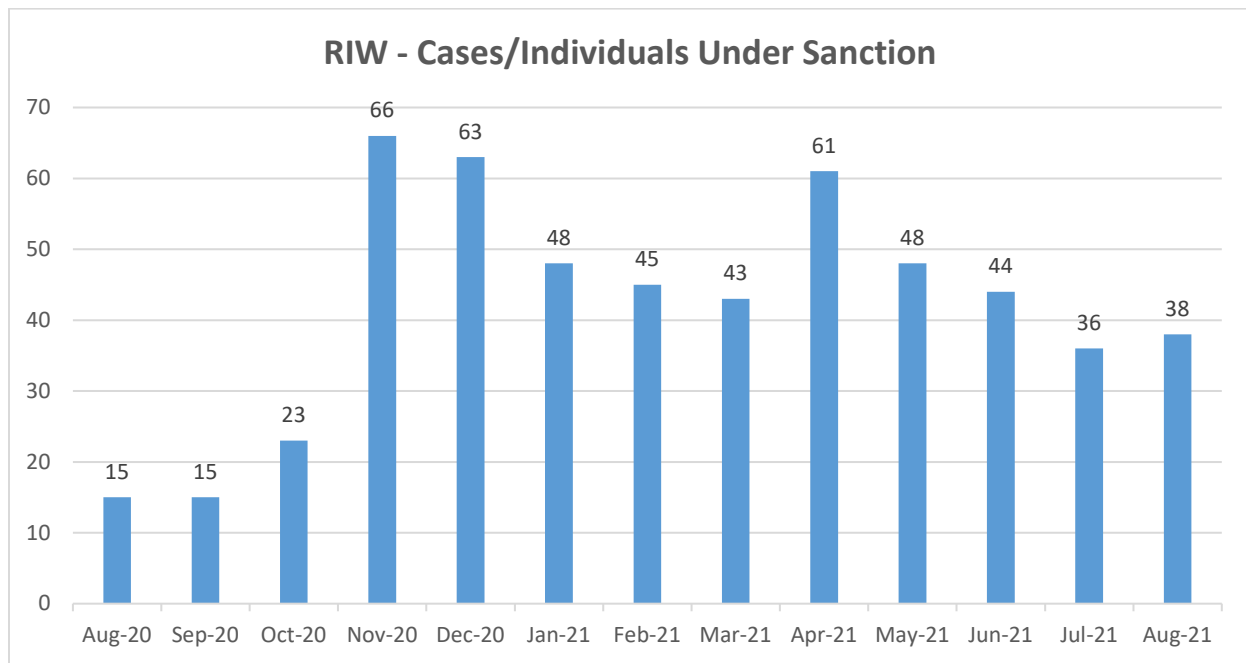
Answer: 90 cases are currently active with exemptions

b. Being between plans

Answer: 103 cases are currently active without a plan

c. Sanction—by month, the number of parents sanctioned for not complying with work requirements in FY2021 –

Answer: Please see graphs below



This chart does not represent the number of cases actively participating in RI Works while receiving a FFS, but rather the number of non-compliant cases who closed due to a FFS.

RI Works Trends

Over the past decade the number of families participating in RI Works program tended to decrease, especially when the economy improved, and more Rhode Islanders went back to work. During the beginning of the COVID-19 pandemic, the RI Works caseload had greatly reduced due to opportunities for the RI Works families, specifically the Pandemic Unemployment Assistance (PUA). The DHS lobby closures for the safety of customers and staff may have also contributed.

Since the end of PUA on September 4, 2021, DHS has seen a RI Works caseload increase of four percent or 90 cases. Additionally, there has been a steady increase of RI Works applications at 10 percent from June 2021 through August 2021, and then a spike in applications beginning in mid-September at over 85 percent.

The Department estimates that for the remainder of state FY2022, the caseload will increase consistently through December 2021, and then see a gradual three percent increase through the rest of FY2022. In FY2023, the caseload is projected to continue the gradual increase by two percent over time.

The initial increase beginning in September was due to PUA ending. PUA had made individuals, who would not otherwise qualify for Unemployment Insurance (UI), eligible to receive unemployed assistance due to the pandemic.

In addition to PUA ending, DHS has partnered with community agencies to conduct outreach to families who had become unengaged in RI Works. Partnering agencies have increased supports for applicants as well as existing RI Works customers. The increased access to assistance for both DHS applications and required documentation will contribute to the gradual increase in RI Works cases through FY2023.

According to the 2021 Rhode Island Kids Count Factbook, 14 percent of children in RI are living in poverty and seven percent of children are living in extreme poverty, which equals more than 13,000 children¹. The RI Works program is providing benefits to roughly 4,000 children or 31 percent of the children living in extreme poverty. This is only 0.88 percent of the RI population.

RI Works families often require additional wraparound services, above and beyond those required by the typical job seeker, to secure long-term employment. Families frequently face many barriers: including unstable housing, mental health and substance abuse challenges, low literacy levels, and other challenges associated with living in poverty. DHS and RI Works providers take the necessary time to develop stabilization services and help residents access long-term employment on their pathway out of poverty.

Question: The FY2022 Budget as Enacted increased the amount of cash assistance RI Works participants receive. Please explain how this will impact the RI Works Budget and the cost per person.

Answer: The increased expenses for direct payments to RI Works recipients will increase by 30 percent. The cost per case in FY2022 and FY2023 is expected to be \$239. This number was derived from the average cost per case in FY2021 increased by thirty percent.

¹ [6783 LCACT 1st Mailer \(rikidscount.org\)](https://www.rikidscount.org/)

RI Works Recent Legislative Changes

30% Increase to Standard of Assistance

The increase to the standard of assistance was effective on July 1, 2021 and implemented in August 2021. September 2021 was the first month of the increased standard of assistance. Both July and August 2021 were paid out in August. RI Works projections for FY2022 and FY2023 include the expected increase cost per case as a result of the statute change.

Earned Income Disregard

RI Bridges will be able to calculate the Earned Income Disregard beginning on January 1, 2022. The expected cost for FY2022 is \$175,000, and for FY2023 is \$400,000. These projections include the increased standard of assistance. RI Works recipients eligible for this disregard must be compliant with their employment plan, under the 48-month time limit and making under 185-percent of the Federal Poverty Level (FPL).

Age Simplification

The statutory change for dependents who are 18 allow for full-time high school students or high school equivalency students to remain in the RI Works household even if they will not graduate by their 19th birth month. This was implemented in October 2021, and the Department estimates that this statutory change will affect 100 individuals in FY2022, and estimated to cost less than \$25,000.

Clothing Allowance

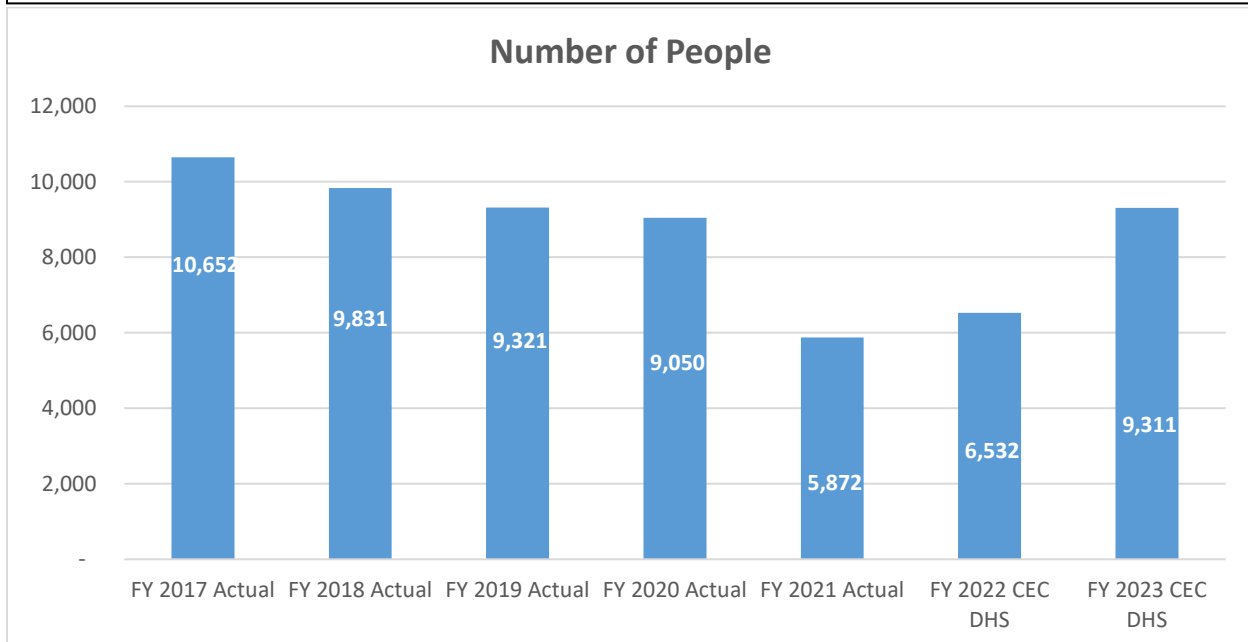
The RI Works Clothing Allowance was expanded to include children in a RI Works home, including those under the age of four. The amount was statutorily locked at \$100 per child. The first clothing allowance was issued in July and available for recipients in August. A second clothing allowance will run in the first week of December for the remaining children. The Clothing Allowance attributed to the statutory change is estimated to cost \$125,000.

Veteran's Disability Benefits

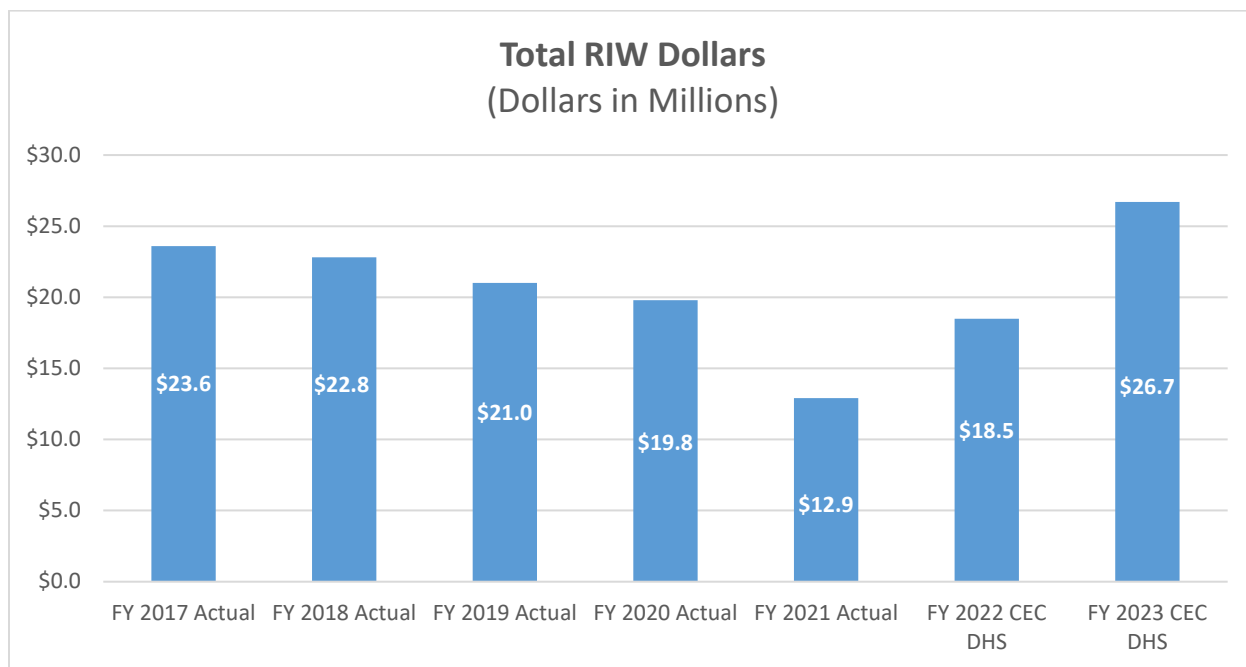
There are no existing applications or RI Works recipients with this type of income.

Question: Previous DHS testimony noted the impact of closed field offices on enrollment. Please provide a detailed update on the planned reopening of field offices including a timeline and what assumptions are included with respect to the impact of field offices and other upcoming customer service changes on enrollment.

Answer: RI Works recipients will be the first group eligible for in-person appointments, beginning with only recertification appointments in November 2021. Due to offices being moved, the limited recertification appointments will only be available for four of the six DHS offices, excluding Providence and Woonsocket. DHS anticipates a phased-in approach for reopening the offices, starting with certain identified program groups and then building in additional appointments and programs. The initial phases, updated COVID data and health and safety recommendations from the RI Department of Health and CDC will help determine the pace for additional appointments and programs. Again, November 2021 is only for recertification appointments in four offices, and the RI Works recipient will choose if they want to have their recert appointment in the office or over the phone. The three percent increase in the third and fourth quarter of FY2022, as well as the continued increase in FY2023, includes the estimates for DHS offices reopening in this phased manner.



Total expenditures in FY2021 reflect both the overall trend of gradually decreasing RI Works cases and the sharp decline of cases due to the COVID-19 pandemic. FY2022 has an expected increase in the second quarter followed by a three percent increase due to a projected slowed economic recovery and field offices reopening in phases. Community agencies that have partnered with DHS will continue to provide support to families applying for RI Works. Estimates for FY2023 include a constant increase of two percent, and DHS expects to regain the RI Works eligible families lost during the COVID-19 pandemic.



COVID-19 Expenses

The Department had observed a reduction in the RI Works caseload during the COVID-19 pandemic. The FY2022 caseload projections reverse this decline in the second quarter due to PUA no longer being available. This will be followed by a three percent increase in quarter three and four with expected growth that will continue through the remainder FY2022. The FY2023 caseload projections anticipate a slower growth in caseload of two percent.

During the first six months of COVID, the Department protected RI Works families from losing their benefits. Cases had been held open to ensure parents could continue to receive the essential RI Works benefits through August 2020. Sanctions were also not applied until September 2020. Many of the remedial measures to preserve the RI Works population and caseload have been lifted. This included closing cases due to failure to return a recertification report, closure for reaching the time limit and applying sanctions to cases for non-compliance. Interim reporting has returned in FY2022. Throughout COVID, RI Works benefits continued to close for reasons like families being over income or not returning required documentation.

The American Rescue Plan Act provided a Pandemic Emergency Assistance Fund (PEAF), which are additional COVID-19 funds. These federal funds, totaling \$2,703,236.98, are specifically for Non-Recurrent, Short Term Benefits (NRST) that support TANF-eligible populations. NRST benefits mean cash payments or other benefits that meet the regulatory definition (45 CFR 260.31(b)(1)), but are limited to those that fall into the specific expenditure reporting category mentioned in the legislation (line 15 of the ACF-196R, the state financial reporting form for the TANF program). The use must satisfy TANF rules including Income Eligibility Verification System (IEVS) and citizenship requirements. DHS' application to ACF is for a one-time NRST payment to SNAP households with children who earn at or under 100 percent of the FPL. PEAF must be spent

by September 30, 2022. The Department expects to spend the funds in the fourth quarter of FY2022.

Question: Please provide the underlying assumptions the Department is utilizing to assess the impact of COVID-19 on the RI Works program with respect to caseload and costs.

- a. How has the end of the Pandemic Unemployment Assistance program (on September 4, 2021) impacted the trends of enrollment in the RI Works program, and what are the anticipated impacts of this policy change?

Answer: As Identified in RI Works Trends, there has been an 88 percent increase to applications in September 2021. This correlates with the expected caseload increase through the second quarter of FY2022.

- b. How has COVID-19 impacted catastrophic expenses?

Answer: Fewer RI Works recipients are requesting catastrophic expenses or assistance due to a lower caseload and potentially due to the offices being closed. These expenses are expected to stay low during both FY2022 and FY2023.

- c. Please note any changes in assumptions compared to the FY2022 Enacted Budget.

Answer: The changes expected due to the 2022 State Budget are still within the FY2022 enacted budget line items.

- d. Has the Department noticed a shift in enrollment based on any of the regulatory changes in response to COVID-19 to make the program more accessible? If so, please quantify to the extent possible.

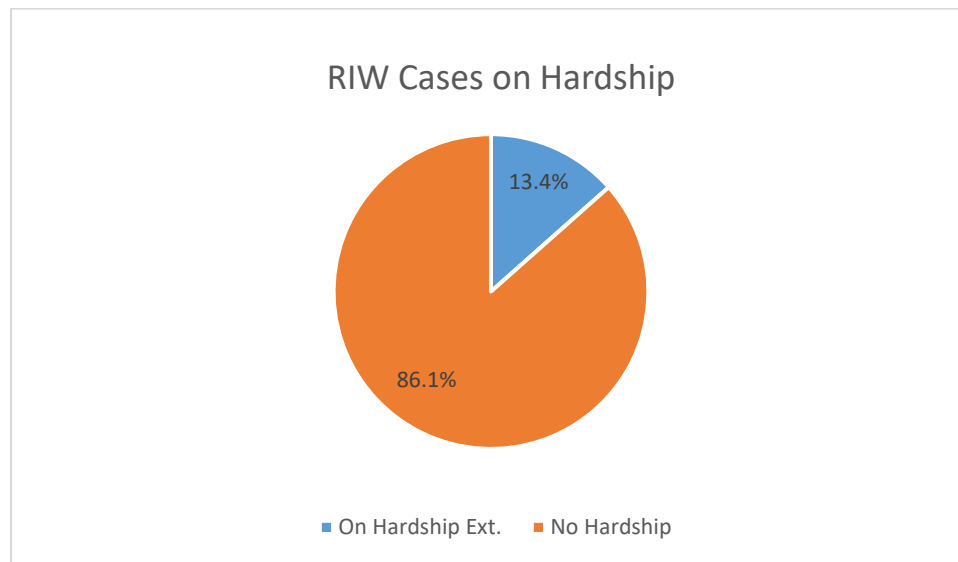
Answer: There is no direct data showing that regulatory changes have affected the RI Works caseload. The assumption is that the shift in enrollment is largely due to PUA ending. Customers applying are largely recent PUA recipients.

- e. Please provide the expenditures from COVID-19 RI Works emergency payments that have been made. Please provide an estimate of expected future emergency payments.

Answer: Pandemic Emergency Assistance Funds (PEAF) have not been spent. Expenditures are expected in the fourth quarter of FY2022. The American Rescue Plan Act has provided PEAF to Rhode Island for Non-Recurrent, Short Term Benefits (NRST). NRST benefits mean cash payments or other benefits that meet the regulatory definition.

Hardships Extensions

Hardship extensions are available for various reasons to families reaching time limits. Currently, hardship extensions are granted for six-month increments. Cases classified as “hardship” cannot have employment plan exemptions, cannot be “between plans” and cannot be under sanction.



The number of hardships as a percent of total caseload remains below the federal statutory ceiling of 20 percent. Rhode Island’s hardship cases constitute approximately 13 percent of the current caseload.

Work Participation Rate (WPR) Overview

RI Works parents are required to participate in employment preparation activities and must do so for a minimum number of hours per week on average for the month, per Federal TANF regulations. Those required minimum hours differ based on the age of the youngest child and whether there is a second parent in the household.

- Parents whose youngest child is under the age of 6 must participate for a minimum of 20 hours per week.
- Parents whose youngest child is six or older must participate for a minimum of 30 hours per week.
- Two-parent families must participate for a minimum of 35 hours per week.

Not all RI Works parents are required to participate in employment-related activities. Some are exempt for reasons including being disabled, caring for a child under one-years-old, caring for a disabled child or family member, or are in the third trimester of pregnancy and medically unable to work. Others are exempt because they are “child-only” cases where the parents or caretaker relatives do not receive a cash payment for themselves (i.e. parent on SSI or children in kinship care).

Unless exempt, parents receiving a cash payment are required to comply with an employment plan. Parents can be sanctioned or closed if they are not meeting the minimum required employment plan hours without good cause. If parents can provide good cause for a failure to comply with their employment plans, then their case will not be sanctioned or closed. Occasionally parents have ended their planned activities without new employment plans, also referred to as “between plans.”

Question: Please provide the “all families” and “two-parent families” work participation rate for FY2020 and FY2021, along with a work participation rate target.

Answer: WPR for 2014, 2015, 2016, 2017, 2018 and 2019.

- FY2014: Required all families: Required 0.0percent (met 12.1percent)
Required 2-parent families: Required 39.8percent (not met 8.7percent)
- FY2015: Required all families: Required 0.9percent (met 14.9percent)
Required 2-parent families: Required 40.9percent (not met 11percent)
- FY2016: Required all families: Required 0.0percent (met 14.9percent)
Required 2-parent families: Required 34.8percent (not met 12.0percent)
- FY2017 Required all families: Required 0.0percent (met 8.5percent)
Required 2-parent families: Required 29.5percent (not met 5.8percent)
- FY2018 Required all families: Required 0.0percent (met 8.2percent)
Required 2-parent families: Required 30.2percent (not met 7.1percent)
- FY2019 Required all families: Required 0.0percent (met 8.9percent)
Required 2-parent families: Required 31.2percent (not met 11.8percent)
- FY2020 Required all families: Required 0.0 percent (met 6.8 percent)
Required 2-parent families: Required 27.6 percent (not met 7.3 percent)
- FY2021 is not yet available.

Federal Work Participation Rate (WPR) data is derived from a quarterly data interface that is reviewed by the Administration for Children and Families (ACF). The State cannot currently calculate WPR. Instead, ACF provides the State with feedback based on data submissions.

Question: Please provide an update on the status of current or potential federal penalties associated with the work participation rate.

Answer:

<u>Penalty Year</u>	<u>Reason</u>	<u>Status</u>	<u>Amount</u>
2013	Met overall WPR, did not meet 2-parent family WPR	Pending Appeal, Waiting on ACF	\$ 258,715.00
2014	Met overall WPR, did not meet 2-parent family WPR	Pending Appeal, Waiting on ACF	\$ 129,635.00
2015	Met overall WPR, did not meet 2-parent family WPR	Pending Appeal, Waiting on ACF	\$ 98,545.00
2016	Met overall WPR, did not meet 2-parent family WPR	Pending Appeal, Waiting on ACF	\$ 29,587.00
2017	Met overall WPR, did not meet 2-parent family WPR	Pending Appeal, Waiting on ACF	\$ 80,264.00
2018	Met overall WPR, did not meet 2-parent family WPR	Pending Appeal, Waiting on ACF	\$ 69,094.00
2019	Met overall WPR, did not meet 2-parent family WPR	Pending Appeal, Waiting on ACF	\$ 64,231.00
2020	Met overall WPR, did not meet 2-parent family WPR	Pending Appeal, Waiting on ACF	\$ 61,614.00

TANF Balances By Quarter with Cumulative Unspent Amounts in column 4					
		col 1	col 2	col 3	col 4
Fiscal Year	TANF - by quarter	block grant award by quarter	Expended by quarter per RIFANS	Variance between block quarterly award and RIFANS quarterly expended: col (1) + col (2)	Cumulative Balance of TANF Block Grant: col (4) from prior quarter + col (3)
SFY 2017	Jul 16 - Sep 16	\$23,563,174	(\$11,717,901)	\$11,845,273	(\$6,485,667)
	Oct 16 - Dec 16	\$24,280,798	(\$20,373,670)	\$3,907,128	(\$2,578,539)
	Jan 17 - Mar 17	\$24,182,782	(\$25,003,535)	(\$820,753)	(\$3,399,292)
	Apr 17 - Jun 17	\$21,459,102	(\$35,539,958)	(\$14,080,856)	(\$17,480,148)
SFY 2018	Jul 17 - Sep 17	\$22,962,866	(\$13,109,314)	\$9,853,552	(\$7,626,596)
	Oct 17 - Dec 17	\$24,127,153	(\$22,426,027)	\$1,701,126	(\$5,925,470)
	Jan 18 - Mar 18	\$24,126,753	(\$25,923,996)	(\$1,797,243)	(\$7,722,713)
	Apr 18 - Jun 18	\$23,174,351	(\$31,597,343)	(\$8,422,992)	(\$16,145,705)
SFY 2019	Jul 18 - Sep 18	\$23,279,759	(\$13,034,617)	\$10,245,142	(\$5,900,563)
	Oct 18 - Dec 18	\$24,384,884	(\$27,560,602)	(\$3,175,718)	(\$9,076,281)
	Jan 19 - Mar 19	\$24,048,466	(\$19,323,440)	\$4,725,026	(\$4,351,255)
	Apr 19 - Jun 19	\$23,128,577	(\$33,031,439)	(\$9,902,862)	(\$14,254,117)
SFY 2020	Jul 19 - Sep 19	\$22,729,909	(\$11,942,662)	\$10,787,247	(\$3,466,870)
	Oct 19 - Dec 19	\$24,368,651	(\$21,512,479)	\$2,856,172	(\$610,698)
	Jan 20 - Mar 20	\$24,051,704	(\$20,205,333)	\$3,846,371	\$3,235,673
	Apr 20 - Jun 20	\$23,143,841	(\$31,989,589)	(\$8,845,748)	(\$5,610,075)
SFY 2021	Jul 20 - Sep 20	\$23,143,820	(\$11,331,774)	\$11,812,046	\$6,201,971
	Oct 20 - Dec 20	\$24,368,648	(\$20,073,310)	\$4,295,338	\$10,497,309
	Jan 21 - Mar 21	\$23,548,050	(\$19,971,203)	\$3,576,847	\$14,074,156
	Apr 21 - Jun 21	\$23,548,153	(\$17,828,331)	\$5,719,822	\$19,793,978
SFY 2022	Jul 21 - Sep 21	\$23,243,165	(\$8,184,006)	\$15,059,159	\$34,853,137
	Oct 21 - Dec 21 (est)	\$24,000,000	(\$22,308,941)	\$1,691,059	\$36,544,196
	Jan 22 - Mar 22 (est)	\$24,000,000	(\$23,402,214)	\$597,786	\$37,141,982
	Apr 22 - Jun 22 (est)	\$24,000,000	(\$34,104,839)	(\$10,104,839)	\$27,037,143
SFY 2023	Jul 22 - Sep 22 (est)	\$22,708,016	(\$12,776,333)	\$9,931,683	\$36,968,826
	Oct 22 - Dec 22 (est)	\$24,000,000	(\$22,308,941)	\$1,691,059	\$38,659,885
	Jan 23 - Mar 23 (est)	\$24,000,000	(\$23,402,214)	\$597,786	\$39,257,671
	Apr 23 - Jun 23 (est)	\$24,000,000	(\$38,762,512)	(\$14,762,512)	\$24,495,159
SFY 2017		\$93,485,856	(\$92,635,064)	\$850,792	
SFY 2018		\$94,391,123	(\$93,056,680)	\$1,334,443	
SFY 2019		\$94,841,686	(\$92,950,098)	\$1,891,588	
SFY 2020		\$94,294,105	(\$85,650,063)	\$8,644,042	
SFY 2021		\$94,608,671	(\$69,204,618)	\$25,404,053	
SFY 2022		\$95,243,165	(\$88,000,000)	\$7,243,165	
SFY 2023		\$94,339,368	(\$98,500,000)	(\$4,160,632)	

Question: Please update FY2022 and FY2023 TANF block grant estimates. Include the balance of any unspent funds from prior years and report any plans for its use. Please include FY2021 expenses and identify the other Departments that received funding and the amount.

Answer: See above. Additional expenditures due to outreach and application supports will occur in the 2275116 account. These measures are necessary to support this population during COVID. Additionally, funding increases for multigenerational literacy and technology needs expanded during COVID.

How much of the TANF funding is being used for UHIP in FY2022 and FY2023?

Answer: The total federal UHIP TANF funding for FY2022 and FY2023 is \$641,739 and \$494,150, respectively.

2022 TANF Budget							
Line Seq	Agency	LIS Name	FY21 Revised Enacted Budget (RIFANs)	FY21 Actual Expenditures (RIFANs)	FY22 Enacted Budget (RIFANs)	FY22 Expenditures As of 9/30/21 (RIFANs)	Description of the Services Funded by TANF
1710125	073	Work First - TANF	\$ -	\$ -	\$ -	\$ -	DLT workforce board to support RIW families
1710174	073	WPGN Res-Care	\$ 128,837	\$ 126,905	\$ 111,596	\$ 42,535	DLT Res-Care support RIW families
2018109	028	TANF-Child Care	\$ 4,568	\$ 205	\$ 5,849	\$ -	EOHHS salary expenses thru ALLOCAP supporting DHS
2025105	079	TANF/EA-CM Program- Federal Share	\$ 1,352,922	\$ 1,066,444	\$ 824,083	\$ 199,761	DCYF for TANF eligible youth to be served
2075106	079	TANF/EA-CW Program- Federal Share	\$ 7,481,842	\$ 6,892,110	\$ 5,755,100	\$ 1,252,114	DCYF for TANF eligible youth to be served
2075145	079	TANF/SSBG Grant	\$ 1,267,652	\$ 1,134,998	\$ 1,135,325	\$ -	DCYF for TANF eligible youth to be served
2075148	079	TANF - HCBS	\$ 1,232,348	\$ 1,232,718	\$ 1,232,348	\$ -	DCYF for TANF eligible youth to be served
2170182	075	DHS Home Visiting Coop	\$ 164,000	\$ 164,012	\$ 164,000	\$ -	RIDOH for RIW parents in the Family Visiting
2275116	069	C-Job Opport & Basic Skills Jobs	\$ 6,965,000	\$ 7,021,499	\$ 6,965,000	\$ 1,038,979	Contracted vendors engaging in direct services for RIW parents
2275121	069	Assistance Payments Admn	\$ 8,066,037	\$ 5,383,548	\$ 5,025,043	\$ 666,232	Administrative funds for DHS
2275177	069	TANF - Subsidized Employment Enhancement	\$ 200,000	\$ 190,519	\$ 200,000	\$ 87,723	Crossroads contract to provide services to homeless families
2275186	069	UHIP - TANF Federal Allocation	\$ 586,769	\$ 580,880	\$ 738,265	\$ 87,802	Administrative funds for UHIP
2275187	069	UHIP - Child Care Federal Allocation	\$ -	\$ -	\$ -	\$ -	Administrative funds for UHIP
2275202	069	UHIP- Non lapd TANF Federal	\$ 640	\$ 1,974	\$ 640	\$ 1,346	Administrative funds for UHIP
2400101	069	Fip/TANF - Regular	\$ 14,127,418	\$ 14,225,949	\$ 19,926,882	\$ 3,766,748	Cost for TANF/RIW benefits to families
2400107	069	AFDC Catastrophic Aid	\$ 300	\$ 2,302	\$ 4,000	\$ 200	Costs for families who have experienced a catastrophic event
2400110	069	Child Care - SSBG Reallocation	\$ 7,560,000	\$ 7,560,300	\$ 7,560,000	\$ 900	Funding of low income child care with TANF funds
2400111	069	TANF Transfer to CCDF	\$ -	\$ -	\$ -	\$ -	Funding of low income child care with TANF funds
2400112	069	Child Care - TANF Funds	\$ 21,288,315	\$ 21,287,964	\$ 28,408,954	\$ 1,032,590	Funding of low income child care with TANF funds
2400114	069	RIPTA Transportation Benefit	\$ 556,400	\$ 568,985	\$ 939,482	\$ 85	Funding of bus passes for RIW parents
2400115	069	Child Care Assistance Enhancement	\$ 936,544	\$ 936,544	\$ 936,544	\$ 11	Funding of low income child care with TANF funds
2400116	069	Governor's Workforce Training	\$ -	\$ -	\$ -	\$ -	DLT workforce board to support RIW families
2725162	072	Project Opportunity	\$ 1,000,000	\$ 826,763	\$ 1,000,000	\$ 6,981	Adult Education (ABE, ESL, GED)
Total			\$72,919,592	\$69,204,618	\$80,933,111	\$8,184,006	

TANF Maintenance of Effort (MOE)

The TANF Maintenance of Effort (MOE) is a requirement that a state must spend at least a specified amount of state funds for benefits and services for families in need each year. A broad array of benefits and services for low-income families with children can count toward satisfying a state's MOE obligation. A state may count any state funds used for TANF program services or any funds that meet the federal TANF purposes as TANF MOE toward the required \$64M benchmark.

Federal Law allows six types of expenditures that can be counted toward MOE requirements:

1. Cash assistance;
2. Child care assistance;
3. Educational activities designed to increase self-sufficiency;
4. Job training and work;

5. Any other use of funds reasonably calculated to accomplish a TANF purpose; and
6. Administrative costs in connection with other allowable purposes.

The consequences for not meeting the MOE are that the TANF grant will be reduced the following year on a dollar-for-dollar basis and the state will be required to expend additional state funds in its TANF program to the amount by which the state fell short of meeting the MOE.

The tables below show MOE expenditures by category and community organizations that receive TANF funding:

	FFY 2017 Reported to ACF	FFY 2018 Reported to ACF	FFY 2019 Reported to ACF	FFY 2020 Reported to ACF	FFY 2021 Projected to ACF
RIW Admin - DHS	\$1,634,276	\$941,339	\$1,656,013	\$2,913,488	\$2,500,000
Child Care MOE DHS	\$5,320,519	\$5,351,046	\$5,351,126	\$5,351,126	\$5,300,000
Emergency Assistance - DCYF	\$7,758,887	\$18,580,236	\$20,734,069	\$2,180,682	\$2,000,000
DCYF Other (a)	\$14,400,899	\$655,238	\$621,757	\$16,235,585	\$17,000,000
DEFRA (Child Support Pass-Thru)	\$376,985	\$305,986	\$277,647	\$268,957	\$200,000
RIDE Adult Ed	\$1,000,000	\$1,050,000	\$1,050,000	\$1,050,000	\$1,000,000
CAP Agencies (leg grants)	\$179,897	\$213,614	\$229,260	\$214,200	\$215,000
Head Start	\$800,000	\$1,190,000	\$1,190,000	\$1,190,000	\$1,190,000
SSI	-	\$2,758,468	\$2,654,551	\$2,613,169	\$2,600,000
GWB-DLT Youth Work Readiness	\$631,173	\$553,620	\$739,689	\$529,777	\$500,000
Earned Income Tax Credit	\$19,128,523	\$22,515,504	\$22,577,639	\$22,094,812	\$22,000,000
Property Tax Relief Program (Circuit Breaker)	-	\$189,099	\$137,718	\$118,980	\$115,000
DCYF Residential	\$17,745,797	\$13,688,409	\$12,694,648	\$4,178,130	\$4,000,000
Weatherization	\$2,585,750	\$6,320,988	\$7,835,733	\$6,488,963	\$6,000,000
Rhode Island Food Bank	\$3,042,643	\$3,401,525	\$3,523,303	\$3,136,951	\$2,500,000
Community Organizations (Listed Below)	\$2,686,604	\$890,269	\$2,908,915	\$2,801,769	\$2,800,000
Total	\$77,291,953	\$78,605,341	\$84,182,068	\$71,366,589	\$69,920,000

	FFY 2017 Reported to ACF	FFY 2018 Reported to ACF	FFY 2019 Reported to ACF	FFY 2020 Reported to ACF	FFY 2021 Projected to ACF
Roman Catholic Diocese of Providence	\$272,826	\$90,269	\$40,884	\$25,036	\$25,000
The Salvation Army	\$0	\$0	\$324,545	\$57,551	\$60,000
United Way of Rhode Island	\$1,055,928	\$0	\$1,355,336	\$692,548	\$1,000,000
Boys and Girls Club	\$800,000	\$800,000	\$800,000	\$800,000	\$1,000,000
Rhode Island Foundation	\$102,784	\$0	\$103,074	\$444,840	\$250,000
Sstarbirth	\$0	\$0	\$44,087	\$36,612	\$35,000
Crossroads	\$0	\$0	\$136,154	\$737,909	\$350,000
Dorcas International Institute	\$0	\$0	\$104,835	\$0	\$50,000
Non-Violence Institute	\$0	\$0	\$44,087	\$4,834	\$10,000
RI Coalition Against Domestic Violence	\$0	\$0	\$136,154	\$2,439	\$20,000
Total	\$2,686,604	\$890,269	\$3,089,156	\$2,801,769	\$2,800,000

Question: Please indicate how the State will meet its Maintenance of Effort (MOE) requirement and identify which MOE items are State costs and which are in-kind contributions.

Answer: DHS seeks MOE from both state agencies and other philanthropic agencies statewide. MOE is calculated using the methods provided by a previous vendor. DHS exceeded the MOE requirement by \$6.9M in 2020.

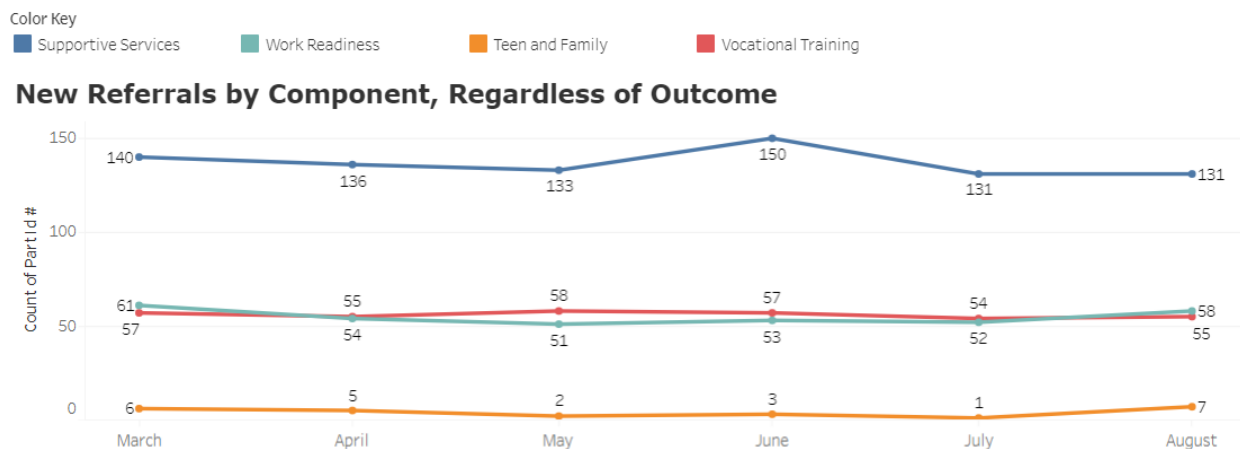
State Costs: \$58,938,906

In-kind: \$12,420,410

For FY2020 and future years, the Department has been instructed by ACF to calculate MOE differently by removing a provision previously allowed due to a prior law grandfathering. The grandfathering has ended. This significantly reduces the amount of allowable expenditures and MOE allowed from DCYF Residential. The Department is working on utilizing other avenues to collect the MOE from all sources. The Department feels confident that the MOE minimum will be achieved.

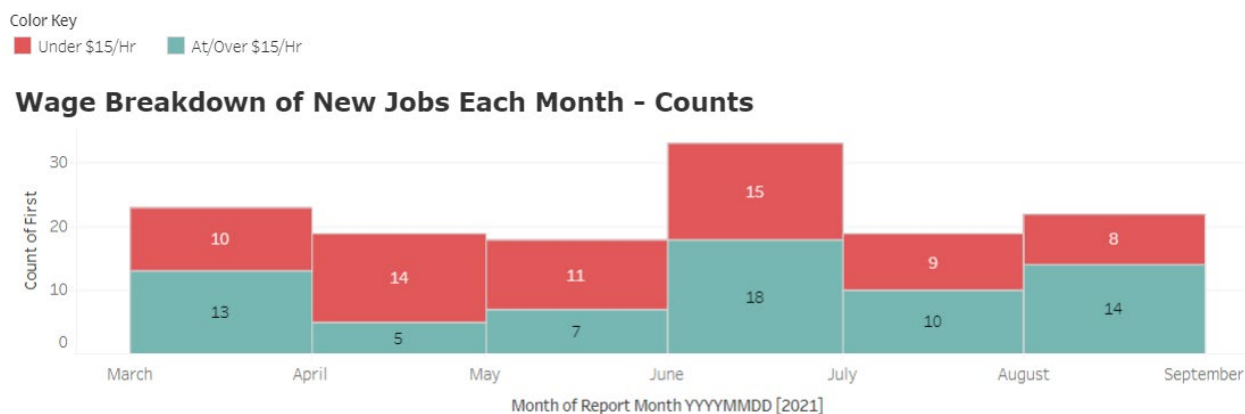
RI Works Contracted Vendors

Three contracted vendors support the RI Works customers with their employment plans. These vendors provide support to customers through the four program components: Supportive Services, Youth Services, Vocational Training and Job Readiness, Employment & Retention. The programs provided to RI Works families streamline supportive services, education and/or training programs with the goal of stabilizing families. The vendors' programs result in more parents being engaged in work activities that would be reflected in higher wage and assisting them in obtaining successful employment outcomes.



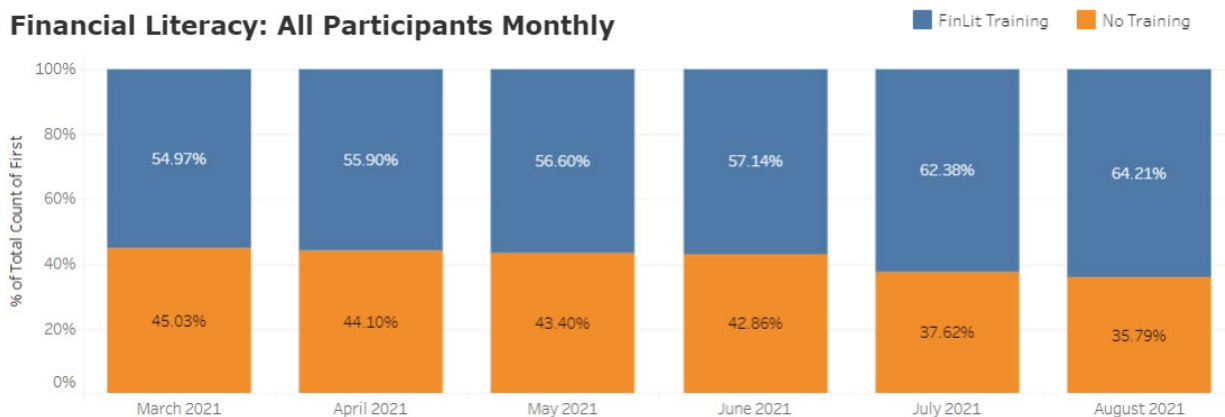
The contracts are based on Performance Metrics that incentivize the vendors to assist parents in obtaining long-term employment at a living-wage. On October 1, 2021, vendors entered their fourth contract period under "active contract management." Active contract management uses data to analyze vendor services for RI Works families, and DHS requested our vendors to provide

extensive data to the Department on a monthly basis so our progress and trends could be tracked and changes could be put into effect as needed.



Since the roll-out of these new contracts, two very important new services have been implemented:

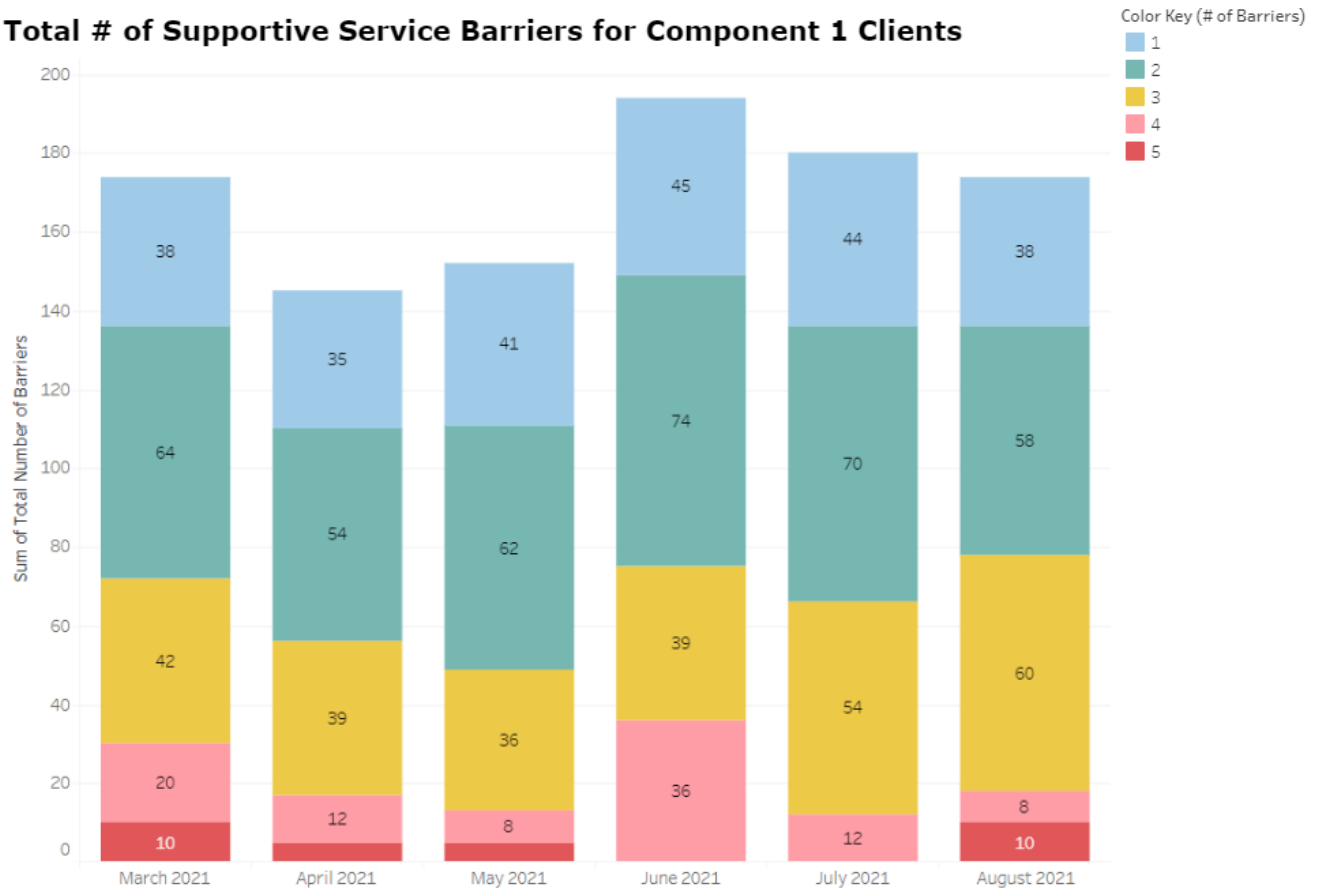
- **Financial Literacy** to ensure that RI Works families become more aware of financial issues on their path to self-sufficiency. DHS has required all service vendors to integrate Financial Literacy into their curriculums. As of August 2021, approximately 64 percent of the RI Works population attending one of our three providers' programs has started or received Financial Literacy Training, up 10 percent from February. COVID has prevented some vendors from fulfilling Financial Literacy.



- **Supportive Services** to assist RI Works families in resolving barriers and issues that may be hindering them from becoming employed and on a path to self-sufficiency. The most common problems faced by RI Works customers include:
 - Mental Health Challenges
 - Unstable Housing/Homelessness
 - Domestic Violence/Intimate Partner Violence
 - Low Education Attainment

- Unaddressed Disabilities
- Substance Use Disorder

Total # of Supportive Service Barriers for Component 1 Clients

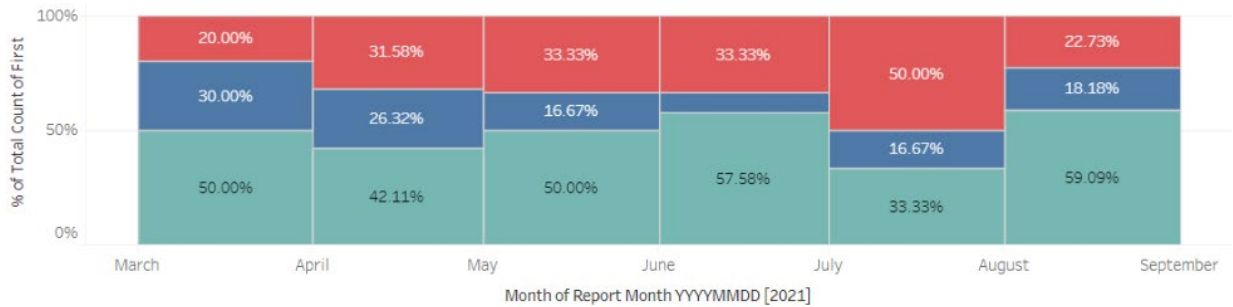


RI Works staff analyze vendor data monthly and can provide immediate feedback to vendors who are either struggling or being highly effective with working with RI Works families. A significant role in obtaining long-term, sustainable employment is the completion of vocational training programs.

Since March 2020, 217 RI Works parents have been referred to vocational training programs, down from over 500 during the FY2019 year. Since the beginning of the pandemic, 143 participants have completed their Vocational Training Program. In the past year, independently of the trainings, RI Works prime vendors have placed 209 parents into employment. Wages for these placements vary from minimum wage to \$26 per hour, 49 percent of job placements are for wages at or over \$15 per hour. Since 2018, there have been 309 customers who stay employed for a minimum of six months. Vendors were paid more than \$60,000 in performance payments due to job retention.

Color Key
 <= 20 Hrs
 Between 20-30 Hrs
 >= 30 Hrs

Wage Breakdown of New Jobs Each Month - Stacked Column Chart



Potential Federal Law Changes

TANF has again been temporarily authorized by a continuing resolution. There has been communication from federal partners that continuing resolutions will eventually lead to the replacement of the current TANF law. There is no current movement on the TANF bills in Washington.

Child Care Assistance Program (CCAP)

The Starting Right Child Care Assistance Program (CCAP) supports the dual purpose of promoting children's healthy development and school success and supporting low-income families who need child care to work or attend approved training. Eligibility for CCAP is comprised of two components: categorical eligibility for recipients of RI Works and income-based eligibility for families working or enrolled in an approved training program.

Families receiving RI Works benefits who need child care to comply with their employment and training plan receive child care with no co-payment requirements. Income-based eligibility for child care consists of a two-tiered eligibility structure, with initial eligibility available to families with incomes of up to 180 percent of the Federal Poverty Level (FPL), (~43 percent of State Median Income (SMI), or \$39,528 for a family of 3). Families that are determined eligible at the first tier may then utilize Transitional Child Care to continue to access child care subsidies if their income rises above the initial eligibility threshold of 180 percent FPL but remains under 225 percent of FPL (approximately 54 percent of State Median Income (SMI), or \$49,410 for a family of 3). Income-eligible families are subject to a graduated co-payment based on family income ranging between zero (for those earning 100 percent FPL or less) to 14 percent of a family's income. Beginning January 2022, the co-payment will be capped at seven percent of a family's income.

DHS Office of Child Care's Ongoing Response to COVID-19 and the State of the Sector

The Office of Child Care (OCC) continues to track child care trends closely to measure the ongoing impact of the pandemic. This includes regular reviews of CCAP enrollments, licensed capacity and movement within the quality framework. Since reopening in June 2020, after a three-month closure at the onset of the pandemic, CCAP enrollments and the number of licensed child care providers has stabilized. Despite stabilization, the number of CCAP enrollments are approximately 38.2 percent less than what they were pre-pandemic and the number of licensed child care providers, specifically family child care providers, have also decreased when compared to pre-pandemic numbers.

Question: Please provide the underlying assumptions the Department is utilizing to assess the impact of COVID-19 on the CCAP program with respect to caseload and costs as well as the financial health and stability of child care providers. Please note any changes to the FY2022 Enacted Budget, including details on rates being paid, assumed capacity (including seats and staff lost), and any other impacts on providers.

Question: Please provide part-time and permanent closures trends for providers.

Question: Please provide the disenrollment trends impacted by COVID-19.

Answer: Please refer to the following narrative and charts.

Provider type	Provider Opening and Closings in Child Care October 2020 – September 2021		
	Openings	Closings	+/-
Family child care providers	30	61	-31
Center providers	15	9	+6

The OCC continues to support CCAP providers with the following payment practices:

- CCAP services are reimbursed based on enrollment rather than attendance. (Providers are reimbursed for the children enrolled in their program rather than the children reported as attending.)
- The allowable absence policy has been waived for CCAP families.
- The cost of family copays is currently waived.
- CCAP providers continue to receive a temporary rate enhancement to support reopening costs (through December 2021).

It is the Department's expectation that the additional funds from the temporary rate enhancement be used to support the following activities:

- Increasing wages to incentivize educators and staff to return to the child care program.
- Hiring additional full-time, part-time or per diem staff to accommodate the use of "stable pods" as much as possible and discourage pod mixing at any time.
- Purchasing additional materials/equipment to accommodate the utilization of new, previously unused space for operating classrooms in "pods".
- Supplies to support risk mitigation of COVID-19, including but not limited to additional cleaning supplies, multiples of toys and materials, masks and gloves.

These flexible payment practices under CCDF ensure our most vulnerable families (CCAP) can maintain their slots without fear of programs/providers prioritizing private-pay families. The temporary CCAP rate enhancements were adopted in the FY2022 budget through the end of December 2021.

Center Based Providers				
	Infant/Toddler Enrollments	Preschool Enrollments	School Age Enrollments	Total Enrollments
Mar-21	830	1865	1490	4185
Apr-21	687	1895	1560	4142
May-21	776	1956	1547	4279
Jun-21	790	1964	1636	4390
Jul-21	835	1993	1579	4407
Aug-21	850	1907	1400	4157
Trend: Mar to Aug	20	42	-90	-28

Family Based Providers				
	Infant/Toddler Enrollments	Preschool Enrollments	School Age Enrollments	Total Enrollments
Mar-21	260	491	443	1194
Apr-21	260	469	424	1153
May-21	272	478	423	1173
Jun-21	275	480	409	1164
Jul-21	293	496	411	1200
Aug-21	326	527	405	1258
Trend: Mar to Aug	66	36	-38	64

The Quality Rating and Improvement System

DHS implements a tiered reimbursement rating system for all center-based child care programs to ensure high quality programs (rated at a 4- and 5-Star) receive higher reimbursement to cover the additional costs associated with delivering high quality care. The State's Quality Rating and Improvement System (QRIS), BrightStars, uses a combination of standardized assessment tools and a formalized review of staff qualifications and credentials to award programs with a quality rating. Child care licensing (health and safety regulatory requirements as governed by DHS) represent the first, foundational building block of the State's QRIS.

This quality rating system incentivizes providers to improve the quality of their program to better support children at a time when brain research indicates child development is at its most important: the first four years of life. Low rates of reimbursement (or rates that do not take quality into account) limits families' access to high quality care and limits the resources available to providers to maintain higher quality programming and employ highly qualified staff.

The percentage of CCAP enrolled children attending 4- and 5-star programs has more than doubled since the tiered system was first implemented in 2018.

December 2018	December 2019	December 2020
10%	16%	21%

Question: Please provide the number and type (family-based/center-based) of child care providers within each tier established through the quality rating system and how estimated costs reflect those tiers. If possible, please provide a list of the providers who have changed tiers.

Question: Please provide the number of children enrolled in CCAP by provider type, age group, and star rating.

Answer: Please refer to the following narrative and charts.

Due to additional demands presented by the pandemic, such as managing compliance to COVID-19 health and safety regulations and guidelines as well as the current enhanced rate to support CCAP reimbursement, there has been limited incentive for providers to pursue an increased star rating in the past 12 months. Despite this, the following table outlines the number of increased ratings by provider type that have taken place since October 2020.

Provider Type	Number of Providers with an increase in BrightStars October 2020 – September 2021
Family child care providers	15
Center providers	7

The following charts illustrate the number of CCAP enrollments by provider type and BrightStars rating (as of August 2021).

CCAP Enrollment by BrightStars Rating						
Center-Based Providers						
Age Group	1 Star	2 Star	3 Star	4 Star	5 Star	TOTAL
Infant/Toddlers	271	386	119	229	35	1040
Preschoolers	597	711	280	532	97	2217
School-Age	516	431	319	261	16	1543
TOTAL	1384	1528	718	1022	148	4800

CCAP Enrollment by BrightStars Rating						
Family Based & Group Family Based						
Age Group	1 Star	2 Star	3 Star	4 Star	5 Star	TOTAL
Infant/Toddlers	201	132	4	4		341
Preschoolers	319	224	2	7		552
School-Age	235	176	1	5		417
TOTAL	755	532	7	16	0	1310

Brightstars Rating -->	No Rating (LE)	1	2	3	4	5	Grand Total
Full Time							
Infant/Toddlers	2	413	445	105	209	28	1202
Preschoolers	0	790	817	254	482	80	2423
School-Age	4	641	546	294	240	15	1740
Half Time							
Infant/Toddlers		8	9	3	0	0	20
Preschoolers		9	21	5	5	0	40
School-Age		17	11	3	1	0	32
Quarter Time							
Infant/Toddlers		0	0	0	0	0	0
Preschoolers		0	0	0	0	0	0

School-Age		1	2	1	0	0	4
Third Time							
Infant/Toddlers	2	49	64	15	24	7	161
Preschoolers	2	117	97	23	52	17	308
School-Age	3	91	48	22	25	1	190
Grand Total	13	2136	2060	725	1038	148	
							6120

Federal Funding and Initiatives to Support Child Care Recovery

Question: Please provide FY2022 and FY2023 Child Care and Development Block Grant (CCDBG) estimates, including the balance of any unspent funds from prior years and report any plans for use.

Question: Please provide the minimum general revenue match required for the block grants.

Question: Please provide a list of federal awards received or anticipated for activities in response to the coronavirus emergency, or other stimulus funding, as well as any planned uses and how much of each award will be used for such activity. Please provide the total cost, actuals to date, projected FY2022 and FY2023 costs, and funding source for each of the following COVID-related actions and associated time periods:

- a. Covering child care co-pays
- b. Payments based on enrollment rather than attendance
- c. COVID rate increase (monthly cost), for both DHS and DCYF
- d. Child Care Recovery Fund
- i. FY 2021 final budget includes \$5.0 million
- e. Child Care Stabilization Fund
- f. Any other COVID-19 related initiatives
- g. COVID-related current and planned initiatives, taking into consideration the American Rescue Plan Act (ARPA) child care federal funds

Answer: Please refer to the following narrative and charts.

Fiscal Year	Mandatory	Matching	Discretionary
FY2021 Carryforward	\$ 1,798,204.46	\$ 1,559,290.69	\$ 7,822,281.93
FY2022 Based on President's Proposed Budget	\$ 6,633,774.00	\$ 5,930,226.00	\$ 16,991,000.00
FY2023 Based on President Proposed FY2022 Budget	\$ 6,633,774.00	\$ 5,930,226.00	\$ 16,991,000.00

The State has been in receipt of pandemic-response federal funding specifically dedicated to child care programming since March 2020. The table below shows the four primary federal funding sources for child care, their obligation and liquidation timelines, allowable uses, and the total award amount. In addition, Section 9801 of the ARP Act increased the CCDF mandatory and matching appropriation. This is the first increase to CCDF mandatory and matching appropriations since 2006. This funding increase will be applied to the FY2021 annual funding

and because it is a statutory amendment to the Social Security Act and not subject to annual appropriations, this increase is permanent and will be maintained in future years. Because the state CCDF mandatory fund amount remains fixed in law, the increase in funds appropriated to the state by the ARP Act are awarded as CCDF matching funds. However, states are not required to match the additional funds awarded in section 9801 of the Act in FY2021 and FY2022.

SFY22 (Based on President's Proposed Budget)	Amount
Maintenance of Effort (MOE)	\$ 5,321,126
State Match	\$ 2,757,900
General Revenue Total	\$ 8,079,026

Funding Source	Timeline	Allowable Use	Total Award
CARES- Child Care and Development Fund (CCDF)	Must be liquidated by 9/30/23	The supplemental funding must be used for activities authorized under the CCDBG Act that prevent, prepare for, and respond to COVID-19.	\$8,165,854
Coronavirus Response and Relief Supplemental Appropriations Act (CRRSA) CCDF	Must be liquidated by 9/30/23	In addition to the activities allowed under CCDF, the CRRSA Act offers new flexibility to lead agencies to meet the needs of families and child care providers during the COVID-19 pandemic, such as serving essential workers regardless of income and covering copayments for all eligible families.	\$23,867,232
American Rescue Plan Act (ARPA) CCDF	Must be obligated by 9/30/23 and liquidated by 9/30/24	The discretionary funds in the ARP Act present an opportunity to expand access to high-quality child care and move toward a more equitable child care system. The system should meet the developmental needs of children, provide parents with true choice and equal access to child care services that best suits their family's needs, appropriately compensate an essential and skilled workforce, and facilitate a robust child care sector. Lead agencies are strongly encouraged to use funds in a manner that will work toward each of these goals and thereby build stronger and more equitable high-quality child care systems for America's families. Lead agencies may use supplemental funds for any activities allowable under the CCDBG Act and CCDF regulations.	\$35,723,344
ARPA Child Care Stabilization Grants	Must be obligated by 9/30/22 and liquidated by 9/30/23	The lead agency shall use no less than 90% of their total award to make subgrants to qualified child care providers, regardless of such a provider's previous receipt of other Federal assistance, to support the stability of the child care sector during and after the COVID-19 public health emergency. Administrative fees may not exceed 10%.	\$57,251,352

The Department's COVID-19 initiatives and CCAP payment practices are listed below with the anticipated funding source to be charged as well as the associated cost and status. DHS will work closely with OMB to allocate funds across the initiatives to ensure both cost efficiency and federal compliance. In addition to the CCDBG funding, the other federal stimulus funds received will

ensure continuation of the CCDF-approved flexible payment practices. The monthly cost associated with DHS rate enhancements is approximately \$755,386.95 while the cost to DCYF monthly is \$84,602.85. Projected costs for FY2022 and FY2023 are itemized in the CCAP caseload projection while the FY2021 actual costs have been absorbed with usual CEC funding.

Initiative	Anticipated Funding Source	Status	Estimated Cost
Waive copays (3/15/20-6/1/20)	CARES	Complete	\$1,021,922.00
Waive copays (2/21/21-6/30/21)	CARES	Complete	\$1,476,000.00
Waive copays (7/1/21-12/31/21)	CARES	In progress	\$2,007,377.00
Cap Copays at 7 percent (FY2022-FY2024)	ARPA	Proposed	\$2,776,643.00
Enrollment v. attendance for CCAP services (FY2022-FY2024)	ARPA	Proposed	\$4,249,885.00
COVID-19 CCAP Rate Enhancement (6/1/20-6/30/21)	CCDF	Complete	\$10,413,196.13
COVID-19 CCAP Rate Enhancement (7/1/21-12/31/21)	CRRSA/CARES	In progress	\$5,183,395.00
FY22 Enacted Rates (1/1/22-FY2024)	ARPA	Proposed	\$27,218,915
Child Care Recovery Fund	CARES	Complete	\$5,000,000.00
Child Care Stabilization Fund	CRRSA	Complete	\$18,615,600.00
Fiscal Intermediary for Child Care Stabilization Fund	CRRSA	In progress	\$893,549.00
Reinvigorate Stabilization Grants	ARPA Stabilization Grants	Proposed	\$56,081,163.00
Fiscal Intermediary for Reinvigorate Stabilization Grants	ARPA Stabilization Grants	Proposed	\$1,170,189.00
Waive cost of comprehensive background checks for	CARES	In progress	\$172,800.00

child care providers at RIAG's Office			
Model 4: PreschoolPilot	CRRSA	In progress	\$1,300,000.00
LearnERS and Quality Grants	ARPA	In progress	\$841,600.00
SUCCESS expansion for Children's Mental Health	ARPA	In Progress	\$628,468.00

Please see attached appendices for additional outcome data associated with the Child Care Stabilization Fund and the finalized methodology for the ReInvigorate Stabilization Grants.

Child Care Caseload Trends and Projections

As a result of staffing shortages and ongoing disruptions from COVID-19 related quarantines, the Department continued to see declining enrollment providing subsidies to an average of 5,621 children each week in FY2021. This represents a 35.6 percent decrease from FY2020 and a 38.2 percent decrease pre-pandemic. All age categories experienced a significant enrollment decline in FY2021. Infant/toddlers experienced the largest decline in enrollment at 54.8 percent and 43.9 percent respectively. Preschool children, who have the highest enrollment, experienced the smallest decline at 30.3 percent while school-age children experienced a 32.2 percent decrease. Seventy-seven percent of children enrolled in CCAP were served in a center-based facility, down from 79 percent the previous year.

CCAP Providers with Enrollments			
	October 2020	March 2021	August 2021
Family Based Providers	442	302	262
Center Based Providers	336	243	257
Total	778	545	519

DHS experienced a 33.3 percent decline in the number of providers actively serving CCAP children. As of August 2021, the number of family child care providers serving CCAP children decreased by 40.7 percent and center-based providers serving CCAP children decreased by 23.5 percent compared to October 2020.

Number of Children by Provider Type		
	# of Children	# of Providers
Family Based	1306	290
Center Based	4315	247
Total	5621	537

Based on Average in SFY21

In FY21, the average number of children serviced by age category is as follows:

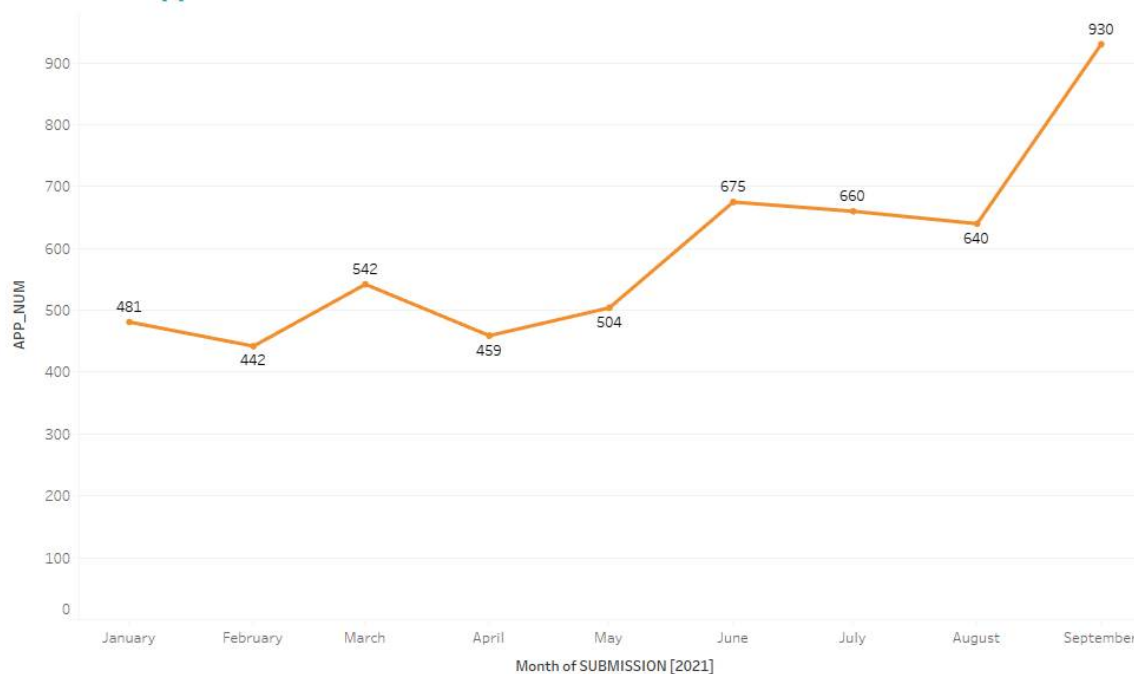
Number of Children by Age Grouping		
Category	# of Children	% of Total
Infant	365	6.5%
Toddler	864	15.4%
Preschool	2437	43.4%
School Age	1955	34.8%
Total	5621	100.0%

Based on Average in SFY21

Question: Please include any information the Department has regarding the relationship between unemployment applications and enrollment in CCAP. How has the end of the Pandemic Unemployment Assistance program (on September 4th) impacted the trends of enrollment in CCAP?

Answer: The Department has not yet seen an increase in CCAP enrollments due to the end of Pandemic Unemployment Assistance. However, there was an increase in the number of CCAP applications submitted in the month of September and DHS projects this will lead to a slight increase in the CCAP enrollments beginning in late October/early November. The Department has accounted for this trend in its overall caseload projections that reflect a gradual increase in enrollments over the next 18 months.

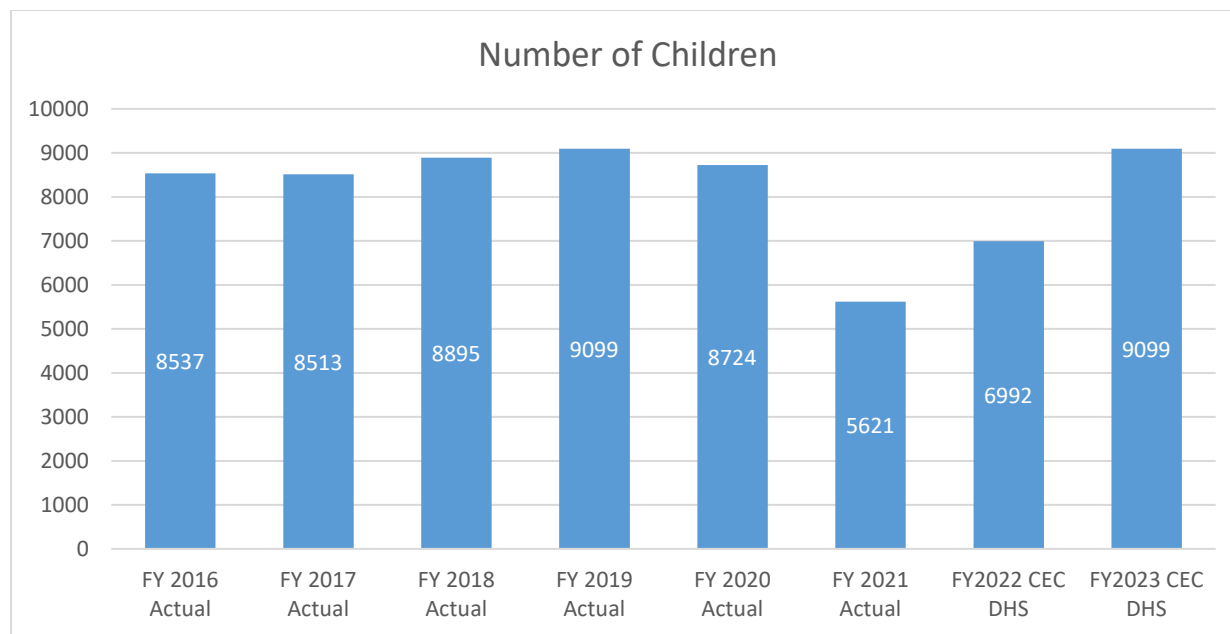
of CCAP Apps Year To Date -- Trend



As mentioned earlier, the Department experienced a 35.6 percent decrease in the number of children served in FY2021 compared to FY2020. The continuing decline in caseload is directly related to the ongoing impact of the pandemic.

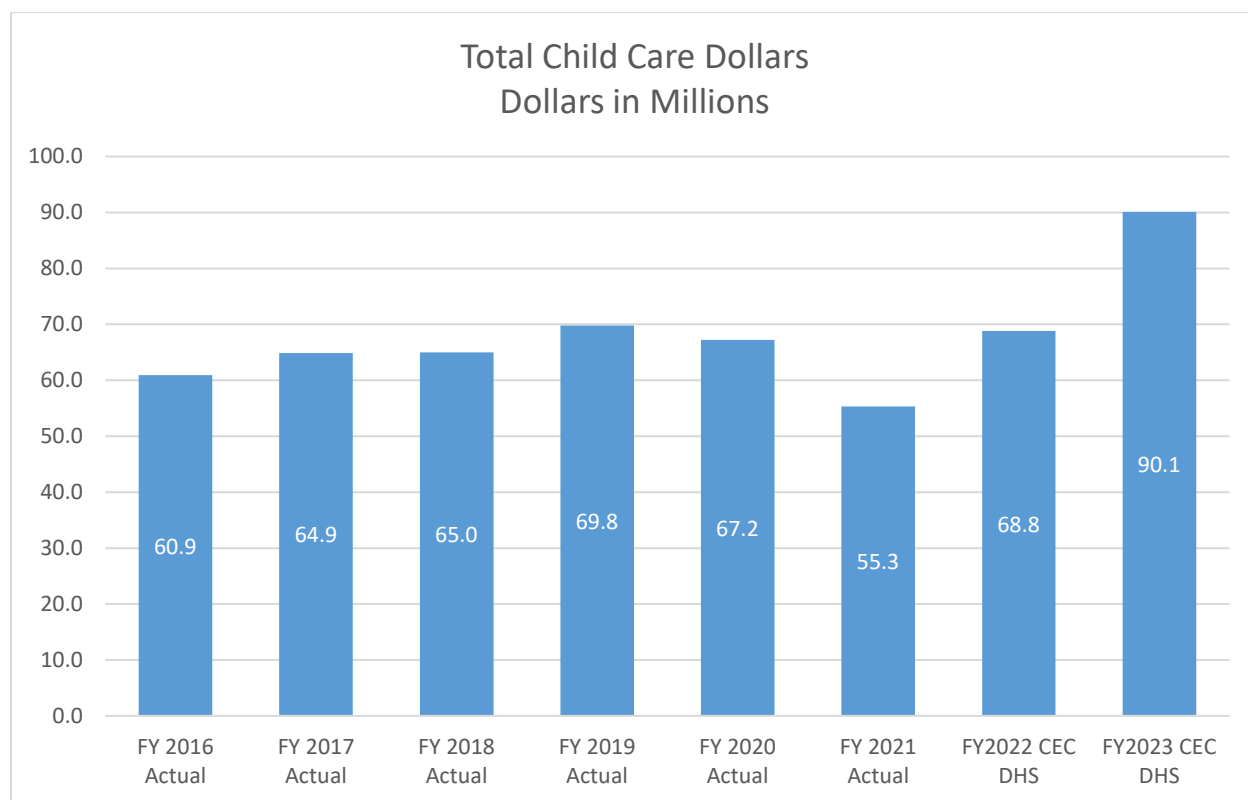
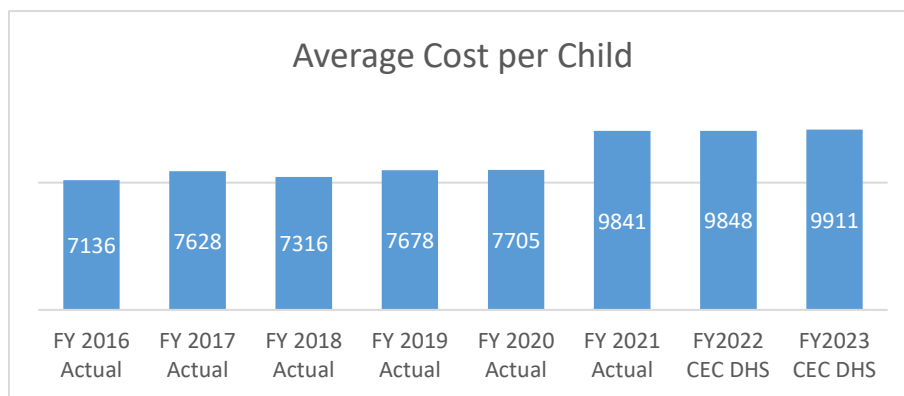
Nationally, the COVID-19 pandemic has significantly impacted the child care industry. In Rhode Island, due to strong COVID-19 mitigation practices, revised regulations and immediate financial supports available to providers, child care closures and operational gaps have been mostly avoided. Still, the pandemic continues to debilitate an already struggling industry, ripe with high turnover and tight margins before the pandemic. Now, it is dealing with staffing shortages, ongoing disruptions to care from quarantines and threats to workers' health from the virus. In addition, family nervousness to enroll children in care and changes to parent employment due to job loss or flexibility to work remotely has contributed to significant reductions in child care enrollment.

Over half (55 percent) of the jobs lost during the March to April 2020 shutdown were in low wage industries. In addition, industries hit hardest by the pandemic are predominantly female dominated and distance learning had forced many women to leave the workforce to care for their children. Of the jobs lost in low wage industries, only 53.7 percent were recovered. With the loss of these jobs and the unemployment rate inching up a tenth of a percentage to 5.8 percent in August, average enrollment is expected to recover at a slow, yet steady pace. The expectation is average enrollment is projected to increase in FY2022 by 24.4 percent of the FY2021 enrollment.



The Department's CCAP COVID-19 payment practices continue to support providers with decreased CCAP enrollment and increased costs associated with COVID-19. The Department will continue the enhanced rate and waiving copays through December 31, 2021. The Department intends to continue paying providers based on enrollment rather than attendance for FY2022.

Reduced enrollment will not decrease the overall cost of child care in FY2022. Effective January 1, 2022, licensed child care centers will receive statutory rate increases as adopted in recent legislation. These increases, in addition to the payment practices set to expire December 31, 2021, will increase the overall cost of child care in FY2022 by 24.5 percent. The annual rate per child will also increase to \$9,848 from \$9,841 in FY2022.



According to the Center for Disease Control and Prevention’s scale, Rhode Island still has “high” community transmission of COVID-19. Additionally, there are 23,500 fewer Rhode Island residents participating in the labor force than there were prior to the start of the pandemic. Families are continuing to opt for in-home, alternative care arrangements, and quarantine and isolation practices have negatively impacted child care enrollment and utilization. However, 70

percent of Rhode Islanders are fully vaccinated and 77 percent have had a least one dose. Children older than 12 are eligible for the vaccine, and children between ages 5 and 11 could be eligible by the end of October. The State is expecting enrollment numbers to slowly and steadily increase throughout the year as more and more children and families get vaccinated and confidence in health and safety climbs. The Department projects a 24.4 percent increase in average number of children served in CCAP in FY2022.

As previously stated, it is DHS' intention to continue its payment mitigation policies through December 31, 2021. The below projection also includes the cost of the licensed center-based rate increase legislated in June. In addition, funding to pilot the expansion of CCAP to include families who require child care in order to pursue college enrollment and the cost to cap CCAP co-pays at 7 percent, in-line with the federal standard for affordability, is included.

	FY2022	
	Average # of Children	Amount
Base	6,992	\$ 53,998,815
COVID rate increase (7/1/21 - 12/31/21)	N/A	\$ 5,183,395
Copay Waiver (7/1/21 - 12/31/21)	N/A	\$ 2,007,377
Cap Copay 7% (6 months)	N/A	\$ 485,679
FY2022 Enacted Rates (1/1/22 - 6/30/22)	N/A	\$ 5,635,247
Enrollment v. Attendance	N/A	\$ 1,344,285
CCAP for College (20 participants)		\$ 200,000
	6,992	\$ 68,854,798

The Department projects that FY2023 will bring capacity to pre-pandemic levels with enrollment fluctuations throughout the year that are consistent with historical trends. The estimate includes the FY2022 enacted rates, capping copays at 7 percent, and continuing the practice of paying on enrollment and not attendance.

	FY2023	
	Average # of Children	Amount
Base	9,099	\$ 74,372,354
FY22 Enacted Rates	N/A	\$ 13,212,012
Cap Copay 7%	N/A	\$ 1,145,482
Enrollment v. Attendance	N/A	\$ 1,450,332
	9,099	\$ 90,180,180

Question: For the SEIU Collective Bargaining Agreement, please provide an update on any contract negotiations and potential impacts to the CCAP program in FY2022 and FY2023, if applicable.

Answer: The SEIU 1199 Collective Bargaining Agreement expired on June 30, 2020. The State and Union operated under an evergreen clause until a one-year extension to the CBA was

executed in March 2021. This preserves the current policies through December 31, 2021. As of October 1, 2021, the State has initiated the negotiation process with the union but does not know the potential impacts to the CCAP program for FY2022 and FY2023. The following are estimates based on the current CBA terms.

SFY22 Estimate	# of Providers	Rate	Cost
License Exempt Bonus	0	\$ 500.00	\$ -
Orientation Bonus	2	\$ 75.00	\$ 150.00
Direct Deposit Bonus	3	\$ 100.00	\$ 300.00
Registration Fee (# of Children)	100	\$ 50.00	\$ 5,000.00
Sick Leave	20		\$ 21,845.00
Total Cost			\$ 27,295.00

SFY23 Estimate	# of Providers	Rate	Cost
License Exempt Bonus	1	\$ 500.00	\$ 500.00
Orientation Bonus	10	\$ 75.00	\$ 750.00
Direct Deposit Bonus	10	\$ 100.00	\$ 1,000.00
Registration Fee (# of Children)	268	\$ 50.00	\$ 13,400.00
Sick Leave	20		\$ 21,845.00
Total Cost			\$ 37,495.00

Family Based Union Increase

There are no scheduled rate increases for family child care providers at this time. The State of Rhode Island's Collective Bargaining Agreement (CBA) expired on June 30, 2020 with a one-year extension executed in March 2021 that preserves the existing policies through December 31, 2021. Child care providers are currently reimbursed using the COVID enhanced rate through December 31, 2021.

Union Sick Time

With the passage of S0290 subB, all CCAP family child care providers were granted earned sick time, effective July 1, 2018. This law requires sick time to be issued at no less than the state minimum wage. The hourly rate for earned sick leave has not increased since January 1, 2020 at \$15/hour, with an accrual of 40 hours/year.

To date, 45 providers have sought reimbursement for paid sick time utilizing 65 DCYF-approved emergency assistants. In 2021, the State has paid 26 emergency assistants for 22 providers at a cost of \$24,030. In addition, the State paid registration fees to 17 providers for 79 children at a cost of \$3,950 in FY2021.

Question: The FY2022 Enacted Budget includes additional funding of \$200,000 to expand child care assistance for individuals enrolled in either URI, RIC or CCRI. How many families have taken advantage of the program, how many children are impacted by this program in FY2022, and what

are the assumptions for FY2023? What are the monthly projected expenses while schools are in session?

Answer: With an estimated annual cost for FT CCAP being approximately \$9,000/child, DHS estimates the \$200,000 in pilot funding for CCAP for college will serve approximately 20 families in FY2022. As of October 1, 2021, DHS has fully operationalized this pilot in the Bridges system. To date, five children have been found eligible for CCAP under this pilot. The Department does not have a full month of eligibility data for this pilot yet, but anticipates the funds to be fully obligated in this fiscal year. The Department also anticipates increased demand in December/January when the winter semester begins.

Question: The FY2022 Enacted Budget included a 7 percent co-pay cap for CCAP families with incomes greater than 100 percent of the Federal Poverty Level (FPL). How many children are impacted by this change? How does this change impact the overall budget for CCAP and the cost per subsidy?

Answer: The 7 percent cap on family co-payments will impact approximately 1,290 children from families with household incomes above 150 percent of FPL. The remaining copay levels will remain the same, meaning families at or below 100 percent of FPL will continue to pay no family share, families above 100 percent and below 125 percent will pay a 2 percent copay, and families above 125 percent and below 150 percent will pay a 5 percent copay. The fiscal impact is less than 1 percent to the total FY2022 budget.

Office of Financial Management

To ensure accurate payments are made to child care providers in a timely and efficient basis, DHS maintains a few key metrics to assess, track and report potential payment discrepancies.

Key Performance Indicators (KPIs) of success include:

- Decrease in attendance records included in the off-cycle payments
- Monthly monitoring of CCAP recertifications and improved training across the field on obtaining proper documentation verifying eligibility
- Increase in portal usage by CCAP providers
- Beginning March 2021, the Office of Financial Management reviews a copay waiver report aligned to the payroll cycle to monitor the ongoing costs of waiving copays

The Office of Child Care and the Office of Financial Management continues to meet each week with the State's technology vendor, Deloitte, to review metrics on recertification progress, enrollment data, supplemental payroll analysis and portal usage. These metrics provide the Department with information to adopt procedures to ensure CCAP is operating efficiently and effectively and measure performance to provide context for improvement. A metric is retired when the goal of the Department has been met and monitored for consistency for an appropriate period of time.

To ensure accurate and timely payment to child care providers, the CCAP financial management team also conducts pre-payroll analysis of the data generated for biweekly payment. This

information includes the status of eligibility, number of records processed and amounts for union, PAC, copay and net benefits. This information is validated across an average of the last 10 batches and provides the Department with additional information to ensure payment integrity.

A summarized version of this report is shown below.

	Trial Run – Batch 09	Average from Last 10 Batches
<i>Total Number Of Providers</i>	659	676
<i>Total Amount</i>	\$2,584,681.17	\$2,567,169.28
<i>Total Copay</i>	\$164,632.29	\$168,464.99
<i>Total Union amount</i>	\$8,339.05	\$8,535.23
<i>Total PAC amount</i>	\$1,041.10	\$983.01
<i>Total Recoupment amount</i>	\$0.00	0
<i>Total number of the provider paid with \$0 payments</i>	2	0
<i>Total amount paid to DCYF children</i>	\$217,555.10	\$226,746.17
<i>Total number of DCYF kids</i>	673	698
<i>Number of providers who have been paid with Checks</i>	136	130
<i>Number of providers who have been paid with Direct Deposits</i>	522	536
<i>Total Number of records processed</i>	18728	19216

2021 Market Rates

The CCDF Reauthorization Act of 2014 requires states to consider quality when setting the payment rates for child care assistance. Additionally, states must set their payment rates based upon the most recent Market Rate Survey. DHS contracted with the Public Consulting Group (PCG) to administer the 2021 Market Rate Survey in April/May 2021. The new Market Rates were finalized in July 2021 and the full report is now available on the Department's website. A total sample of 437 providers (54 percent of total population) was used to develop the 2021 findings. This large sample size ensures a high degree of reliability in the data and meets ACF's requirement that findings are statistically valid. Overall, the 75th percentile of the weekly full-time rates for all age groups in center-based and family child care programs increased compared to the 2018 Market Rate findings.

2018/2021 75th Percentile Comparison	2018	2021	\$ Increase	% Increase	2018	2021	\$ Increase	% Increase
	Center- based	Center- based			Family Child Care	Family Child Care		
Infant	\$ 263.50	\$ 289.00	\$ 25.50	10%	\$ 200.00	\$ 250.00	\$ 50.00	25%
Toddler	\$ 250.00	\$ 273.05	\$ 23.05	9%	\$ 200.00	\$ 250.00	\$ 50.00	25%
Preschool	\$ 230.00	\$ 250.00	\$ 20.00	9%	\$ 191.50	\$ 238.75	\$ 47.25	25%
School Age	\$ 198.75	\$ 238.25	\$ 39.50	20%	\$ 180.00	\$ 200.00	\$ 20.00	11%

The 75th percentile is recognized by ACF as the equal access standard and states are expected to have base rates that meet this standard. The ACF Office of Child Care placed Rhode Island on Corrective Action in February of 2019 because its CCAP base rates did not meet the equal access standard. During the pandemic, Rhode Island was taken off corrective action while the COVID-enhanced rates remain in effect because these increased rates demonstrated the State's progress toward meeting the equal access standard. Once the COVID enhanced rates end, the State will be required to amend the CCDF State Plan to reflect the new FY2022 enacted rates. At that time, RI may be placed back on corrective action for base rates that do not meet the equal access standard based on the 2021 Market Rates. States on corrective action may be subject to penalty of up to four percent of discretionary funding. The following table maps the FY2022 enacted rates that will take effect in January 2022 with the percentiles determined by the 2021 Market Rate Survey.

	1 Star	2 Stars	3 Stars	4 Stars	5 Stars
Infant/Toddler	\$236.36	\$244.88	\$257.15	\$268.74	\$284.39
2021 percentiles*	15 th / 30 th	20 th / 40 th	35 th / 55 th	55 th / 70 th	70 th / 80 th
Preschool	\$207.51	\$212.27	\$218.45	\$223.50	\$231.39
2021 percentiles	35 th	40 th	40 th	50 th	55 th
School Age	\$180.38	\$182.77	\$185.17	\$187.57	\$189.97
2021 percentiles	40 th	40 th	40 th	40 th	40 th
*rounded to the nearest 5 th percentile					

Quality Investments

The Administration of Children and Families requires states to allocate 12 percent of its funding to quality initiatives designed to support and advance the quality of early learning programs serving children and families in the Child Care Assistance Program. To support providers in achieving a higher quality rating, the Department prioritized a complete redesign of the professional development and higher education coursework it funds through its quality set-aside dollars. These contracts fund community-based organizations and state institutions of higher education to deliver evidence-based professional development and coursework to the early learning workforce to improve their quality rating. All professional development and coursework are aligned to the QRIS, with 70 percent of offerings geared to 1- and 2-Star providers.

Question: Please provide an update on the \$250,000 Family Child Care Training and Supports Benefit Fund that is jointly administered by the Department and the Union. What expenses have been made since FY 2016 when the fund was established? Please provide the plan to use the funds and balance of the fund carry forward for FY 2022.

Answer: To date, SEIU 1199 has spent \$576,869.39 of the training fund. \$550,089.11 has been spent since the execution of the Service Agreement on July 1, 2019. The table below details the expenditures (to date) of the Training Fund. Also included in Appendix B is the Training Fund's most recent Quarterly Report, detailing the deliverables achieved under the Service Agreement.

Document ID	Amount Paid
300	\$ 2,166.13
3639846-1-APR20	\$ 18,276.24
3639846-1-AUG19	\$ 11,665.50
3639846-1-DEC19	\$ 14,866.16
3639846-1-FEB20	\$ 31,020.62
3639846-1-JAN20	\$ 25,047.12
3639846-1-JUL19	\$ 8,151.33
3639846-1-MAR20	\$ 23,126.77
3639846-1-MAY20	\$ 26,111.87
3639846-1-NOV19	\$ 22,715.33
3639846-1-OCT19	\$ 12,940.31
3639846-1-SEP19	\$ 13,123.45
3639846-2-APR21	\$ 25,014.27
3639846-2-AUG20	\$ 23,365.27
3639846-2-DEC20	\$ 22,085.72
3639846-2-FEB21	\$ 18,815.72
3639846-2-JAN21	\$ 18,961.28
3639846-2-JUL20	\$ 47,097.19
3639846-2-JUN20	\$ 32,779.54
3639846-2-MAR21	\$ 37,743.53
3639846-2-MAY21	\$ 19,780.79
3639846-2-NOV20	\$ 21,159.49
3639846-2-OCT20	\$ 23,347.58
3639846-2-SEP20	\$ 20,056.35
3639846-3-JUN21	\$ 30,671.55
Grand Total	\$ 550,089.11

Supplemental Security Income (SSI) Program

Supplemental Security Income (SSI) is a federal program that provides monthly cash payments to individuals in need. SSI is for people who are 65 or older as well as blind or individuals with a disability of any age, including children. To qualify for SSI, you must also have little or no income and few resources.

SSI Payments

SSI participation declined by 458 people from March 2020 through June 2020 (end of FY2020) after federal Social Security Administration (SSA) offices closed due to the pandemic in March 2020. Throughout FY2021, the number of SSI participants remained relatively stable and only decreased by 343 people. A contributing factor to keeping cases stable despite SSA offices being closed is the pausing of Continuing Disability Reviews (CDR). CDR's are normally required every three years for participants to remain on SSI. CDR's were paused from May 2020 through August 2020. Although Disability Determination Services (DDS) was not getting referrals from regional SSA offices to establish new cases, they also were not closing existing cases. Combining these factors along with DHS and DDS offices being closed, the projection of average monthly SSI persons is 32,980 for FY2022.

Rhode Island recently implemented Assisted Living reforms and the FY2022 enacted budget eliminated Category F payments. Effective November 1, 2021, 118 individuals in facilities currently receiving assisted living payments will move to different tiers.

Impact of COVID-19

Although the SSI program was growing at the start of FY2020, the last six months of FY2020 show a decline due to the pandemic. The federal Social Security Administration (SSA) decided to suspend processing of Continued Disability Reviews thus allowing current SSI cases to remain on SSI, but the Office of Rehabilitation Services (ORS) was not accepting intakes due to state office closures and there were no consultant exams scheduled. Because unemployment has risen drastically due to COVID-19 and unemployment is linked to increased SSI claims historically, actuarial estimates projected increases to the SSI program in FY2021. Due to Pandemic Unemployment Assistance (PUA) and the continued closure of Social Security field offices, the caseload has remained stable and has not grown. The SSA has developed system upgrades to compensate for the office closures and continues to service customers but has not announced a date for SSA offices to reopen which creates a barrier for this population.

Due to potential SSI applicants not applying because of PUA, and with DDS offices being closed, there were some in-person activities that could not be completed. We anticipate cases should begin to climb precipitously with the cessation of PUA payments in September 2021. Currently, it takes 60 to 90 days to process a claim. The increases will begin by October 2021 and grow by 30 cases per month through the end of FY2022. The FY2023 projection shows the number of cases growing by 50 per month consistent with SSA actuarial projections and current application intake. The FY2023 projection of 33,432 average monthly persons shows continued growth of

the program taking into account the above-mentioned factors, and the anticipated return of cases to pre-pandemic levels.

The administrative transaction fee remains stable at \$63,000 from FY2021 through FY2022. Based on notification from the federal Social Security Administration, the administrative fee will increase to \$66,000 for FY2023. The cost per person is calculated to include transaction fees.

The moving costs were \$210,706 in FY2021. Our estimates are \$221,252 for FY2022 and \$232,314 for FY2023. We anticipate an increase in moving costs in FY2022 due to lifting of COVID-19 travel restrictions. This population was not transient during FY2021 probably due to the inability to find reasonable rent costs and the limit on evictions. Our moving cost projections for FY2023 are aligned with pre-pandemic levels.

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 Adopted May	FY 2022 November CEC DHS	FY 2023 November CEC DHS
SSI							
Persons	35,118	33,806	33,983	33,184	33,400	32,980	33,432
Cost / Person	\$ 48	\$ 47	\$ 46	\$ 46	\$ 46	\$ 46	\$ 46
Cash Payments	\$ 20,092,846	\$ 19,017,258	\$ 18,798,746	\$ 18,274,447	\$ 18,508,944	\$ 18,172,098	\$ 18,388,188
Transaction Fees	\$ 70,000	\$ 69,000	\$ 65,000	\$ 63,000	\$ 66,000	\$ 63,000	\$ 66,000
Total Dollars	\$20,162,846	\$19,086,258	\$18,863,746	\$18,337,447	\$18,574,944	\$18,235,098	\$18,454,188

The number of SSI recipients receiving their checks by mail has remained stable and only approximately 4.5 percent of SSI recipients receive paper checks. For FY2021, the Department issued 18,687 checks by mail, a decline of 2,775 checks from FY2020 and a \$1,523 savings for total check costs. The FY2022 projection of 18,379 checks is based on the last three quarters of FY2021 and the first quarter of FY2022. Since we observed a trend of the number of check payments leveling out, we used an average of the last six months of check issuances to project 18,162 checks to be issued by mail in FY2023.

Month	# of Checks	Amount of Checks	# of Direct Deposits	Amount of Direct Deposits	Total # of Payments	Total Amount of Payments
Jul-20	1,497	\$57,104	32,241	\$1,291,201	33,738	\$1,348,305
Aug-20	1,577	\$61,148	32,531	\$1,301,241	34,108	\$1,362,388
Sep-20	1,697	\$64,145	32,498	\$1,301,711	34,195	\$1,365,857
Oct-20	1,635	\$62,313	32,525	\$1,301,519	34,160	\$1,363,833
Nov-20	1,565	\$59,974	32,273	\$1,292,289	33,838	\$1,352,263
Dec-20	1,560	\$59,623	32,418	\$1,297,288	33,978	\$1,356,911
Jan-21	1,458	\$55,252	32,157	\$1,287,553	33,615	\$1,342,806
Feb-21	1,541	\$59,093	32,385	\$1,297,366	33,926	\$1,356,459
Mar-21	1,539	\$59,090	32,493	\$1,300,399	34,032	\$1,359,489
Apr-21	1,501	\$57,691	32,215	\$1,290,844	33,716	\$1,348,535
May-21	1,510	\$57,412	32,118	\$1,286,028	33,628	\$1,343,440
Jun-21	1,607	\$62,107	31,960	\$1,279,275	33,567	\$1,341,382
Jul-21	1,471	\$55,962	31,913	\$1,276,674	33,384	\$1,332,636
Aug-21	1,502	\$57,680	33,457	\$1,279,892	34,959	\$1,337,571
Sep-21	1,490	\$56,981	32,069	\$1,283,698	33,559	\$1,340,680
Total	23,150	885,577	485,253	19,366,978	508,403	20,252,555
<i>% of Total</i>	<i>4.6%</i>	<i>4.4%</i>	<i>95.4%</i>	<i>95.6%</i>	<i>100%</i>	<i>100%</i>

	# of Checks	Cost per Check	Amount
SFY18	28,260	\$0.55	\$15,543
SFY19	22,336	\$0.55	\$12,285
SFY20	21,462	\$0.55	\$11,804
SFY21	18,687	\$0.55	\$10,278
SFY22 Estimate	18,379	\$0.55	\$10,108
SFY23 Estimate	18,162	\$0.55	\$9,989

SSI Questions

Question: Please provide the number of SSI recipients in each category (persons, personal needs allowance, assisted living).

Answer: See Appendix A

Question: Please provide a breakout by category. For category F, please break out the number of individuals in each cohort and an estimate for the remaining category F payments.

Answer: (See table) Since Category F is eliminated effective 11/1/21, there will be no future cost for this category.

State Supplemental Payment for Assisted Living	Number of Beneficiaries	Receiving SSI and SSP	SSP Only	Average Monthly SSP payment
Category F before 11/1/21	194	118	76	\$539
Category D before 11/1/21	254	161	93	\$230
Total before 11/1/21	448	279	169	–
Category F after 11/1/21	0	0	0	\$0
Category D after 11/1/21	372	236	136	\$260
Total after 11/1/21	372	236	136	–

Question: The FY 2022 enacted budget eliminated Category F payments. When will this policy be implemented? What impact will it have on the total SSI budget in FY2022 and FY2023?

Answer: It is anticipated that Category F will be eliminated on November 1, 2021 as opposed to the budgeted date of October 1, 2021. The delay was due to SSA's review of the proposed change. FY2022 includes only four months of Category F payments (July 2021 through October 2021). There will be an increase in LTSS Category D payments due to approximately 118 Category F individuals moving to Category D. For FY2022, the reduction is \$523,120 which includes eight months of the elimination, and for FY2023 the decrease is \$784,680 eliminating category F for the full fiscal year while taking into account the Category D increase.

Question: Please also include the number of individuals receiving the state-only payment in each category.

Answer: See data included in table above.

Question: Please provide the number of individuals receiving the additional \$206 payment for residing in a non-Medicaid funded assisted living facility or Rhode Island Housing funded facility and the total cost for FY2022 and FY2023.

Answer: Please see the table below.

Individuals Receiving Assisted Living Payments

Each month the Department issues cash payments of \$206 for individuals in Assisted Living (AL) facilities. The total payments for FY2021 decreased to \$168,302 from the FY2020 annual total of \$201,047. The FY2022 projection shows this continued decline to \$114,128 using actual quarterly payments paid to each facility for the last quarter of FY2021 and the first quarter of FY2022. The FY2023 projection of \$99,296 shows a continued drop in payment and is based on expected FY2022 payments along with two Assisted Living facilities losing their eligibility status as a result of AL reform. There has been a significant drop in the number of residents at assisted living facilities receiving this supplemental payment because some facilities closed, individuals moved to other living arrangements and others became Medicaid LTSS eligible.

	ASSISTED LIVING PAYMENTS							
	FY 2021 Q1	FY 2021 Q2	FY 2021 Q3	FY 2021 Q4	FY2021 Total	FY 2022 Q1	FY 2022 DHS Projected	FY 2023 DHS Projected
A Better Day	\$7,622	\$7,622	\$0	\$0	\$15,244	\$0	\$0	\$0
Bristol Assisted Living	\$3,502	\$2,472	\$2,472	\$2,472	\$10,918	\$2,472	\$9,888	\$9,888
Charlesgate	\$4,532	\$4,532	\$3,914	\$3,914	\$16,892	\$3,296	\$15,656	\$15,656
Community Care Alliance	\$8,858	\$7,210	\$7,416	\$7,210	\$30,694	\$6,798	\$28,636	\$28,636
Forest Farm	\$6,386	\$6,180	\$6,180	\$5,768	\$24,514	\$6,180	\$8,103	\$0
Franciscan Missionaries	\$11,742	\$11,742	\$11,742	\$11,742	\$46,968	\$9,888	\$45,116	\$45,116
St. Elizabeth	\$5,562	\$5,974	\$5,768	\$5,768	\$23,072	\$2,678	\$6,729	\$0
Total	\$48,204	\$45,732	\$37,492	\$36,874	\$168,302	\$31,312	\$114,128	\$99,296

The number of quarterly cases in each facility is shown below. Our projections align with our methodology for the cash payments in both FY2022 and FY2023.

	ASSISTED LIVING COUNT							
	FY 2021 Q1	FY 2021 Q2	FY 2021 Q3	FY 2021 Q4	FY 2021 Average	FY 2022 Q1	FY 2022 Average DHS Projected	FY 2023 Average DHS Projected
A Better Day	12	12	0	0	6	0	0	0
Bristol Assisted Living	6	4	4	4	5	4	4	4
Charlesgate	7	7	6	6	7	5	6	6
Community Care Alliance	14	12	12	12	12	11	12	12
Forest Farm	10	10	10	9	10	10	3	0
Franciscan Missionaries	19	19	19	19	19	19	18	18
St. Elizabeth	8	10	9	9	9	4	3	0
Total	76	74	60	60	67	53	46	40

General Public Assistance (GPA) Program

The General Public Assistance (GPA) program is intended as a program of last resort for the neediest individuals in the State. GPA provides a small cash benefit to adults age 18 and over who have very limited income and resources and have an illness or medical condition that keeps them from working while they await an SSI determination. To qualify, an individual must earn less than \$327 a month and cannot qualify for other federal assistance programs other than Supplemental Nutrition Assistance Program (SNAP). In addition, the program provides supplemental assistance for funerals and burials. Both the GPA Bridge and Burial programs will be impacted by COVID-19 because of the rise in unemployment and the increase in COVID-19 related deaths.

GPA Projection

The GPA Bridge numbers declined from 159 individuals in FY2019 to 103 in FY2020, a decrease of 35 percent from FY2019. The Department instituted improved eligibility review standards for the GPA Bridge program, thus reducing the number of applicants. The FY2021 adopted number was 62 and the actual was 61 participants (annual average). The GPA bridge number projections show a minor increase of 19 participants through the first quarter of FY2022 and remain steady until October 2022. From October 2022 forward, the GPA bridge program is projected to grow by two people per month due to changes in the program eligibility requirements and the anticipated reopening of field offices to serve customers. Also effecting this increase is the end of pandemic unemployment benefits in September 2021. In addition, Medical Assistance Review Team (MART) medical disability reviews, which were required for GPA Bridge applicants, stopped in September 2021.

Impact of COVID-19

Our GPA Bridge projections for FY2022 show a significant increase from June 2021 actual participants of 40 to 77 individuals in June 2022. We anticipate a large increase in FY2022 for the following reasons. The DHS MART medical disability reviews that were required for all Bridge applicants ended in September 2021. In addition, as the field offices reopen, DHS anticipates there will be additional GPA Bridge applicants as access to public transportation and in-person appointments become available. Also contributing to the increase is the end of PUA benefits. Bridge projections align with the anticipated growth in SSI. Due to all these factors, FY2023 is projected to increase by three participants per month to 113 individuals by the end of FY2023. This brings us almost to the pre-pandemic level of 119 in June 2019.

Due to COVID-19 impacts on the economy as well as the impact on the death rate, there was an increase to GPA burial costs. For FY2020, there were 54 actual COVID-19 GPA deaths resulting in a cost of \$59,400. DHS paid for 94 actual COVID burials in FY2021 for a cost of \$83,689. The FY2020 and 2021 costs for COVID burials were shifted to Coronavirus relief funds and are not included in the table. FY2022 COVID burials are projected to be insignificant and consistent with the current trend of COVID burial requests for assistance decreasing.

	FY 2019 Actual	FY 2020 Actual	FY 2021 Actual	FY 2022 May Adopted	FY 2022 November CEC DHS	FY 2023 November CEC DHS
GPA						
Persons - Bridge	159	103	61	64	64	97
Cost / Person	\$ 145	\$ 160	\$ 178	\$ 178	\$ 189	\$ 187
Cash Payments - Bridge	\$ 276,356	\$ 197,568	\$ 130,410	\$ 136,704	\$ 145,016	\$ 217,468
Burials	\$ 595,863	\$ 679,746	\$ 569,269	\$ 625,000	\$ 599,992	\$ 649,992
Total Dollars	\$ 872,219	\$ 877,314	\$ 699,679	\$ 761,704	\$ 745,008	\$ 867,460

General Public Assistance Questions

Question: For FY 2022 and FY 2023, please provide an estimate of the expenses for the burial assistance program due to COVID-19.

Answer: Through September 2021, DHS reimbursed families for five additional deaths resulting in a cost of \$5,000, which is minimal. For FY2023, we don't expect any material expense related to COVID deaths. This assumption is consistent with the current projection of COVID deaths with 72 percent of the state population becoming fully vaccinated and with continued mask wearing.