## The Agency

#### **Department of Human Services**

#### **Agency Operations**

The Department of Human Services (DHS) operates various programs in support of the agency goal of assisting those persons in Rhode Island in need. These programs and services extend well beyond the vital financial support services historically provided to poor and low income individuals and families, and include redesigned and innovative programs which provide quality and accessible health care, child care, supportive services and options to working parents, individuals and families. These programs are all designed: to help families become strong, productive, healthy and independent; to help adults achieve their maximum potential; to ensure that children are safe, healthy, ready to learn, and able to reach their maximum potential; to honor and care for our State's veterans; and, to assist elderly and persons with disabilities in order to enhance their quality of life and sustain their independence. The department operates on a population-based structure for its program policy and service delivery, reflecting the department's focus on clients' needs.

Major state and federal reforms in the mid-1990s provided unprecedented flexibility in how the State may utilize funds to accomplish its goals. Rhode Island's Family Independence Program (FIP) allowed DHS to design and implement a variety of services to assist those families transitioning from cash assistance to employment. These critical "work supports" are provided as a means of easing the transition into the labor force, and include vital child care assistance and health care benefits. These work supports are seen as a crucial element of the FIP program, which replaced the former Aid to Families with Dependent Children (AFDC) program, and which imposed a 60 month lifetime limit for adults receiving cash assistance.

The department continues to be one of the largest purchasers of health care benefits in the State, providing health coverage, including managed care, fee-for-service care, long-term care, and community-based care services to approximately 186,000 Rhode Islanders.

The department also provides services to veterans through the Veterans' Affairs Program, which serves Rhode Island's 91,000 veterans and their families. An additional priority of DHS is to provide assistance to persons with disabilities seeking to achieve economic independence and integration with society, through its Office of Rehabilitation Services.

### **Agency Objectives**

To provide a full continuum of high quality and accessible programs and services to those Rhode Island families, children, adults, individuals with disabilities, veterans, and the elderly in need of assistance.

#### **Statutory History**

Title 40 Chapter 1 and Title 42 Chapter 12 of the Rhode Island General Laws established the Department of Human Services within the executive branch of state government.

The Budget

## **Department of Human Services**

	FY 2004	FY 2005	FY 2006	FY 2007
	Actual	Actual	Revised	Recommended
Expenditures by Program				
Central Management	11,948,075	12,142,249	17,964,790	16,884,087
Child Support Enforcement	-	-	10,937,082	11,467,564
Individual and Family Support	68,799,658	70,407,261	78,299,951	81,877,848
Veterans' Affairs	22,884,499	22,349,065	27,941,795	28,975,153
Health Care Quality, Financing & Purchasing	62,012,550	55,521,032	66,062,984	68,603,442
Medical Benefits	1,118,814,368	1,207,929,030	1,275,134,674	1,166,762,319
Supplemental Security Income	26,560,554	27,313,914	27,713,041	28,517,635
Family Independence	159,666,254	152,911,591	145,694,019	130,606,048
State Funded Programs	75,634,503	80,632,937	83,803,477	87,380,562
<b>Total Expenditures</b>	\$1,546,320,461	\$1,629,207,079	\$1,733,551,813	\$1,621,074,658
Expenditures By Object				
Personnel	100,081,630	106,074,074	133,101,408	138,093,189
Other State Operations	24,168,721	24,530,921	23,098,755	25,583,805
Aid To Local Units of Government	2,175	21,330,321	23,070,733	23,363,663
Assistance, Grants and Benefits	1,420,674,557	1,498,549,710	1,574,619,000	1,454,687,664
Subtotal: Operating Expenditures	\$1,544,927,083	\$1,629,154,705	\$1,730,819,163	\$1,618,364,658
Capital Improvements	1,393,378	52,374	2,732,650	2,710,000
Capital Debt Service	-	-	2,732,030	2,710,000
Total Expenditures	\$1,546,320,461	\$1,629,207,079	\$1,733,551,813	\$1,621,074,658
•				
Expenditures By Funds				
General Revenue	633,285,805	694,484,822	741,035,999	722,197,463
Federal Funds	909,408,857	931,182,907	987,227,767	894,483,826
Restricted Receipts	3,625,799	3,539,350	5,238,047	4,393,369
Other Funds	-	-	50,000	-
Total Expenditures	\$1,546,320,461	\$1,629,207,079	\$1,733,551,813	\$1,621,074,658
FTE Authorization	1,058.6	1,069.6	1,173.4	1,113.0
Agency Measures				
Minorities as a Percentage of the Workforce	13.0%	14.0%	14.0%	14.0%
Females as a Percentage of the Workforce	74.0%	76.0%	76.0%	76.0%
Persons with Disabilities as a Percentage of				
the Workforce	3.0%	3.0%	3.0%	3.0%

### Department of Human Services Central Management

#### **Program Operations**

Central Management supervises, coordinates, and monitors all departmental functions: to assure efficient and effective use of state and federal resources for the purpose of providing services to poor, disabled, or aged individuals and families; to assist them in reaching their highest potential for self-sufficiency; and, to support the achievement of the department's mission. Central Management, organized through the office of the director, provides leadership, management, strategic planning, direction, and control of departmental activities. A principal function is intergovernmental liaison with the Governor's staff, other department directors and agency heads, federal government representatives, state and federal legislators, local welfare directors, and national and local human service professionals and organizations. The establishment and maintenance of community relations with consumers and service providers, and the provision of information to the general public, are core responsibilities of this program area. Additionally, all field operation activities are direct functions of Central Management, although the associated costs are budgeted in two programs, Individual and Family Support, and Health Care Quality, Financing and Purchasing. Central Management is responsible for the Electronic Benefits Transfer System, which electronically distributes cash assistance and food stamp benefits to clients.

Within Central Management, the Office of Policy Analysis, and Research and Development provides planning support for the department in the development and implementation of revised programs and initiatives. The Office of Legal Services represents the department in litigation, and provides counsel to the director and staff on legal issues relating to departmental operations. The Employee Relations Unit is responsible for the recruitment of staff, with emphasis on opportunities for minority employment. The Operations Management Unit develops and maintains departmental information systems, performs quality control for various programs, and operates the central mail room. Other centralized functions include support for financial management, information systems, collections and fraud investigations, and contract management.

#### **Program Objective**

To provide leadership, management, strategic planning, and central support for the department.

#### **Statutory History**

Title 40 Chapter 1 of the Rhode Island General Laws establishes that all functions, services, and duties of the Department of Human Services will be organized by the Director of the department.

## Department of Human Services Central Management

	FY 2004	FY 2005	FY 2006	FY 2007
	Actual	Actual	Revised	Recommended
Expenditures By Object				
Personnel	3,702,004	3,833,448	4,213,707	3,422,698
Other State Operations	340,342	401,880	443,751	1,497,624
Aid To Local Units of Government	-	_	-	-
Assistance, Grants and Benefits	7,900,057	7,856,921	13,307,332	11,963,765
<b>Subtotal: Operating Expenditures</b>	\$11,942,403	\$12,092,249	\$17,964,790	\$16,884,087
Capital Improvements	5,672	50,000	-	-
Capital Debt Service	-	-	-	-
Total Expenditures	\$11,948,075	\$12,142,249	\$17,964,790	\$16,884,087
Expenditures By Funds				
General Revenue	5,666,157	5,952,378	9,331,837	7,857,682
Federal Funds	3,947,234	3,790,888	6,666,515	6,670,510
Restricted Receipts	2,334,684	2,398,983	1,966,438	2,355,895
Total Expenditures	\$11,948,075	\$12,142,249	\$17,964,790	\$16,884,087
Program Measures				
Percentage of Homeless Families Placed in Permanent Housing Which Do Not Return	05.00	05.00	02.00	02.00
for Services	95.0%	95.0%	93.0%	93.0%

### **Department of Human Services Child Support Enforcement**

#### **Program Operations**

Child Support Enforcement was transferred from the Department of Administration to the Department of Human Services, effective July 1, 2005. This program is established to strengthen families through financial support and to reduce welfare dependence by ensuring that parents honor obligations to support their children. The concern for the well being of children who live with only one parent, and the desire to promote self-sufficiency for these single parent families, prompted both the state and federal governments to establish Child Support Enforcement Programs nationwide.

#### **Program Objectives**

Child Support Enforcement was established to strengthen families through financial support and to reduce welfare dependency by ensuring that parents are responsible for supporting their children.

#### **Statutory History**

R.I.G.L. 15-11.1 outlines the duties and responsibilities of the Child Support Enforcement Program. R.I.G.L 42-12-28 effectuates the transfer of the program from the Department of Administration.

## Department of Human Services Child Support Enforcement

	FY 2004	FY 2005	FY 2006	FY 2007
	Actual	Actual	Revised	Recommended
Expenditures By Object				
Personnel	-	-	8,515,865	9,128,677
Other State Operations	-	-	2,420,546	2,338,216
Aid To Local Units of Government	-	-	-	-
Assistance, Grants and Benefits	-	-	671	671
Subtotal: Operating Expenditures	-	-	\$10,937,082	\$11,467,564
Capital Improvements	-	-	-	-
Capital Debt Service	-	-	-	-
Total Expenditures	-	-	\$10,937,082	\$11,467,564
Expenditures By Funds				
General Revenue	-	-	3,614,273	3,791,180
Federal Funds	-	-	7,322,809	7,676,384
Restricted Receipts	-	-	-	-
Total Expenditures	-	-	\$10,937,082	\$11,467,564
Program Measures				
Current Child Support Collected as a				
Percentage of Support Owed	61.8%	62.0%	62.1%	62.2%

### **Department of Human Services Individual and Family Support**

#### **Program Operations**

The Individual and Family Support Program (IFS) has the primary responsibility within the department to implement state and federal welfare reform changes and the State's early care and education programs. The Individual and Family Support Program provides policy and program development and management, including monitoring and evaluation, systems development, and the processing and payment functions related to social services for populations served by the department. The Individual and Family Support Program is responsible for ensuring that the services affecting all populations are provided in accordance with state and federal mandates.

The Individual and Family Support Program has the responsibility for the operational planning, direction, coordination and implementation of programs such as the Family Independence Program (FIP), Child Care Development Fund, and the Head Start Collaboration Grant. Funding for the Title XX Block Grant, the Community Services Block Grant, the Refugee Assistance Program, and special funding for victims of domestic violence, the homeless, and the elderly are also within the IFS program. Funding for the administration of the General Public Assistance Program, Food Stamp Program, and Supplemental Security Income is recorded in the IFS Program.

The Individual and Family Support Program also contains comprehensive case management programs for teen mothers and their children and provides child care services for both FIP clients and low income families. Serving Rhode Island's disabled population is the Office of Rehabilitation Services (ORS) and Services for the Blind and Visually Impaired (SBVI). ORS continues to implement new technologies in its service delivery systems, which works in partnership with consumers to achieve meaningful employment outcomes.

#### **Program Objective**

To provide assistance and supports to clients so that they may transition to self-sufficiency.

#### **Statutory History**

Title 40 Chapter 5.1 of the Rhode Island General Laws establishes the Family Independence Program. The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) replaces Title IV-A of the Federal Social Security Act. Title 42 Chapter 12 of the Rhode Island General Laws establishes the Vocational Rehabilitation Program; Title 40 Chapter 9 establishes the Services to the Blind and Visually Impaired Program; Title 40 Chapter 19 authorizes the Adolescent Pregnancy and Parenting Program; and Title 40 Chapter 6.2 authorizes the Child Care Services Program. Article 11 of the FY 1999 Appropriations Act establishes the Starting Right Initiative in Title 40, Chapters 5.1 and 6.2, Title 42, Chapters 12 and 72.1.

The Budget

## **Department of Human Services Individual and Family Support**

	FY 2004	FY 2005	FY 2006	FY 2007
	Actual	Actual	Revised	Recommended
Expenditures By Object				
Personnel	38,303,205	40,600,965	47,752,132	50,719,796
Other State Operations	15,196,547	15,153,958	11,650,117	11,820,051
Aid To Local Units of Government	2,175	-	-	-
Assistance, Grants and Benefits	15,214,866	14,649,964	18,802,702	19,293,001
<b>Subtotal: Operating Expenditures</b>	\$68,716,793	\$70,404,887	\$78,204,951	\$81,832,848
Capital Improvements	82,865	2,374	95,000	45,000
Capital Debt Service	-	-	-	-
Total Expenditures	\$68,799,658	\$70,407,261	\$78,299,951	\$81,877,848
Expenditures By Funds				
General Revenue	19,609,357	21,303,519	23,363,349	25,884,920
Federal Funds	49,106,240	49,019,117	54,794,658	55,900,984
Restricted Receipts	84,061	84,625	91,944	91,944
Other Funds	· -	· -	50,000	· <u>-</u>
Total Expenditures	\$68,799,658	\$70,407,261	\$78,299,951	\$81,877,848
Program Measures				
Persons with Individualized Plan for Employment Achieving an Employment Outcome	59.3%	58.3%	60.5%	60.9%
Accuracy of Disability Determination Adjudications - Office of Rehabilitation Services	94.6%	94.1%	95.5%	95.6%

### Department of Human Services Veterans' Affairs

#### **Program Operations**

The Veterans' Affairs Program serves eligible Rhode Island Veterans, their surviving spouses, and dependents. Benefits include a comprehensive program of social, medical and rehabilitative services. The Veterans' Affairs Program is comprised of the Rhode Island Veterans' Home, the Rhode Island Veterans' Affairs Office, and the Rhode Island Veterans' Memorial Cemetery.

Veterans' Affairs is confronting a growing challenge as a result of a rapidly aging veteran's population. Rhode Island has a population of approximately 91,000 veterans. Although the total number of war service veterans is declining, the growth in the proportion of aging (World War II and Korean) veterans is escalating. Of the 68,000 War Veterans, approximately 18,300 are World War II Veterans, with an average age above 69.

The purpose of the Veterans' Home is to provide quality nursing and domiciliary care to the veteran. Social, medical, nursing, and rehabilitative services for eligible Rhode Island Veterans, their survivors, and/or dependents, are available to improve their physical, emotional, and economic well-being. The Rhode Island Veterans' Home has an operational bed capacity of 339 beds (260 nursing and 79 domiciliary/sheltered care beds). Within the 339 bed complement is a 36-bed unit for veterans who suffer from dementia type illnesses. The Veterans' Home admits war service veterans who have been honorably discharged and have resided in the State at least two years prior to admission and/or were inducted into the military service from the State. Residential care is available to eligible veterans who require a sheltered care environment. The Veterans' Transitional Supportive Program (VTSP) is a program operated in concert with the federal Veterans Administration. VTSP offers a multitude of psychological/social counseling, substance abuse treatment, and contract work therapy opportunities provided on a short-term basis to assist veterans with reintegration to their communities.

#### **Program Objective**

To continue to improve the physical, emotional, and economic well-being of Rhode Island veterans.

#### **Statutory History**

Title 30 Chapters 17, 24, 25, and 29 and Title 30 Chapter 25 of the Rhode Island General Laws established the Division of Veterans Affairs.

The Budget

## Department of Human Services Veterans' Affairs

	FY 2004	FY 2005	FY 2006	FY 2007
	Actual	Actual	Revised	Recommended
Expenditures By Object				
Personnel	17,994,271	18,657,643	20,734,745	20,570,390
Other State Operations	3,568,339	3,674,002	4,551,900	5,722,263
Aid To Local Units of Government	-	-	-	-
Assistance, Grants and Benefits	17,048	17,420	17,500	17,500
Subtotal: Operating Expenditures	\$21,579,658	\$22,349,065	\$25,304,145	\$26,310,153
Capital Improvements	1,304,841	-	2,637,650	2,665,000
Capital Debt Service	-	-	-	-
Total Expenditures	\$22,884,499	\$22,349,065	\$27,941,795	\$28,975,153
Expenditures By Funds General Revenue Federal Funds Restricted Receipts Total Expenditures	16,041,172 6,293,214 550,113 \$22,884,499	16,871,223 4,888,561 589,281 \$22,349,065	18,655,330 6,661,948 2,624,517 <b>\$27,941,795</b>	20,023,332 7,588,106 1,363,715 \$28,975,153
Program Measures				
Veterans' Home Compliance with Health Department Survey Standards	100.0%	100.0%	100.0%	100.0%
Persons Completing the Veteran Transitional Supportive Program Securing Housing by the End of Six Months	70.0%	75.0%	84.0%	84.0%

### Department of Human Services Health Care Quality, Financing and Purchasing

#### **Program Operations**

The objectives of the Health Care Quality, Financing and Purchasing (HCQFP) Program are: to assure the availability of high quality health care services to consumers; to assure the efficiency and economy of services delivered to program recipients by monitoring providers of services; to coordinate service-delivery efforts with other state departments and agencies; to purchase medically necessary services covered by the Medicaid State Plan; and, to administer programs in a manner consistent with federal and state laws and regulations. These services are provided to three population groups: families and children, individuals with disabilities, and the elderly.

DHS is the Single State Agency authorized by the Federal Centers for Medicare and Medicaid Services to administer the Medicaid program in Rhode Island. In this role, DHS supervises disbursements to a number of state agencies, as well as local school districts, for administrative and program activities in support of the Medicaid program. The HCQFP Program operates a claims processing system, secures financial recoveries from third parties for claims liability, and conducts utilization review of inpatient and outpatient hospital services. To encourage the utilization of community-based services rather than institutional programs, HCQFP administers home and community-based waivers - both directly and through interagency agreements with the Departments of Elderly Affairs and Mental Health, Retardation and Hospitals. HCOFP also administers a demonstration waiver to provide health services to families through a managed care delivery system, RIte Care, and is responsible for administration of a Section 1115 SCHIP waiver amendment to the current managed care program in order to implement the provisions of Health Reform RI 2000. This assures that the program serves either persons without access to affordable employer-sponsored insurance, or maintains persons in employer-based insurance, if more cost-effective. HCOFP administers the Early Intervention Program for at risk children up to age three and processes the payments to the local education authorities for Medicaid reimbursement for administrative costs.

#### **Program Objective**

To purchase health care services for consumers at a reasonable cost, while assuring quality and access, and to administer the Medical Assistance Benefits Program activities in a manner consistent with federal and state laws and regulations.

#### **Statutory History**

Title XIX of the Federal Social Security Act was enacted by Congress under the provisions of Public Law 89-97. Title 40 Chapter 8 of the Rhode Island General Laws establishes the Rhode Island Medical Assistance Program. Title 40 Chapter 16 of the Rhode Island General Laws authorizes the Health Centers and Visiting Nurse Grant Program. Title 42 Chapter 12.3 and Title 40-6.2 of the Rhode Island General Laws authorizes the Department of Human Services to establish and administer both the RIte Care Program and health care for certain child care providers, and Section 23-13-22 of the Rhode General Laws authorizes the department to administer the Early Intervention Program.

The Budget

## Department of Human Services Health Care Quality, Financing and Purchasing

	FY 2004 Actual	FY 2005 Actual	FY 2006 Revised	FY 2007 Recommended
<b>Expenditures By Object</b>				
Personnel	40,281,792	42,405,721	51,884,959	54,251,628
Other State Operations	5,063,493	5,442,050	4,032,441	4,205,651
Aid To Local Units of Government	-	-	-	_
Assistance, Grants and Benefits	16,667,265	7,673,261	10,145,584	10,146,163
Subtotal: Operating Expenditures	\$62,012,550	\$55,521,032	\$66,062,984	\$68,603,442
Capital Improvements		-	-	-
Capital Debt Service	-	-	-	-
Total Expenditures	\$62,012,550	\$55,521,032	\$66,062,984	\$68,603,442
Expenditures By Funds				
General Revenue	24,367,153	19,031,486	21,173,981	22,412,361
Federal Funds	36,997,437	36,028,522	44,348,855	45,624,266
Restricted Receipts	647,960	461,024	540,148	566,815
Total Expenditures	\$62,012,550	\$55,521,032	\$66,062,984	\$68,603,442
Program Measures				
Length of Stay				
Average Length of Stay for:				
Pneumonia	7.1	5.9	5.8	5.4
Angina Pectoris	2.7	2.5	2.3	2.2
Alcohol Dependency	5.1	5.0	5.3	5.5
Chest Pain	3.1	3.3	3.2	3.1
Congestive Heart Failure	5.7	6.1	6.5	6.6
Depressive Disease	7.6	8.8	9.0	9.5
Chronic Airway Obstructive Disease	6.5	6.4	6.0	5.9
Abdominal Pain	4.4	5.1	4.8	4.9
Acute Pancreatitis	5.7	11.4	8.6	8.8
Recurrent Depression	9.6	8.5	8.7	8.7

### **Department of Human Services Medical Benefits**

#### **Program Operations**

The Medical Benefits Program assures quality and access to necessary medical services for approximately 196,000 consumers through the purchase of health care at a reasonable cost, primarily financed by Medicaid. These services are provided to three population groups: families and children, individuals with disabilities, and the elderly. Medicaid is a federal and state matching entitlement program administered by states to provide medical benefits. The federal share of reimbursement, which is based on a state's per capita personal income, is 54.45 percent for federal fiscal year 2006 and 52.35 percent for federal fiscal year 2007.

DHS, in accordance with the federally-approved State Plan and a multitude of state and federal laws, specifies the scope of covered services, establishes fees for services and reimbursement rates for hospital and nursing facility services, adjudicates and pays claims for medical facility services, and adjudicates and pays claims for medical services submitted by providers. The Medical Benefits Program covers a broad scope of medical services provided to eligible individuals by service providers licensed by the Department of Health or other appropriate state or federal accrediting authority, and enrolled as service providers by the Medical Benefits Program.

The Medical Benefits Program provides health insurance to FIP families, children through age 18 with family incomes not in excess of 250 percent of the federal poverty limit and other low income families. Health care is provided to children with special needs under the Supplemental Security Income Program (SSI) or the Early Periodic Screening Diagnosis and Treatment (EPSDT) program. Acute and long-term care services are provided to adults with disabilities and the elderly. There are four home and community-based waiver programs administered directly by DHS or through the Departments of Elderly Affairs (DEA) and Mental Health, Retardation and Hospitals. DHS, in cooperation with DEA and the Rhode Island Housing Mortgage and Financing Corporation (RIHMFC), is working to develop waivers for assisted living programs. A Section 1115 SCHIP waiver provides that families without access to employer-based insurance will have health insurance coverage, or be able to maintain their employer-sponsored insurance benefits, if more cost-effective. HCQFP administers the Early Intervention Program for at-risk children up to age three.

#### **Program Objective**

To assure the availability and accessibility of high quality health care services to program recipients.

#### **Statutory History**

Title XIX of the Social Security Act was enacted by Congress under the provision of Public Law 89-97 on July 30, 1965. The Rhode Island Medical Assistance Program was implemented under Title 40 Chapter 8 of the Rhode Island General Laws. Title 42 Chapter 12.3 and Title 40-6.2 of the Rhode Island General Laws authorized the Department of Human Services to establish and administer the RIte Care Program and health care for certain childcare providers. R.I.G.L. 23-13-22 authorizes the department to administer the Early Intervention Program.

## Department of Human Services Medical Benefits

	FY 2004	FY 2005	FY 2006	FY 2007
	Actual	Actual	Revised	Recommended
Expenditures By Subprogram				
Hospitals	232,000,579	244,244,916	257,200,000	162,667,470
Nursing Facilities	291,981,426	292,757,265	298,600,000	304,922,741
Managed Care	327,996,953	376,350,206	437,069,200	436,112,640
Other Services	233,716,211	275,337,752	147,253,913	147,453,853
Special Education	33,119,199	19,238,891	20,068,294	20,733,240
Pharmacy	-	-	114,943,267	94,872,375
Total Expenditures	\$ 1,118,814,368	\$ 1,207,929,030	\$ 1,275,134,674	\$ 1,166,762,319
Expenditures By Object				
Personnel	(257,318)	514,636	_	_
Other State Operations	(207,010)	-	_	_
Aid To Local Units of Government	_	_	_	_
Assistance, Grants and Benefits	1,119,071,686	1,207,414,394	1,275,134,674	1,166,762,319
Subtotal: Operating Expenditures	\$1,118,814,368	\$1,207,929,030	\$1,275,134,674	\$1,166,762,319
Capital Improvements	-	-	-	-
Capital Debt Service	-	-	-	-
Total Expenditures	\$1,118,814,368	\$1,207,929,030	\$1,275,134,674	\$1,166,762,319
Expenditures By Funds				
General Revenue	466,005,238	530,085,011	577,406,163	563,215,215
Federal Funds	652,800,149	677,838,582	697,713,511	603,532,104
Restricted Receipts	8,981	5,437	15,000	15,000
Total Expenditures	\$1,118,814,368	\$1,207,929,030	\$1,275,134,674	\$1,166,762,319
Program Measures				
Neonatal Intensive Care Unit Admissions Per One Thousand Live Births	89.0	89.5	90.0	90.0
Number of Physician's Office Visits per RIte Care Enrollee	5.6	6.0	6.0	6.0
Number of Emergency Room Visits per 1,000 RIte Care Enrollees	398	450	450	450
Number of Hospital Days per 1,000 Rite Care Enrollees	451	465	470	470

### **Department of Human Services Supplemental Security Income**

#### **Program Operations**

The Supplemental Security Income (SSI) Program provides a floor of income for aged, blind and disabled persons who have little or no income or other resources. The basic federal SSI Cash Assistance Grant, annually adjusted for inflation, is funded in full by the federal government. Because the federal payment leaves many recipients below the federal poverty level, certain states have chosen to provide a supplement to the federal benefit; financed with state funds. Persons eligible for SSI are also eligible, under specified criteria, for in-state moving expenses, and for needs resulting from an emergency of a catastrophic nature.

Since the inception of SSI in 1974, the program caseload has grown each year. This reflects an increase in the aging population, new and emerging disabilities, less stringent disability requirements, and increases in allowable resource limits.

#### **Program Objective**

To provide financial aid to individuals who are aged, blind, or disabled and who do not have sufficient resources to maintain a reasonable standard of health and well-being.

#### **Statutory History**

Title XVI of the Federal Social Security Act in 1974 created a federally administered Supplemental Security Income Program. This program replaced the assistance program previously administered by the State, which provided aid to aged, blind, and disabled Rhode Islanders. Title 40 Chapter 6 of the Rhode Island General Laws established the Supplemental Security Income Program.

The Budget

## **Department of Human Services Supplemental Security Income**

	FY 2004 Actual	FY 2005 Actual	FY 2006 Revised	FY 2007 Recommended
<b>Expenditures By Object</b>				
Personnel	-	-	-	-
Other State Operations	-	-	-	-
Aid To Local Units of Government	-	-	-	-
Assistance, Grants and Benefits	26,560,554	27,313,914	27,713,041	28,517,635
<b>Subtotal: Operating Expenditures</b>	\$26,560,554	\$27,313,914	\$27,713,041	\$28,517,635
Capital Improvements	-	-	-	-
Capital Debt Service	-	-	-	-
Total Expenditures	\$26,560,554	\$27,313,914	\$27,713,041	\$28,517,635
Expenditures By Funds				
General Revenue	26,560,554	27,313,914	27,713,041	28,517,635
Total Expenditures	\$26,560,554	\$27,313,914	\$27,713,041	\$28,517,635
Program Measures	NS	NS	NS	NS

### **Department of Human Services Family Independence**

#### **Program Operations**

The Family Independence Program (FIP) provides support, including child care, health care, and cash payments to needy children and their families, along with a strong emphasis on requiring families who receive cash assistance to prepare for, and achieve, employment. Long-term assistance was replaced with a transitional and time-limited support system. Having replaced the Aid to Families with Dependent Children (AFDC) program, FIP provides for greater flexibility to the State in eligibility criteria, client responsibility, and types of benefits and services provided. TANF (Temporary Assistance for Needy Families) is the corresponding federal block grant, which is a major revenue source for FIP.

The emphasis in FIP is to achieve gainful employment and self-sufficiency, with the ultimate outcome of strong, healthy families. FIP promotes work as the source of family income and has a lifetime limit of 60 months for the receipt of cash assistance for adults. Child care, health care, and other supportive services are an entitlement to those families pursuing economic independence. Enhanced financial incentives in the form of income allowances encourage families to increase earned income. FIP beneficiaries may participate in education and training during the first 24 months of their employment, followed by a requirement to engage in paid or unpaid work.

Under FIP, child care and health care are considered an essential component of the long-range plan to move clients from dependence to independence. An effective, seamless system of child care and health care for both cash assistance recipients and low income working families is a critical program element in the total mix of services which are necessary to foster independence.

#### **Program Objectives**

To provide assistance to clients to aid the transition to self-sufficiency.

#### **Statutory History**

The Aid to Families with Dependent Children (AFDC) Program, which was initiated in the 1930s as Title IV of the Social Security Act, is replaced by the Temporary Assistance for Needy Families (TANF) in Title I of PRWORA. Child care funding is provided under Title VI of PRWORA. Title 40 Chapter 5.1 enacted the Rhode Island Family Independence Act (RI FIA).

## Department of Human Services Family Independence

	FY 2004	FY 2005	FY 2006	FY 2007
	Actual	Actual	Revised	Recommended
Expenditures by Subprogram				
TANF/Family Independence Program	79,138,856	73,345,262	67,355,223	56,906,625
Child Care	80,527,398	79,566,329	78,338,796	73,699,423
Total Expenditures	\$159,666,254	\$152,911,591	\$145,694,019	\$130,606,048
Expenditures By Object				
Personnel	-	-	-	-
Other State Operations	-	(140,969)	-	-
Aid To Local Units of Government	-	-	-	-
Assistance, Grants and Benefits	159,666,254	153,052,560	145,694,019	130,606,048
<b>Subtotal: Operating Expenditures</b>	\$159,666,254	\$152,911,591	\$145,694,019	\$130,606,048
Capital Improvements	-	-	-	-
Capital Debt Service	-	-	-	-
Total Expenditures	\$159,666,254	\$152,911,591	\$145,694,019	\$130,606,048
Expenditures By Funds				
General Revenue	72,012,725	70,947,244	56,380,828	46,805,088
Federal Funds	87,653,529	81,964,347	89,313,191	83,800,960
Total Expenditures	\$159,666,254	\$152,911,591	\$145,694,019	\$130,606,048
Program Measures				
Family Independence Program Families with Earned Income	20.8%	21.0%	21.0%	21.0%
Job Retention Rate For Family Independence Program Families No Longer Receiving Cash Assistance	63.4%	63.4%	63.4%	64.0%

### Department of Human Services State Funded Programs

#### **Program Operations**

The program "State Funded Programs" is comprised of assistance programs with discrete appropriation lines described below.

The General Public Assistance (GPA) Program is designed to meet the health care needs of incapacitated and unemployable persons who are suffering from an illness, injury, or medical condition and do not qualify for other public assistance programs. The program provides for limited medical assistance, consisting of physician services and a limited formulary (list) of prescription medications. The program also provides burials for indigent persons. Limited cash assistance is available from two special contingency funds. Under state welfare reform statutes, two parent families who had received services from GPA became eligible under FIP.

#### **Program Objectives**

To provide for the medical needs for ill or disabled individuals who do not quality for other federal programs, limited emergency cash assistance for individuals who experience extreme financial hardship, and, interim cash assistance for totally disabled individuals who are accepted for Title XIX Medical Assistance pending eligibility application for federal Social Security benefits.

#### **Statutory History**

Title 40 Chapter 6 of the Rhode Island General Laws (RIGL) established the General Public Assistance Program. R.I.G.L 40-6-8(d) established the State Food Stamp Program.

The Budget

## Department of Human Services State Funded Programs

	FY 2004	FY 2005	FY 2006	FY 2007
	Actual	Actual	Revised	Recommended
Expenditures by Subprogram				
General Public Assistance	3,000,644	3,031,987	3,432,197	3,725,050
SSI for Immigrants - State Programs	50,000	50,000	50,000	50,000
Food Stamps for Immigrants	1,195	-	_	-
Food Stamps - Benefits	72,582,664	77,550,950	80,321,280	83,605,512
Total Expenditures	\$75,634,503	\$80,632,937	\$83,803,477	\$87,380,562
Expenditures By Object				
Personnel	57,676	61,661	_	-
Other State Operations	, -	, -	-	-
Aid To Local Units of Government	-	-	-	-
Assistance, Grants and Benefits	75,576,827	80,571,276	83,803,477	87,380,562
Subtotal: Operating Expenditures	\$75,634,503	\$80,632,937	\$83,803,477	\$87,380,562
Capital Improvements	-	-	-	-
Capital Debt Service	-	-	-	-
Total Expenditures	\$75,634,503	\$80,632,937	\$83,803,477	\$87,380,562
Expenditures By Funds				
General Revenue	3,023,449	2,980,047	3,397,197	3,690,050
Federal Funds	72,611,054	77,652,890	80,406,280	83,690,512
Total Expenditures	\$75,634,503	\$80,632,937	\$83,803,477	\$87,380,562
Total Expenditures	\$13,034,303	\$60,03 <i>2,73</i> 7	\$65,605, <del>4</del> 77	\$67,360,302
Program Measures	NS	NS	NS	NS