

**NEVADA STATE DIVISION OF WELFARE AND
SUPPORTIVE SERVICES**



**STATE FISCAL
YEAR 2014
FACT BOOK**

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FOREWORD

The mission of the Division of Welfare and Supportive Services is to provide quality, timely and temporary services to help Nevada families, the disabled and the elderly achieve their highest levels of self-sufficiency. This Fact Book is a comprehensive description of the services provided by the Division to meet our mission as well as a snapshot of the program statistics.

Over the past biennium the Division has experienced significant growth to the Medicaid caseload due to the expanded eligibility categories created by the Affordable Care Act and adopted by the state. Since January 1, 2014, Nevada Medicaid is serving more than 300,000 previously uninsured Nevadans who experienced great difficulty in accessing health care services without Medicaid. This and other caseload growth has necessitated the opening of two district offices, an administrative office in Las Vegas and a district office in Sparks. Another district office will be opened in Las Vegas in early 2015.

DWSS has implemented a new and robust call center to answer Welfare and Medicaid related questions. Over 500 lines are available to callers and the new system includes a feature that allows the caller to hang up and wait for a call back from a customer service agent while retaining their place in line. If the call volume exceeds call center capacity calls are routed to district office staff until the call volume can again be managed by call center staff.

Continued outreach efforts among the Division's "trusted partners" in the community have helped bring benefits to those in need who might otherwise not take advantage of SNAP. The Division views the increase in SNAP participation percentage among eligible families as a positive in that assisting low income families in Nevada purchase sufficient food to meet basic nutritional needs benefits everyone. Additional federal revenue is brought into our economy, children perform better in school and the burden is lightened in our medical facilities.

In light of the profound increases both in population and need, the Division continues to engage in progressive automation projects to ensure Nevada families in need are served as efficiently as possible. The most notable of the Division's current projects is the Application Modernization and Productivity Services (AMPS) project. The Access NV software currently allows clients to apply for services through a dynamic interview process from any web-connected computer and will provide the citizens of Nevada with the opportunity to self-serve their active cases in the near future. My staff and I believe the Fact Book provides valuable information to assess the progress made and what remains to be accomplished in providing public assistance to needy eligible Nevadans. Users of the document should pay particular attention to footnotes on individual tables and graphs.

Any comments or suggestions are welcome so future editions may be improved.

Steve H. Fisher
Administrator

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INDEX

EXECUTIVE SUMMARY - MAJOR PROGRAMS.....	ADMIN1-- 1 -
DEVELOPMENT OF WELFARE IN THE UNITED STATES	ADMIN2- 1
DEVELOPMENT OF WELFARE IN NEVADA.....	ADMIN3- 1
NSWD ACRONYMS / ABBREVIATIONS	ADMIN4- 1
CASELOAD HISTORY	R&S Caseload- 1
CHILD CARE AND DEVELOPMENT PROGRAM.....	CHILDCARE- - 1 -
CHILD SUPPORT ENFORCEMENT PROGRAM	CSEP-1
EMPLOYMENT AND SUPPORT SERVICES - SOCIAL SERVICES.....	E&SSSS-1
EMPLOYMENT AND SUPPORT SERVICES - NEW EMPLOYEES OF NEVADA (NEON)...	E&SSNEON-1
EMPLOYMENT AND SUPPORT SERVICES - SNAP EMPLOYMENT & TRAINING PROGRAM	E&SSSNAPET-1
ENERGY ASSISTANCE PROGRAM (EAP).....	EAP-1
INFORMATION SYSTEMS.....	IS-1
INVESTIGATIONS AND RECOVERY.....	I&R-1
PROGRAM REVIEW AND EVALUATION (PRE).....	PRE-1
PROGRAM INCOME LIMITS	E&PINC-1
SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM.....	E&PSNAP-1
THRIFTY FOOD PLAN.....	E&PTHRI-1
TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF).....	E&PTANF-1
TANF NEED STANDARDS AND PAYMENT LEVELS	E&PS&PL 1
TANF TWO-PARENT PROGRAM	E&P2P-1

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**EXECUTIVE SUMMARY
DIVISION OF WELFARE AND
SUPPORTIVE SERVICES**

DECEMBER 2014

The mission of the Division of Welfare and Supportive Services is to provide quality, timely and temporary services enabling Nevada families, the disabled and elderly to achieve their highest levels of self-sufficiency.

MAJOR PROGRAMS

- Temporary Assistance for Needy Families (TANF)
- Supplemental Nutrition Assistance Program (SNAP)
- Child Support Enforcement Program (CSEP)
- Employment and Supportive Services (E&SS)
 - New Employees of Nevada (NEON)
 - SNAP Employment & Training
 - Social Services
- Child Care Development Fund (CCDF)
 - Child Care Subsidy Program
- Medicaid Eligibility
 - Medical coverage for adults, children and families
 - Medical Assistance for the Aged, Blind and Disabled (MAABD)
 - Medicare Beneficiaries to include:
 - Qualified Medicare Beneficiaries (QMB)
 - Special Low-Income Medicare Beneficiaries (SLMB)
 - Qualified Individuals 1 (QI1)
 - Qualified Disabled Working Individuals (QDWI)
- Energy Assistance Program (EAP)

Temporary Assistance for Needy Families (TANF)

TANF provides assistance to needy families so children may be cared for in their homes or in the homes of relatives, and provides work-eligible individuals with job preparation, work opportunities and support services to enable them to leave the program and become self-sufficient.

TANF is a time-limited cash assistance program. Federal law allows a five-year lifetime limit on receipt of TANF benefits. In Nevada, recipients may receive 24 months of assistance, after which they must remain off for 12 consecutive months; unless they meet hardship criteria. Receipt of benefits may continue until the lifetime limit of five years is reached.

TANF is federally funded through a block grant from the Department of Health and Human Services. In addition, through the maintenance of effort (MOE) provision in the federal regulations, states are required to contribute state money equal to 80% of the amount spent on the former Aid to Families with Dependent Children (AFDC) and JOBS programs during federal fiscal year 1994. The 80% MOE can be reduced to 75% for each year the work participation rates are met.

Program success is measured by the number of households that leave the TANF program due to employment.

In FY 14, the average number of recipients receiving cash benefits each month was 32,239. The total cash grant expenditure for TANF in FY14 was \$48,159,450 with an average monthly grant of \$124.49 per recipient. The average TANF grant household size was 2.61 people.

Supplemental Nutrition Assistance Program (SNAP)

The Food Stamp Program was renamed the Supplemental Nutrition Assistance Program (SNAP), effective October 1, 2008 by federal mandate in order to engender a more positive identity and provide broader nutritional support for low income families. The purpose of this program is to raise the nutritional level among low income households whose limited food purchasing power contributes to hunger and malnutrition.

SNAP benefits are funded with 100% federal monies. Administrative costs for SNAP are 50% federal and 50% state funds.

The monthly average number of persons participating in SNAP in SFY 14 was 375,506. The total amount of SNAP benefits issued to Nevadans in SFY 14 was \$527,560,395, which averaged \$117.08 per month per individual.

Child Support Enforcement Program (CSEP)

The Child Support Enforcement Program (CSEP) was established in 1975 pursuant to Title IV, Part D of the Social Security Act. The Title IV-D program is a federal, state, and local partnership committed to ensuring that the financial, medical and emotional needs of children are met through child support enforcement services.

The state-administered Nevada CSEP operates in all 17 counties, through a combination of participating District Attorney Offices, State Program Area Offices (PAOs), and a Central Administrative Office. Some participating County District Attorney Offices only provide child

support services for non-public assistance cases while others provide services to both public assistance and non-public assistance cases. The state provides services in those counties where the district attorneys do not.

Federal Financial Participation (FFP) in the program is provided for most necessary and approved expenditures at the rate of 66%. In Nevada the state and ten participating counties contribute 34% toward the cost of the program. The federal government also provides performance based incentive payments to qualifying states. The majority of incentives are passed on to the participating county district attorney offices for future program enhancements. The federal Office of Child Support Enforcement (OCSE) can also assess penalties for failure to achieve minimum performance levels. Penalties are withheld from a state's TANF grant.

At the end of state fiscal year (SFY) 2014, there were 100,883 cases receiving IV-D program services, 49% of which were public assistance related. CSEP collected \$204,824,526 in child support payments during SFY 2014 compared to \$203,324,553 in SFY 2013. More significantly, Nevada's CSEP continued to improve in each of the five federal performance measures. For the time period FFY 2008 to FFY 2013, the following improvements were achieved: a 33.9% increase in the paternity establishment rate; a 14.6% increase in the number of support orders established; a 10% increase in the current support measure; a 5.8% increase in the number of cases with an arrears collection; and, an 11.8% increase in cost effectiveness. Improvements in the federal performance measures increase Nevada's ability to compete for federal incentive dollars which are used to enhance CSEP.

CSEP assists families in moving from public assistance to self-sufficiency. In SFY 2014, the program passed on \$359,493 in child support to families receiving TANF benefits. Prior to 1998 the federal government contributed 50% to these payments; however, since 1998 these payments have been totally funded by the state. During SFY 2014, the program also collected and distributed \$36,483,038 in child support payments to families who had previously received public assistance in Nevada.

Employment and Supportive Services (E&SS)

The Division of Welfare and Supportive Services provides education and training to individuals via the New Employees of Nevada (NEON), the SNAP Employment and Training, and the Non-Custodial Parent Employment Assistance Programs. Clients are further assisted with social services to help them become self-sufficient.

NEON

NEON provides Temporary Assistance for Needy Families (TANF) recipients a means to acquire basic and vocational skills and overcome barriers to achieve economic independence through employment. Recipients are screened to determine if personal issues such as domestic violence, parenting, substance abuse, etc., are inhibiting a successful transition to productive employment. After completing the assessment, the participant enters into a Personal Responsibility Plan (PRP) with the Division of Welfare and Supportive Services. The PRP specifies the services the participant will receive from the agency and identifies what the participant must do to achieve goals. Services are determined based on the individual's needs and can range from short-term classroom training to placements in public or nonprofit settings where job skills are gained through practical experience. The PRP is updated as the participant's circumstances change.

The NEON program receives funding through the TANF Block Grant and State General Fund. Funding to provide child care services to NEON participants is obtained from the Child Care

Development Fund.

SNAP Employment & Training

Nevada operates a SNAP Employment & Training (SNAP E&T) program statewide to provide employment, education, training and support services to SNAP recipients required to participate in a work activity as a condition of eligibility for SNAP. Support services such as transportation, and money for work-related costs are available to participants. Exemptions from participation include being under age 16, age 60 or older, disabled, caring for young children (under age six) or disabled family members, employed at least 20 hours per week, homeless, complying with the NEON program, living outside the metropolitan areas of Clark and Washoe Counties, or temporarily laid off from a job.

Administration and operation of the SNAP E&SS program is 100% federally funded. Participant expenses are funded with 50% federal and 50% state funds.

In SFY 11, participants who obtained employment averaged 30 hours per week with an average hourly wage of \$10.13. In SFY 12, participants who obtained employment averaged 28 hours per week with an average hourly wage of \$9.57.

Social Services

The challenge of working with the “hardest to employ” (HtE) participants, who are also facing cash assistance time limits, are addressed by the Division of Welfare and Supportive Services social workers. The HtE families experience a multitude of barriers/issues preventing them from being both emotionally and economically self-sufficient. Some issues addressed by social workers with the HtE family are domestic violence, substance abuse, mental health, health and/or caring for children with severe medical or emotional problems.

Social service programs are funded through the TANF Block Grant and the State General Fund.

The Division of Welfare and Supportive Services also developed a protocol with the Division of Public and Behavioral Health, and Vocational Rehabilitation to effectively address mental health and vocational rehabilitation issues with TANF clients serviced by these agencies.

Child Care Development Fund

In Nevada, the Child Care and Development Program (CCDP) has been in operation for over twenty years. The program provides child care subsidies to low income families who are working, searching for work, or participating in the Temporary Assistance for Needy Families (TANF) New Employees of Nevada (NEON) program through the Division of Welfare and Supportive Services. The purpose of the program is to provide the necessary supports that assist families in moving from welfare to work. In addition to subsidizing child care for low income families, four percent of program funds are used for quality improvement activities which include increasing parental access and choice for child care services, improving the delivery of child care services, and improving the education level of the child care workforce. For 2014 the program provided over \$38 million in state and federal funds to serve over 5,000 children and 2,900 families statewide.

Medicaid Eligibility

Medicaid

The Division of Welfare and Supportive Services determines Medicaid and Nevada Check Up eligibility for low-income Nevadans. Medicaid provides free health care coverage for low-income people including:

- Children ages 6-19 and adults between 19 and 64 whose household income is at or below 138% of the Federal Poverty Level
- Pregnant women and children age 0-5 whose household income is less than 165% of the FPL

Nevada Check Up

Nevada Check Up provides medical and dental benefits for children from birth to 19 years. To qualify household income must be at or below 205% of the Federal Poverty Level. A small premium, paid quarterly, may be required.

2014 Federal Poverty Level (FPL) Chart			
If your monthly income falls within one of these ranges you may be eligible for assistance			
	Nevada Medicaid Monthly	Pregnant Women	Nevada Check Up Monthly
Family Size	138% of FPL	165% of FPL	205% of FPL
1	\$1342	\$1605	\$1994
2	\$1809	\$2163	\$2687
3	\$2276	\$2721	\$3381
4	\$2743	\$3279	\$4074
5	\$3210	\$3838	\$4768
6	\$3677	\$4396	\$5462

October 2014 Medicaid Statistics: (w/retro)

The total approved Medicaid recipient count increased from 330,623 in October 2013 to 621,570 in October 2014. The population attributable to the state election to expand Medicaid and the ACA regulatory changes is 164,149 recipients.

The October caseload recipient count includes:

- Adult Med: 277,099 recipients
- Pregnant Women and Children: 246,691 recipients
- NV Check Up: 24,717 recipients

Medical Assistance for the Aged, Blind and Disabled (MAABD)

Medical Assistance for the Aged, Blind and Disabled (MAABD) is a medical services only program. Frequently, many applicants are already on Medicare; thus, Medicaid supplements their Medicare coverage. Additionally, others are eligible for Medicaid coverage as a result of being eligible for a means-tested public assistance program (i.e., Supplemental Security Income [SSI]).

The various categories of eligible persons who may qualify for Medicare, Medicaid or both are:

- Supplemental Security Income (SSI) recipients;
- Nursing facility residents with gross monthly income up to 300% of the SSI payment level (State Institutional Cases); Under an agreement with the Welfare Division, Nevada counties pay the non-federal share of costs for institutionalized persons whose monthly countable income is between 142% and 300% of the SSI payment level. These cases are known as County Match cases.
- Individuals can receive medical coverage for up to three months prior to their application if they apply for or would be eligible for any of the Medicaid categories;
- Identified individuals who have lost SSI eligibility, but would still be eligible if some of their income were disregarded (Public Law Cases);
- Disabled children who require medical facility care but can appropriately be cared for at home for less cost (Katie Beckett Cases);
- Aged or physically disabled individuals who require medical facility care but can appropriately be cared for at home and aged individuals who have been residing in nursing facilities who can appropriately be cared for in adult group care facilities (Home and Community-Based Waivers);

Employed people with disabilities may obtain healthcare coverage. Disabled employed individuals may be eligible for Medicaid coverage by paying a premium; and

- Non-qualified non-citizens who do not meet citizenship eligibility criteria who have emergency medical services may qualify for some (not all) Medicaid services.

Applications are required for all benefits; they are processed as follows:

- SSI cases: 10 working days following receipt of the eligibility determination made by the Social Security Administration.
- Aged cases: Within 45 days of application.
- Disabled and Blind cases: Within 90 days of application.

Medicare Savings Program

The Medicare Savings Programs are different from other coverage groups in that they do not receive the full scope of Medicaid benefits. The five groups described below comprise the Medicare Savings Program population. Application for benefits must be made and a decision rendered within forty-five (45) days. Success in the Medicare Savings Program is assessed by the fact there are program expenditures meaning: if the state can pay for a low-income individual's Medicare premium, it saves state dollars by ensuring Medicare coverage of medical services. For example, a medical service costing \$100 is incurred by a client with dual coverage. Approximately 80% of the charge, or \$80, is paid by Medicare. The remaining \$20 is paid on a 50/50 basis by the state and federal government.

The eligible groups are:

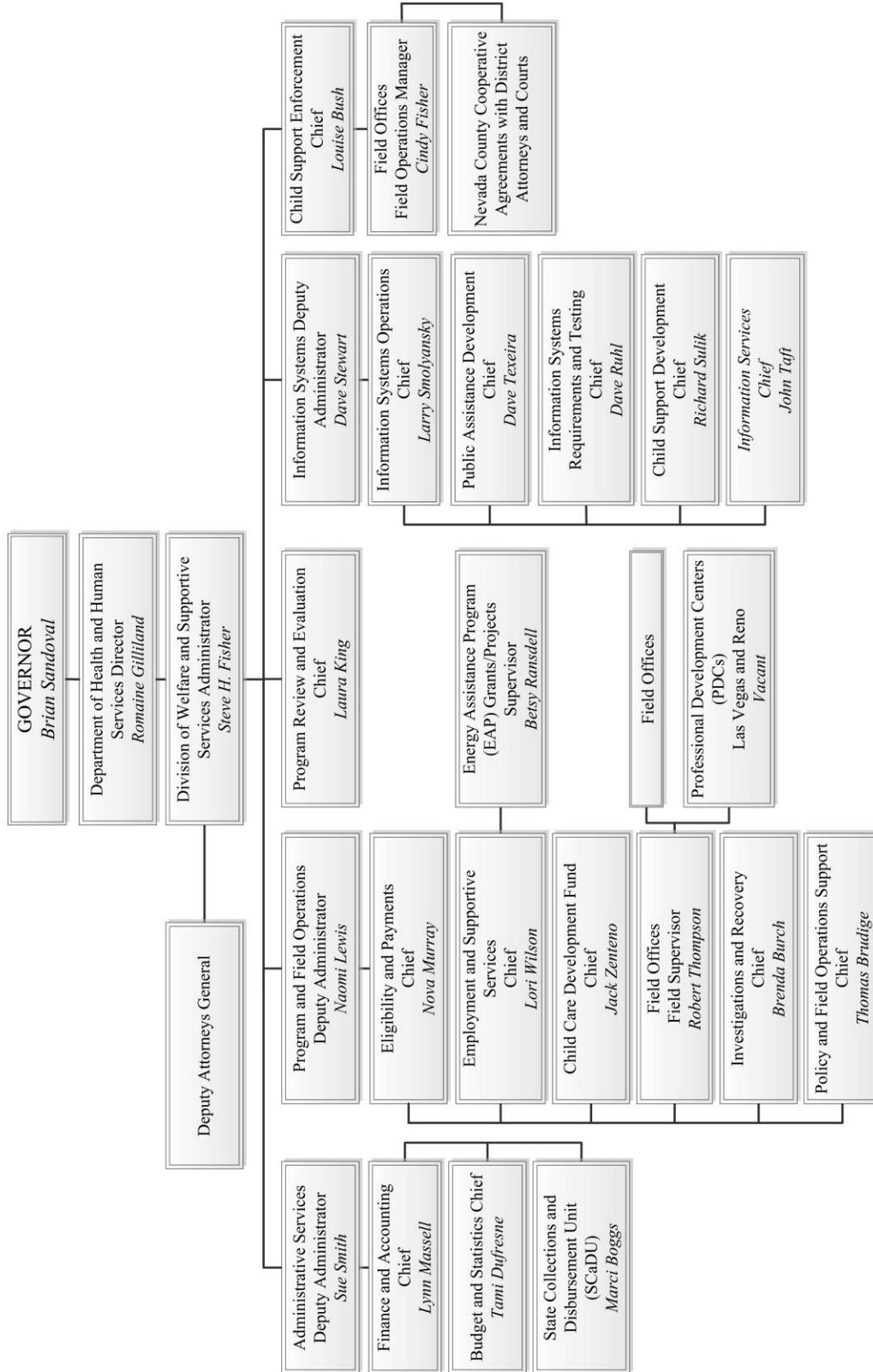
1. **Qualified Medicare Beneficiaries (QMBs)** are Medicare recipients who have income at or below 100% of the federal poverty level. Medicaid pays for their Medicare premiums, co-insurance and deductibles. Eligibility begins the month following the month the eligibility decision is made.
2. **Special Low Income Medicare Beneficiaries (SLMBs)** are Medicare recipients with income between 100% - 120% of federal poverty level. Medicaid pays their Medicare Part B medical insurance premiums. Eligibility begins with the application month with three months of prior medical coverage available.
3. **Qualifying Individuals 1 (QIs-1)** are Medicare recipients with income of at least 120% but less than 135% of federal poverty level. Medicaid pays their Medicare Part B medical insurance premiums. Funding is 100% federal up to the state allocation. Eligibility begins with the application months with three months of prior medical coverage available.
4. **Qualified Disabled Working Individuals (QDWIs)** have their Medicare Part A hospital insurance premiums paid by Medicaid. Eligibility begins with the application month with three months of prior medical coverage available.

Energy Assistance Program (EAP)

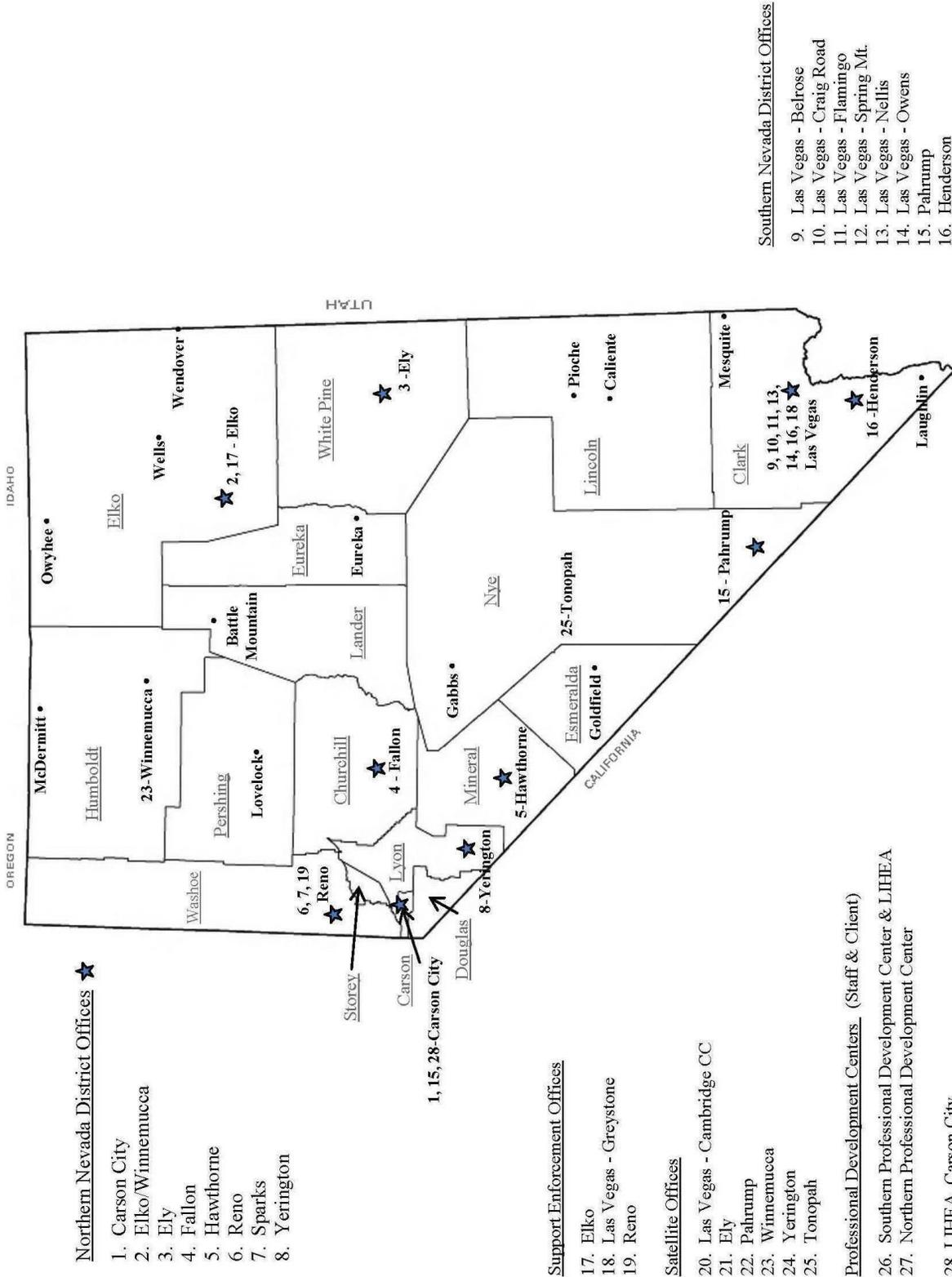
The Energy Assistance Program (EAP) assists low-income Nevadans with the high cost of home energy. Funding is provided from the Low Income Home Energy Assistance Program (LIHEAP) block grant through the U.S. Department of Health and Human Services, and from Universal Energy Charge (UEC) monies distributed through the Nevada Fund for Energy Assistance and Conservation.

In SFY 2014, EAP expended \$16.5 million in FAC benefits, serving 24,348 households with an average benefit payment of \$677. One million dollars was expended in the arrearage program, serving 2,972 households with an average benefit of \$338.

ORGANIZATION OF MAJOR PROGRAMS WITHIN THE DIVISION OF WELFARE AND SUPPORTIVE SERVICES



WELFARE DIVISION OFFICES



WELFARE DIVISION OFFICES

Carson City - Central Office
1470 College Parkway, Carson City, NV 89706-7924
PH (775) 684-0500 FAX (775) 684-0646
<i>(Investigation & Recovery)</i> PH (775) 448-5298 / FAX (775) 448-5250
Carson City District Office
2533 North Carson Street #200, Carson City, NV 89706
PH (775) 684-0800 FAX (775) 684-0844
Carson City - Energy Assistance Program
2527 N. Carson Street, Suite 260, Carson City, NV 89706
PH (702) 486-1404 FAX (775) 684-0740
Elko District Office
1020 Ruby Vista Drive #101, Elko, NV 89801-3398
PH (775) 753-1233 FAX (775) 777-1601
<i>(Child Support Enforcement)</i> PH (775) 753-1187 / FAX (775) 753-1228
Ely District Office
725 Avenue K, Ely, NV 89301-2796
PH (775) 289-1650 FAX (775) 289-1645
Fallon District Office
111 Industrial Way, Fallon, NV 89406-3116
PH (775) 482-0122 FAX (775) 423-1450
Hawthorne District Office
1000 "C" Street, P.O. Box 1508, Hawthorne, NV 89415-1508
PH (775) 824-7433 FAX (775) 824-7450
Henderson District Office
520 South Boulder Highway, Henderson, NV 89015
PH (702) 486-1001 FAX (702) 486-1270
Las Vegas – Belrose District Office
700 Belrose Street, Las Vegas, NV 89107-2235
PH (702) 486-1675 FAX (702) 486-1634
Las Vegas – Community Assistance Center
1504 N Main Street, Las Vegas, NV 89101
PH (702) 486-5000 FAX (702) 486-3676
Las Vegas - Cambridge Community Center
3900 Cambridge Street, Ste. 209, Las Vegas, NV 89119
PH (702) 486-1500 FAX (702) 486-9525

Las Vegas – Chandler Administrative Offices
2505 Chandler Ave, Suite 1, Las Vegas, NV 89120
Hearings PH (702) 631-2323 FAX (702) 631-2391
Quality Control PH (702) 631-2323 FAX (702) 631-3010
CHRT PH (702) 486-1646 FAX (702) 631-2392
Las Vegas – Craig Road District Office
3223 Craig Road Suite 140, North Las Vegas, NV 89032
PH (702) 631-3386 FAX (702) 631-3387
Las Vegas – Greystone Office – Child Support Enforcement
1900 E. Flamingo Road, Suite 100, Las Vegas, NV 89119
PH (702) 486-1095 FAX (702)366-2333
Las Vegas – Lewis Complex
628 Belrose Street, Las Vegas, NV 89107
PH (702) 486-1646 FAX (702) 486-8499
Las Vegas – Nellis District Office
6111 N. Nellis Blvd., Las Vegas, NV 89110
PH (702) 486-4828 FAX (702) 486-4827
Las Vegas – Flamingo District Office
3330 East Flamingo Road, Las Vegas, NV 89121-4397
PH (702) 486-9400 FAX (702) 486-9401
(Investigation & Recovery) PH (702) 486-1875 / FAX (702) 4861895
Las Vegas - Owens District Office
1040 West Owens Avenue, Las Vegas, NV 89106-2520
PH (702) 486-1899 FAX (702) 486-1802
Las Vegas - Southern Professional Development Center
701 North Rancho Drive, Las Vegas, NV 89106-3704
PH (702) 486-1646 FAX (702) 486-1438
Las Vegas, Energy Assistance Program
3330 E. Flamingo Road, Suite 55, Las Vegas, NV 89121-4397
PH (702) 486-1404 FAX (702) 486-1441
Las Vegas – Spring Mountain District Office
3101 Spring Mtn. Rd., Suite 3, Las Vegas, NV 89102
PH (702) 631-3077 FAX (702) 631-3078
Pahrump District Office
1840 Pahrump Valley Blvd., Pahrump, NV 89048-6131
PH (775) 751-7400 FAX (775) 751-7404

Reno District Office
4055 S. Virginia Street, Reno, NV 89502
PH (775) 448-5108 FAX (775) 448-5094
Reno - Child Support Enforcement
300 East Second Street, Ste. 1310, Reno, NV 89501-1586
PH (775) 448-5150 FAX (775) 448-5199
Sparks District Office
630 Greenbrae Dr., Sparks, NV 89431
PH (775) 824-7400 FAX (775) 824-7450
Yerington District Office
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PH (775) 463-3028 FAX (775) 463-7735

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DEVELOPMENT OF WELFARE IN THE UNITED STATES



DEVELOPMENT OF WELFARE IN THE UNITED STATES

COLONIAL AMERICA

In colonial America each town was responsible for maintaining its needy citizens and relief was provided by private charities through in-kind benefits such as food and clothing, and through a poor tax. Emphasis was placed on local and family responsibility for the poor and this continued as the dominant theme into the 20th century.

18TH AND 19TH CENTURIES

During the 18th and 19th centuries, relief for the poor was increasingly provided by private charity groups. Organizations such as the New York Society for the Prevention of Pauperism, the Charity Organization Societies and Hull House, together with individuals like Dorthea Dix, Jane Addams and Joseph Tuckerman helped aid the poor, the aged and the mentally disabled. Private charity organizations and city and county governments provided the bulk of the relief to the poor until the end of the century. The chronically poor have been part of every generation. In 1815, New York City was giving public aid to fifteen percent of its population.

20TH CENTURY

The beginning of the 20th century, however, marked an end to exclusive local control over social welfare programs. The trend throughout the present century has been to consider social problems on a national scale and develop national programs using the experience of state and local governments and private charity organizations. Mickey Kaus, author of "The End of Equality" and a senior editor for the New Republic, points out there have been roughly seven phases of government welfare reform in this century. Kaus divides the century into the following time periods:

1911-1935 - One of the first significant events marking this era occurred in 1909 when President Theodore Roosevelt called the first "White House Conference on the Care of Dependent Children." What to do about the destitute single mother? One obvious solution was for the government to recognize that being a mother is an important job--- and to simply pay single mothers for doing that job. The conference adopted a platform which opposed the removal of children from their home for reasons of poverty. It also called for each state to enact a mother's pension law for widows and deserted women and their children. This recommendation is important because it helped lay the foundation for the Aid to Families with Dependent Children program. Initially designed to assist widows and deserted women in supporting themselves and their children, this program had become one of the largest welfare programs in the United States by the 1980s and 1990s. By 1926, eight states had set up a "mother's aid" program. An interesting fact about "mother's aid" programs is the assistance was typically restricted aid to "suitable homes" which concurred with the Victorian attitudes of society at the time.

1935 - The next significant event marking a change in the principles and administration of the American welfare system occurred with the crash of the New York Stock Exchange in October 1929. The Great Depression resulted in significantly large numbers of unemployed Americans. In the spring of 1929, 2.8 million people were unemployed. Two years later, 8 million people were unemployed, and by 1932 over 750,000 farmers were bankrupt. President Herbert Hoover felt the depression was a temporary problem which private charities, supported by voluntary donations, would

resolve. By 1932, 15 million Americans were unemployed. Because of high unemployment, attitudes concerning poverty and unemployment changed dramatically. People standing in unemployment lines were no longer viewed as idle and unproductive, and poverty during the Great Depression was something many people could not avoid. Franklin D. Roosevelt (FDR) spent \$2 billion trying to help the poor during his first two years in office. The Federal Emergency Relief Administration handed out money to the states, most of which chose to spend it on "direct relief" --- a cash dole. In FDR's second term, he shifted toward public works and away from direct cash relief. FDR replaced federal cash payments for the able-bodied with a massive program of public work jobs, the Work Progress Administration. Believing the federal government should play a significant role in giving America a "New Deal," some of the programs aimed at eliminating poverty were: the Civil Works Administration, the Works Project Administration and several youth work programs, most notably the Civilian Conservation Corps.

On August 14, 1935, Roosevelt signed into law the most important and far-reaching piece of social welfare legislation in U.S. history--the Social Security Act. The Act established three types of programs: 1) a program of social insurance consisting of a federal old-age insurance system and a federal-state unemployment compensation system, 2) a program of public categorical assistance supported by federal grants-in-aid for certain groups including old-age assistance, aid to the needy blind, aid to the permanently and totally disabled, and aid to dependent children, and 3) a program of health and welfare services providing for maternal and child health services, services for crippled children, child welfare services, vocational rehabilitation and public health services. The Social Security Act set the character for American welfare policy for six decades.

1935-1960 - From its inconspicuous beginning, Aid to Dependent Children (ADC) developed into a program that was almost solely directed at supporting the children of desertion, illegitimacy and divorce, rather than for widows as was its original intent. The "suitable homes" mentality was dropped in 1939 when the federal government supported aiding families where the children were born without benefit of marriage. By 1940, 30% of the ADC caseload consisted of families with "absent fathers." In the New Deal theory, as more and more widows qualified for Social Security, ADC (renamed Aid to Families with Dependent Children [AFDC]) was supposed to wither away. In practice, Social Security siphoned off the "deserving" elements of the single mother population (the widows), and left those who had divorced or been deserted on AFDC. By 1960, 64% of AFDC families were "absent father" cases.

1960-1968 - Faced with rising caseloads, states tried to reassert "suitable home"-type restrictions, especially when the number of people on welfare were there because of an absent parent. Some states implemented strict investigative measures to catch welfare mothers in the act of receiving "male callers." But the heavy handed enforcement of many of these restrictions made removing them a cause of the civil-rights movement. A few court decisions later, it was clear any poor single mother with a child was entitled to aid, whether or not she had married the child's father. In the early 1960s, public officials began viewing the possibility of welfare becoming a generational phenomena and the nation became concerned about AFDC. To stem the tide of rising caseloads, the 1962 Public Welfare Amendments were passed to reduce the welfare rolls through a massive infusion of social work. Hailed as a momentous piece of legislation, the states crumbled for federal dollars to institute "preventive" or "consultative services" for the poor.

During this segment of the century, President Lyndon B. Johnson launched the "War on Poverty." Johnson wanted America to become a "Great Society" and the elimination of poverty was essential in creating that society. Under the Great Society, several programs in the areas of housing, education, health and employment were enacted including: The Economic Opportunity Act of 1964, the Job Corps, Head Start, Volunteers in Service to America (VISTA), Food Stamps, Medicare, Medicaid and college work-study programs. The War on Poverty also underscored the court decisions previously mentioned; there was an important shift in the public perception of welfare. What had been seen as public aid began to be viewed as public entitlement. And while the programs still invoked self-reliance as an ideal, they introduced rules that undermined it in practice. Millions more Americans became eligible for welfare and spending soared from \$21 billion (in constant 1985 dollars) in 1960 to \$62.2 billion a decade later; \$121.8 billion in 1976, and \$132.2 billion in 1985. A revolution also occurred in the nature of public assistance; cash benefits began to be replaced by food, medical care, housing and other forms of non-cash benefits. In 1960, three quarters of all welfare came in the form of cash; by 1985 only 24 percent did. This shift is important because non-cash benefits diminish personal choice and self-responsibility among welfare recipients. A welfare recipient can spend cash to meet his needs as he sees them, but with non-cash benefits he becomes more dependent on the rules and decisions of others.

1968-1978 - Because AFDC was available only to single mothers, it seemed to offer a perverse incentive for poor fathers to desert their families. Political leaders debated giving assistance to families that stayed together. This was the idea of guaranteed income proposed by President Nixon in 1969. George McGovern promised \$1,000 a person in 1972. All these schemes failed, in part, because the numbers never added up, but mainly because the public at large never bought the idea of giving people money whether they worked or not. The main effect of this thinking seems to have helped remove the stigma associated with welfare. In the early 1960s only about a third of those eligible actually signed up for AFDC. By 1971, the percentage had risen to 90%. This was the welfare explosion--between 1960 and 1974 AFDC rolls more than tripled to almost 11 million from 3.1 million.

This period also brought into being the Child Support Enforcement Program. In 1950 when a small number of children were in female-headed families, the federal government took its first steps at initiating child support collection. Congress added to the Aid to Families with Dependent Children law a provision requiring state welfare agencies to notify law enforcement officials when benefits were furnished to a child abandoned by one of his parents. For the subsequent 25 years, the federal government confined its efforts to welfare children; it generally thought establishing child support and collecting it was a domestic relations issue to be dealt with at the state level by the courts. By the early 1970s, Congress recognized that the composition of the AFDC caseload had changed. In earlier years, the majority of children needed financial assistance because their fathers had died; by the 1970s, the majority needed aid because their parents were separated, divorced or never married. The Child Support Enforcement program, enacted in 1975, was a response by Congress to 1) reduce public expenditures on welfare by obtaining child support from non-custodial parents and by helping non-welfare families get support so they could stay off public assistance; and 2) establish paternity for children born outside of marriage so child support could be obtained for them. From 1975 to 1984 most states focused their child support activities on AFDC families primarily because of an incentive formula beneficial to the states. In 1984 Congress amended the program because of a groundswell of public support in

favor of tougher Child Support Enforcement Program efforts. Women's groups believed the program could assist the growing number of single-parent families disassociated with the public welfare system. In the late 1980s, Child Support Enforcement (CSE) was promoted as a major component in the triage of welfare reform - that being moving CSE and employment and training activities into the forefront with less emphasis on cash entitlements. The point is to secure child support in adequate amounts for families enabling them to exit the welfare system or avoid entering it.

1980-1992 - During the eight years of the Reagan administration, the welfare debate settled into a familiar configuration: Conservatives supported tough work requirements; Liberals defended the AFDC program and were less zealous in the "toughness" of the work requirements imposed. Congress did not authorize an authentic workfare regime, but did pass enabling legislation allowing states to experiment with milder approaches that reduced welfare checks if recipients did not attend training or work experience. This approach was extended nationwide in the 1988 Family Support Act.

In his 1986 State of the Union Address, President Reagan drew attention to the problems of poverty and welfare in America and asked the White House Domestic Council for an evaluation of the then current welfare system and a new strategy. In response to the President's charge, one year of extensive study produced a document entitled "Up From Dependency" which outlined the ills of the public welfare system. About the same time, the American Public Welfare Association published "One Child in Four." This document cited the fact one child in four is born into poverty and one child in five spends his or her youth in poverty. Like "Up From Dependency," it laid the blueprints for improving the welfare system.

In the spring of 1986, the nation's governors formed a ten-state task force to develop a welfare reform policy that would enable the governors to shape the course of the welfare reform debate in Congress. In February 1987, the governors endorsed a policy that would turn the welfare payments system with a minor work component into one that is first and foremost a jobs system backed up by an income assistance component. The governors' policy also stressed the importance of strengthening the nation's Child Support Enforcement system and creating a new national education, training and employment program to provide critical services to welfare clients enabling them to become self-sufficient, economically independent citizens. All interested groups and organizations worked with Congress in 1986 and 1987 to produce a consensus on welfare reform legislation. What emerged was the Family Support Act of 1988 signed by President Reagan on October 13, 1988. The Family Support Act implemented the Job Opportunities and Basic Skills Training (JOBS) program for AFDC recipients, which superseded the Work Incentive Program (WIN), and established transitional benefits such as child care and medical benefits for families exiting the welfare system.

1992 - Building on the concepts of the Family Support Act of 1988, President Clinton campaigned in 1992 on the idea to "end welfare as we know it." Noted sociologists, researchers and others offered many thoughts on the welfare human condition...what caused it, how to stem the tide, the fact AFDC didn't create the underclass--its policies sustained it. David Ellwood, a Harvard researcher, came up with a radical idea: Instead of first sending checks, and then trying to make recipients work them off, why not end the checks after a certain fixed period of time? In 1988, he proposed a time limit of 18-36 months, after which ex-recipients would be offered a low-paying WPA-like job. President Clinton picked up Mr. Ellwood's idea and proposed the Work and Responsibility Act.

Though President Clinton was very interested in welfare reform, reforming the nation's health care system overshadowed this activity in the first half of his administration in 1993 and 1994. By November 1994, the Republican Party had successfully campaigned on the ten-point "Contract With America." When the Republicans seized control of the Congress in January 1995, they wanted to overhaul the welfare system in the first 100 days.

A quick review of congressional activity between January 1995 and the actual signing of a new welfare reform law in August 1996 reveals a number of bills introduced for consideration, countless committee hearings, two presidential vetoes and considerable rhetoric. In January 1995, HR 4, the Personal Responsibility Act, was introduced; by March 1995, there was HR 1135 (Food Stamp Reform Bill), HR 999 (Welfare Reform Consolidation Bill) and HR 1214 (the Personal Responsibility Act of 1995). In June 1995, the Senate was deliberating the Family Self-Sufficiency Act, followed by S 1120, the Work Opportunity Act, in August. By September 1995, HR 4 was the "bill of choice" in both houses; it ultimately passed and was vetoed by President Clinton on January 9, 1996. In vetoing HR 4, President Clinton made it clear that in addition to his objections to certain provisions of the bill, "welfare reform must be considered in the context of congressional efforts to reform Medicaid and the Earned Income Tax Credit as well."

On February 1, 1996, the National Governors' Association met and endorsed their welfare reform package---one that considered both Medicaid and welfare reform together. By March 1996, Congress was considering the "combined" bill. By May 1996, a Republican welfare reform-Medicaid bill was being considered; it was HR 3507, the Personal Responsibility and Work Opportunity Act of 1996. HR 3507 had a companion bill in the Senate, S 1795. Within a month, then presidential hopeful, Senator Bob Dole, introduced S 1823, a "stand alone" welfare reform bill identical to the welfare reform section of S 1795. After continued Congressional activity, the House of Representatives and the Senate agreed to split welfare reform and Medicaid because President Clinton vowed to veto the bills, HR 3507 or S 1709--whichever one may have passed, due to his objections to the Medicaid provisions.

In July 1996, the leadership of both houses stated their intent to pass welfare reform legislation and send it to President Clinton during the August recess. The conference agreement for HR 3437, a budget reconciliation package containing a modified version of HR 3507, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, was passed by the House on July 31st and by the Senate on August 1st. Prior to the House vote, President Clinton announced his intention to sign the bills, thus "ending welfare as we know it," his 1992 campaign pledge. On August 22, 1996, the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) was signed into law.

PRWORA set detailed national goals. It limited the time (to five years) that a family head can receive cash assistance under the renamed program called Temporary Assistance for Needy Families (TANF). TANF set up work require-ments that increased over time so that when fully implemented, half of all single parents and 90 percent of at least one parent in all two-parent assisted families must be working. Work activities were tightly defined in the law as were the way caseload calculations are to be made for fulfilling these and other goals and requirements. The law required unwed teen parents to live at home or in another adult-supervised setting and to be in school to receive benefits. PRWORA contained numerous child support requirements as well, among them the suspension of driver's and occupational licenses of persons overdue in their child

support payments. PRWORA and TANF replaced the old Aid to Families with Dependent Children "entitlement" system with one focused on work and responsibility. Likewise, it also provided states with the flexibility to create the best approaches for their individual circumstances. Children's needs did not go unnoticed: funds were provided to pay for child care, and children's access to Medicaid was protected.

Overall, between August 1996 and June 2003, there has been a 59.5 percent decrease in the number of recipients on the national rolls. From its peak of 14.4 million in March 1994, the number of recipients dropped by 65.6 percent to 5 million in June 2003. These are the largest caseload declines in the history of U.S. public assistance programs. The 5 million persons receiving TANF in FFY 2003 was the smallest number since 1966. An August 1999 report by the Council of Economic Advisers found implementation of welfare reform is the single most important factor contributing to the widespread and continuous caseload declines from 1996 to 1998. The strong economy has also played an important role, accounting for approximately 10 percent of the decline during this same time period. National data show that one in three families who received welfare in 1996---1.7 million people---were working in March 1997. In 1992, when President Clinton pledged to "end welfare as we know it," only one in five families who received welfare the previous year moved to work so quickly. Since welfare reform there has been a dramatic increase in employment among welfare recipients. The percentage of TANF adults reached an all time high in FY99 and FFY00 at 33 percent, compared to less than 7 percent in 1992 and 11 percent in 1996. Unfortunately, the dramatic downturn in the overall economic climate has had its effect on the TANF rolls. While the state's TANF caseload remains relatively stable, there is no indication of the dramatic reductions seen in prior years.

Welfare reform has shown promising results among those most vulnerable to welfare dependency in a continuing rise of employed single mothers. In 1998, according to the Census Bureau, almost three-fifths (57%) of single mothers with incomes under 200 percent of poverty were employed as compared to 44% in 1992. In FFY 2000, this number increased to 60.8%.

Most states changed their policies to support working families. For example, forty-two states changed the way they count income under TANF, most of them to enable working recipients to keep more of their check. Thirty-eight states amended their policies about how much recipients can have in a savings account to help families save and move to self-sufficiency. Forty-seven states allow more flexibility in recipients having a car and still being eligible for assistance.

The next steps in welfare reform are to invest in all families, including those who have the hardest time finding employment, and to ensure families have the support systems they need---such as affordable, quality child care---to hold onto a job, reach self-sufficiency, and avoid the need to return to welfare. The job of welfare reform is not yet done and everyone---states, employers, local communities, families, the faith and nonprofit communities---must continue their commitment. Early information also suggests as caseloads drop, the proportion of long-stay families on state welfare caseloads is increasing. State welfare evaluations show that while some state welfare policies have strong effects on the employment of families with more barriers to employment, others mostly have effects on those who are the easiest to employ. There must be a continued investment in families to build on the early progress and to ensure welfare reform that works over the long haul. Investments must be made in all families,

not just those who have the easiest time moving into the workforce. And, the nation must invest in the critical support systems families need to hold onto that first job and succeed at work; supports such as child care, transportation, child support and ongoing training and mentoring.

Originally authorized only through 2001, the TANF program has been ongoing through the use of continuing resolutions until February 2006. At that time, the President signed the Deficit Reduction Act (DRA) of 2005, which among other things reauthorized the TANF program through 2010. The level of funding originally authorized in 1996 was not changed and the population modifier for states with extreme population growth was scheduled to end in FY2008, although it was later extended to end in FY09.

The DRA also took away much of the flexibility provided to states in the original PRWORA legislation enacted in 1996. It severely limited work activities countable toward work participation; placed strict verification requirements in place; prohibited states from excluding from their WPR denominator families in separate state program paid with maintenance of effort funds. As a result states across the nation are facing federal penalties for not meeting the WPR standards.

On June 18, 2008, Congress enacted the Food, Conservation and Energy Act of 2008 (FCEA); effective October 1, 2008 the Food Stamp Program became the Supplemental Nutrition Assistance Program (SNAP). Other changes to the program were made by this act and are enumerated in the SNAP section.

Economic downturns between 2007 and 2008 have caused an increase in the unemployment rate, which in turn has increased the TANF, SNAP and Medicaid populations, nationwide. In February 2009, in response to the continued economic downturn, Congress enacted the American Recovery and Reinvestment Act of 2009 (ARRA). The President signed this historic legislation on February 17, 2009 which contained several provisions enhancing the TANF, SNAP and Medicaid programs.

This included a 13.6% increase in the SNAP benefit allotment, additional 100% federal administrative funds for states to administer the program and temporarily lifted the restrictions of three months of benefits in a 36 month period for able bodied adults without children. The ARRA created the TANF Emergency Contingency Fund which provided federal funds up to 50% of a state's TANF block grant to provide basic assistance, subsidized employment or non-recurring short-term benefits. The Act also provided temporary increases to states in the amount of its Federal Medical Assistance Payment (FMAP) to help accommodate the increased Medicaid caseloads.

In 2010 Congress enacted the Patient Protections and Affordable Care Act, implemented in January of 2014 through which millions of uninsured Americans gained access to affordable coverage through Affordable Insurance Exchanges and improvements in Medicaid and the Children's Health Insurance Program (CHIP). The programs use consistent standards and systems to promote sharing of information and efficiently meeting the consumers' healthcare needs, improved quality, and lower costs.

Following the issuance of the final rule, states were given the option to expand access to Medicaid and CHIP with significant Federal support to include coverage for all individuals between ages 19 and 64 with incomes up to 138% of the federal poverty level. The law also simplified Medicaid and Chip by codifying the streamlining of income

based rules and systems for processing applications and renewals thereby modernizing the eligibility, enrollment, and renewal process.

The Supplemental Nutrition Assistance Program (SNAP) was reauthorized February 7, 2014 as part of The Agricultural Act of 2014 (the Act), P.L.113-79. The law contains various provisions that affect SNAP eligibility, benefits, and program administration, providing, among others provisions, additional flexibility for State agencies.

DEVELOPMENT OF WELFARE IN NEVADA



DEVELOPMENT OF WELFARE IN NEVADA

Nevada was rushed into statehood by the pressure of national politics in Abraham Lincoln's administration. On October 31, 1864, a sparsely settled, but vast area of the west with only one truly urban area, Virginia City, became a state. Since agriculture was relatively unimportant, the population tended to cluster in certain towns which were currently booming mining camps. Life in early Nevada was harsh even when the Comstock and other areas were enjoying boom times. Mining was hard, dangerous work.

In the haste to establish Nevada as a state after only three years as a territory, there was no time to build a governmental structure to provide social services. Nevada borrowed heavily from California, its larger neighbor to the west, and California had borrowed from Iowa and New York. This borrowing from older, more settled regions of the country did not always fit Nevada's needs. One particular difficulty was people came to Nevada to work in the mines for only a short period of time. Residency is a matter of intent, and most intended to make money, then return to California or the East to retire. As a result, most saw no reason to erect complex governmental structures for social services.

Against this background, assistance was provided only to the "worthy poor" which included widows, orphans, and sick and disabled miners. From the beginning of the Nevada Territory it was thought private organizations should provide for these kinds of needs. In the very beginning of Nevada, an organization was carried from the California gold fields called E. Clampus Vitus. This shadowy organization, about which hard facts are scarce, provided relief for miners, widows and orphans. In the 1850s, the charitable activities of E. Clampus Vitus were replaced by more staid and usual fraternal organizations like the Masons, Odd Fellows, the Knights of Pythius and the Improved Order of Redmen. These groups had a charitable as well as a social side; and, many restricted who they would and wouldn't help. A classic example might be the regulations of the Improved Order of Redmen. Their 19th century bylaws provided benefits of \$3 to \$7 a week to sick members, depending on their rank in the order, with the stipulation "such sickness or disability does not proceed from an immoral conduct on his part: and provided further, that the same did not exist prior to his admission to this Tribe..." Benefits were also limited to a maximum period of six months. After 1900 these earlier organizations were joined in numbers by others such as the Shriners, Elks, Rotarians and the Kiwanians.

The Nevada churches also played an important role in charitable works. The more highly organized churches, the Church of Jesus Christ of the Latter Day Saints and the Catholic Church provided the widest spectrum of aid for the sick, needy and aged. The Catholic Church started St. Mary's Orphanage and School for Girls in Virginia City in the 1860s. In 1876, St. Mary's Hospital was also opened in Virginia City to care for all indigents.

Miners not affiliated with a church, and not belonging to a social organization, turned to their unions for assistance when needed. The Virginia City suburb of Gold Hill had a union local organized as early as December 1866. In 1878, its bylaws show it paid a sick benefit to its members as follows: "Any person who has been a member of this Union for two months, and is in good standing, who by sickness or accident may be rendered incapable of following his usual vocation, shall receive from the funds of this Union the sum of eight dollars per week for a period not to exceed ten weeks in any year..."

In times of natural disaster, such as large mining accidents resulting in numerous deaths and the October 1875 "great fire," the citizens of Virginia City and Carson City were known to be very generous in terms of rushing food, clothing, blankets and such to the victims; however,

such occasions as these were out of the ordinary. Private charity was seldom available to the drifters, the homeless, and those whose life-styles were offensive to Victorian standards of morality. As a result, there were some needy people for whom there was no private charity.

As early as the first territorial legislature of 1861, a support-of-the-indigent measure passed providing the county commissioners were "vested with entire and exclusive superintendence of the poor in their respective counties." Interestingly enough, this law did not mean the poor were necessarily provided for from public money. The law provided that poor persons unable to work because of "bodily infirmity, idiocy, lunacy or other cause" were to be supported by relatives. Only if a poor person's relatives did not live in Nevada was the county obligated to support the indigent. If a relative living in Nevada failed to support a poor person, the relative might be compelled by court action to contribute \$30 per month to the county poor fund.

When Nevada became a state in 1864, the constitution vested responsibility for the care of the poor with the counties; in 1867, the state legislature required all indigents, otherwise eligible for relief, to be Nevada citizens for six months before filing an application.

In 1867, the legislature also provided statutory basis for a state orphans home, though this was no more than a paper exercise. In practice, all orphans were sent at state expense to the institution in Virginia City run by the Catholic Sisters of Charity. In the early 1870s, a wooden structure costing \$20,000 was constructed for the purpose of serving as an orphan home on sixteen acres of land located southwest of the built up area of Carson City. On February 16, 1871, with the building complete, the first child, John Hines, enrolled. This wooden building served as the main structure of the orphanage until it was destroyed by fire in 1899. A stone building replaced it in 1902. By 1906, 694 children had found shelter at the institution. Something of their care is revealed by a statement in the 1905-1906 Biennial Report which said of the children: "They have all been taught proper manners, and educated sufficiently to place them on equal terms with all."

Three years after statehood, Nevada officially began the practice of sending certain social service clients out of state for treatment. The secretary of state was authorized by the legislature to make arrangements with the California Insane Asylum at Stockton to have "indigent insane persons" sent there for custody. Two years later, the legislature empowered the Nevada Superintendent of Public Instruction to conclude arrangements with the director of the California Institution for the Deaf, Dumb and Blind to care for these individuals in this out-of-state facility. After ten years of sending the state's mentally disturbed patients to California for treatment, the 1877 Legislature passed a law to treat afflicted Nevadans within the state. Nothing was accomplished until 1879 when acreage on the Truckee River east of Reno, which had been purchased as a site for a state prison, had been re-designated for this purpose. The first patients were admitted in 1882.

By 1905, the number of the deaf, dumb and blind became too great for any one California institution to serve. As a result, the Nevada Superintendent of Public Instruction obtained permission to send them to any California institution which would receive them. Two years later the legislature agreed to send them to any Utah or California institution which would take them.

In 1910, a nonsectarian private organization began operation in Nevada, the last state in the union to have a home of this type. It was the Florence Crittenden Mission, established in Reno as a place of refuge for unwed or abandoned mothers and their children. In addition to the mothers and children who lived there, for many years it also operated as a day care center for the small children of working mothers. The state paid a small amount of public money to this institution, but most of its funds came from private sources.

By the early 1900s, the United States entered its "progressive era." Many new laws were passed both at the state and federal level bringing new responsibilities and functions to government. In 1913, the Nevada Industrial Commission was created to compensate workmen injured on the job and pay a death benefit to the workers' families when they had been accidentally killed on the job. In that same year, the legislature passed a law allowing children with parents or guardians who could not properly care for them to be admitted to the Nevada State Orphans Home. In 1915, Nevada adopted the forerunner to the Aid to Families with Dependent Children (AFDC) program, the Mothers' Pension. This program served women and their children under age fifteen, whose husbands and fathers were deceased, had deserted them or were incarcerated. Under county administration (the counties had to raise the money and administer it), the program provided for a basic pension of \$25 for a mother or child, with the possibility of an additional \$15 for each additional child up to a maximum of \$55 a family. Six years later, the family maximum was raised to \$75 dollars; and, the dependent age was raised to sixteen. Although a small program, the Mothers' Pension was widely used compared to other states. The program's payments were liberal and Nevada was one of only six states that did not restrict eligibility to widows or wives of the disabled; aid was available to any mother with dependent children. In Nevada, aid was provided to 10 out of every 1000 children under 16, at a rate of 25% higher than the national median of 8 of every 1000. In 1926, Nevada's rate of compensation for a family with one child was exceeded by only two states; and, in payments for a second child, Nevada tied for first place with Minnesota and Illinois.

In June 1915, the Nevada School of Industry for "delinquent" boys opened in Elko. Legislative archives are somewhat ambiguous on what was to be done with delinquent girls and time passed with makeshift facilities, like four beds in the home of a woman staff member being set aside for females committed to the school. Due to the limited need for female beds, wayward girls were often sent to a Catholic girls' home in Montana. This practice continued until a facility was opened in Caliente in the mid-1960s.

For the first time in 1923, Nevada passed a law authorizing old age pensions. It was another two years before the program became operational. The pensions were not to exceed one dollar a day including income from any sources the pensioner possessed. The eligibility requirement was a stringent ten year residency period in the state. To qualify, a recipient could own no property worth more than \$3,000. Also, the county, which administered the program, was authorized to attach the estate of any deceased pensioner for the amount of old age assistance granted. No record could be labeled confidential and any taxpayer could appeal the granting or non-granting of an old age pension to himself or any other person.

In 1925, a third major welfare program was initiated – aid to the blind. The county commissioners were empowered by the state legislature to levy special taxes for the "needy blind." The residence requirement was one year. After four years experience with the program, the tax rate had to be more than doubled over the original amount to provide sufficient revenue for this type of assistance.

By the time of the Great Depression from 1929-1933, the Nevada social services were essentially county run with minimum state involvement. The federal government played no direct role in bringing these services to needy Nevadans.

In 1933 when Franklin D. Roosevelt's New Deal was set in motion, it had an influence on the provision of social services in Nevada, as it did in most other states. Since the federal government wished to deal with states rather than counties, the Nevada state government was forced to take a more active role in social services. Therefore, the Nevada Emergency Relief

Administration was created in April 1934 to coordinate the various federal relief agencies operating in the state. New Deal relief work programs in Nevada experienced some delay when the Nevada Industrial Commission refused to provide industrial insurance to cover relief workers injured or killed on the job. In 1935, the Emergency Relief Administration was succeeded by the State Board of Relief, Work Planning, and Pension Control which consisted of seven members with overlapping terms serving without compensation.

In 1937, the state constitutional provision giving the counties exclusive control over poor relief was repealed so the state would be eligible for federal funding for the public welfare programs enacted by the 1935 Social Security Act. Also, a state welfare department was created in 1937 to operate under the Board of Relief, Work Planning, and Pension Control. Originally this department was only concerned with child welfare services and old age assistance. Four years later, services to the blind were added to its mission. In 1943, the Nevada State Orphans Home was placed under the jurisdiction of the welfare department. By 1944, despite wartime prosperity, over 500 needy children constituted a caseload for the state welfare department. Under the existing regulations, the state welfare department continued to operate under the Mothers' Pension. Other categories of persons on public assistance were still cared for by the counties with grocery, fuel and rent assistance. In a few counties, small cash payments were made whereby the recipient provided for his own needs. There was no objective standard of need and payments were not uniform among the various counties. The non-salaried secretary of the state Board of Relief, Work Planning, and Pensions Control served as the executive officer of the state welfare department. In practice, this meant the professional heads of the Division of Old Age Assistance and the Division of Child Welfare Services reported directly to the full board.

As the years went by, the Board of Relief, Work Planning, and Pension Control realized it had too many functions and was not equipped to provide supervision for all its activities and asked for reorganization. In the resultant changes, the board was abolished and replaced with a revised state department of welfare. Exerting control over the department was a welfare advisory board of citizens which consisted of three members appointed by the governor and four representatives elected by the seventeen boards of county commissioners. The state board then selected the professional welfare director. Although the board began to operate as early as July 1949, it was not until six months later that the new department of welfare began to function. The original agency headquarters was in Reno; ten years later the main office moved to Carson City. As the department began operations, it had district offices in Elko, Ely, Fallon, Winnemucca, Tonopah and Las Vegas. Pioche was one of the original offices in 1950, but it was downgraded to the role of a sub-district office in 1963. Over the years, additional offices were added in Yerington, Carson City, Hawthorne and Lovelock.

The first administrator of the state welfare department was Barbara C. Coughlin. Her tenure lasted from October 1949 until April 1963, and was both long and controversial. In time, Ms. Coughlin became caught in crossfire between dissatisfied staff members, disgruntled relief clients, and conservative members of the legislature. The statutes creating her office provided the chief administrator must have formal training in either public or business administration and Ms. Coughlin had neither. As a result, when the entire Nevada social services administrative apparatus was again reorganized in 1963, she lost her post. In 1963, the state welfare department became a division within a large umbrella agency created to handle a wide variety of social services. Nonetheless, between 1950 and 1963, when under Ms. Coughlin's control, great strides were made in the services provided to Nevada's indigent by the state welfare department. The number of employees increased from about fifty to well over one hundred; its budget quintupled from \$1.1 million to \$5.5 million dollars.

In September 1950, the state welfare department studied the county operations which had continued under the Mothers' Pension Law of 1915, and other poor relief statutes in force. It discovered that by the month of September all counties had expended \$9,719 for relief, supplemented by a payment of \$960 from the state. These funds had assisted a total of 340 persons. The counties granted an average of \$14 per month per dependent child and a mean of approximately \$40 per family. The average payment made to a blind person was \$56.49. Those persons on general assistance averaged \$14.07 each. Once the study was completed, the state welfare department concluded Nevada should participate in the federal programs available since over 82% of the recipients met federal eligibility criteria and state expenditures could be reduced. Another study in the same year revealed Nevada paid an average of thirty-nine cents per citizen for the support of fatherless families, whereas neighboring states such as Colorado paid \$8.19, California \$6.99, Arizona \$5.04, Idaho \$4.96, Utah \$5.55, and New Mexico \$5.45.

In part due to these studies, Nevada joined in the federal program to aid the blind in 1953 to replace the "state-county" plan with a "federal-state" plan. In May 1953, the 41 persons receiving aid to the blind in Nevada moved to the new plan.

In 1955, the legislature voted to replace the state-county assistance program to mothers with dependent children with the federal-state plan. At every legislative session since 1937, a bill to adopt the Aid to Dependent Children (ADC) program was put forth and defeated. In 1955, Governor Charles Russell, a long-time supporter of the program, was successful in getting the bill passed. In the summer of 1954, he had organized a statewide committee to study the ADC program. Who would be served, who would pay, and the cost to Nevada government were among the questions asked. In part, the report stated 1,425 children would be served at a total state cost of \$10,808 with the federal government paying \$33,663 and the counties \$5,404. The benefit payment for one child was \$30 per month with an additional \$21 for each child thereafter. ADC became effective July 1, 1955 after considerable debate.

One deciding factor was over \$500,000 dollars per year went from Nevada to the federal government, some of which supported other states' ADC programs. Since Nevada had no ADC program, no ADC dollars would return to the state.¹

In 1957, the department of welfare established the Bureau of Services to the Blind. And for the first time that year, the department licensed group care facilities for the aged, handicapped and the infirmed. As of June 30, 1958, there were 2,560 Old Age Assistance recipients receiving \$4,079,000 in funds; 2,244 Aid to Dependent Children recipients drawing \$1,454,000 in benefits; and 125 blind persons obtaining \$266,000 annually in Nevada. In 1960, the census revealed an important fact. Nevada was one of the most urbanized states in the country with a strong majority of its population residing in either the Reno-Sparks or Las Vegas Metropolitan areas. Nevada's social service agencies set up for an earlier, more simple time, needed drastic changes to cope successfully with the complex problems of the state's urban problems.

In 1962, the department of welfare sought to determine the characteristics of average families on the Aid to Dependent Children (ADC) program. In that year a typical white family on ADC consisted of a mother, aged 32, with two children ages 6-8, living in a rented house of four rooms. This family had typically been on ADC for over a year. A typical black family on ADC consisted of a 28-year old mother with three children, aged 4-6, who lived in a rented three room residence. The black family had been receiving aid about the same length of time as the white family. The average Indian family consisted of a mother, aged 28, with one seven year old child, living in a two-room house often owned by a close blood relative who also usually occupied the dwelling with the dependent family.

In 1963, as part of a general reorganization by the legislature, all state health and welfare activities were concentrated in the one umbrella agency previously mentioned, the Department of Health and Welfare. This new department consisted of seven divisions – Alcoholism, Children's Home, Health, Girls Training Center, Nevada State Hospital, Nevada Youth Training Center and Welfare. The first director of the newly formed department was Michael O'Callaghan who later went on to become the state's governor. Upon taking the office, Mr. O'Callaghan and his secretary, Mrs. Jean H. Clark, found the department director's office furnished with two telephones, two chairs, two desks and one typewriter.

A new policy-making board was created for the Welfare Division to consist of seven members all appointed by the governor for four year overlapping terms. The board members were appointed on a geographical basis with no more than two members from the same county. Also, no more than four board members could be from one political party.

During the years 1966-68, the average number of persons receiving Old Age Assistance was 2,381, Aid to Dependent Children 7,070 and Aid to the Blind 155. In those years only 35% of Nevadans officially classified as poor sought public assistance. In addition, from Nevada's personal income of more than 1.8 billion dollars, less than 1% was allotted to public assistance programs.

Thirty-five cents of Nevada's public assistance funding came from state funds, fourteen cents from county funds and fifty-three cents from the federal government. The money was distributed as follows: one cent for Indian General Assistance, 16.9 cents for Old Age Assistance, 1.2 cents on Aid to the Blind, 21.7 cents for Aid to Dependent Children, 4.5 cents for Child Welfare, 0.7 for Indian Foster Care, 41.1 cents for Medicaid and 12.9 for administration.

In the 1960s, federal programs shifted toward direct provision of services rather than cash benefits. These include major programs such as Medicare, Medicaid and Food Stamps. The Medicaid program provides health care services for the poor and was adopted in Nevada in 1967. Years after its inception, known initially as State Aid to the Medically Indigent (SAMI), Medicaid has become the largest welfare program in Nevada and a major source of increased expenditure. Nevada implemented the Food Stamp program which is almost entirely federally funded in 1973 and 1974. In 1974, the federal Supplemental Security Income (SSI) program took over payments for the Old Age Assistance Program, Assistance to the Blind, and Aid to the Permanently and Totally Disabled, a state option which Congress made available to the states in 1950, but one Nevada did not provide until 1974. Nevada implemented the Child Support Enforcement Program in 1975. The program is operated by the Welfare Division and in cooperative agreement with the county district attorneys and serves both Aid to Families with Dependent Children (AFDC) and non-AFDC families in 1) locating a parent, 2) establishing paternity, 3) establishing an order for support and 4) collecting the child support. In 1984, the Child Health Assurance Program (CHAP) was mandated by the Deficit Reduction Act of 1984 and implemented in Nevada in 1985. CHAP provides Medicaid coverage to two groups--pregnant women in two-parent families and children not otherwise eligible for public assistance. It was not until the Family Support Act of 1988 that Nevada provided the Aid to Families with Dependent Children-Unemployed Parent program.

Like other states, Nevada moved to underscore the goals of enabling welfare recipients to secure gainful employment and become self-sufficient. In 1987, Nevada initiated its Comprehensive Employment and Training Program to assist clients in achieving economic independence. With the passage of the Family Support Act of 1988, Nevada implemented the Job Opportunities and Basic Skills Training (JOBS) program. JOBS provided employment,

education, training and support services to recipients of the AFDC program. The Food Stamp Employment Training Program provided employment activities for Food Stamp recipients. Nevada's JOBS program was renamed New Employees of Nevada (NEON) in 1995.

In the late 1980s, the Welfare Division assumed responsibility for administering energy assistance programs, specifically the Weatherization Assistance Program, Low Income Home Energy Assistance and the Energy Crisis Intervention Program. Concurrently, the Welfare Division also began acting as a pass-through agency for distributing Homeless funds, specifically the Stewart B. McKinney Act funds.

In 1994, the Nevada Child Support Enforcement (CSE) Program entered into cooperative agreements with judicial districts to hire hearing masters to establish child support orders, establish paternity, modify orders and enforce obligations. The Nevada law authorizing the hearing masters enacted a quasi-judicial process to expedite the processing of child support cases through the judicial system to better serve the needs of Nevada and out-of-state children. The CSE Program pays 100% of the costs for the hearing master; however, the masters are hired by the district court judges. The hearing masters recommend to the district court judges who, in turn, sign the order.

In the fall of 1993, a fifteen member task force was asked to deliberate ways to reform Nevada's welfare system to better enable recipients to move into the work place. The task force was comprised of state and county officials and other interested parties/ agencies familiar with Nevada's welfare system, and their mission was to make sound recommendations for change to Governor Bob Miller and the 1995 Legislature. A "make work pay" theme emerged from the task force's activities and resulted in recommendations to amend program policies which are inconsistent with the goal of getting recipients into the work force, augment employment and training activities, and revamp earned income budgeting policies, thereby enabling single heads of households with dependent children to keep more of their earnings and establish an income/asset base by which to sever themselves from the welfare system. Governor Miller's welfare reform initiatives, contained in The Executive Budget, were adopted by the 1995 Legislature.

In the closing days of the 1995 Legislature, the Welfare Division again offered to coordinate another Welfare Reform Task Force as two welfare reform bills (Senator Maurice Washington's SB428 and Assemblywoman Jan Monaghan's AB522) were being debated. Neither bill passed.

Because welfare reform legislation was an inevitable reality nationally, a second task force was formed between the 1995 and 1997 legislative sessions. Their mission was two-fold: first, to act as an advisory group to the Welfare Division as it implemented Governor Miller's welfare reform package, and second, to develop further reform recommendations for the 1997 Legislature. The 15-member group and its subcommittees met 15 times in an eight-month period and essentially recommended: 1) the division move forward on Governor Miller's welfare package and continue to focus on employment; 2) clients should negotiate a Self-Sufficiency Plan with the agency to reflect mutual responsibilities in getting them into employment; 3) the agency should aggressively pursue child support for single heads of households with dependent children; 4) the agency should aggressively pursue opportunities to remove ineligible from the rolls to reduce fraud and serve the truly needy; 5) the agency continued to market employment with the applicants, require reasonable work search activity and, secure private industry involvement in job development and training; 6) that support services continue to be provided; 7) mothers who are minors be required to live with their parent(s), a guardian or in an adult-supervised setting; and 8) the state elect automatic Medicaid eligibility for Supplemental Security Income (SSI)

recipients (versus requiring the SSI approved individual to apply for Medicaid benefits). The group also made recommendations on the following issues: 1) family cap, 2) immunizations for children, 3) school attendance, 4) time limited benefits, 5) substance abuse testing, 6) sanctions, and 7) clients pursuing two- and four-year degrees while on aid. Further, another body of recommendations resulted because a subcommittee of the whole studied an inventory of resources available in Nevada to serve those in need and how the current welfare system could be streamlined. There was interest in developing a statewide directory of services, improving customer/client services at the welfare office, reducing paperwork, improving child care services, and implementing a direct-type deposit system utilizing ATM cards for client benefits and other welfare business.

Concurrent with the activities of the Welfare Reform Task Force, other initiatives were undertaken to further the "welfare to work" concept. In 1995, the STARS (Supporting Teens Achieving Real-life Success) Program was started to help teens stay in school, get back into school and find employment. Also in 1995, the Welfare Division changed the name of its employment and training program to New Employees of Nevada – NEON – to emphasize the cultural change occurring within the agency. The agency continued streamlining services by incorporating the "seamless" worker concept whereby one worker determined eligibility for all programs. Between October 1995 and September 1996, Nevada spent federal grant dollars on developing initiatives for the aforementioned "cultural change." A "new vision" training was provided to child support, employment and training, and eligibility staff to reinforce the team concept of working together to get recipients into gainful employment rather than dispensing eligibility determination decisions. In January 1996, a job search requirement was implemented for all AFDC applicants reinforcing the idea one is responsible to look for work. From 1995 ongoing, the agency continued working with public and private entities to secure blocks of jobs for low income Nevadans--projects were developed with the MGM Grand, Silver Legacy and Eldorado; customized job training was initiated with the Community College of Southern Nevada; and, staff continued to work with the unions and Las Vegas Housing Authority to identify available employment opportunities. In January 1996, the Nevada driver's license suspension policy was implemented, another enforcement tool used to get needed back due child support into the homes of parents with dependent children. In 1996, the Welfare Division also continued to integrate program services by adding child support services "up-front" at the initial point of contact with the client in pilot offices; and, the agency augmented the number of child support cases referred to a private agency the Welfare Division was contracting with to further enhance child support collections on "difficult" cases. In July 1996, Investigation and Recovery personnel were assigned to assist child support with the establishment of paternity for AFDC cases. This effort proved fruitful in securing acknowledgments of paternity in several of the cases investigated. In August 1996, a non-custodial parent employment and training program was initiated in Clark County, a coordinated effort involving judicial, district attorney and state child support staff, to secure employment for unemployed parents to enable them to make their child support payment and become more involved in the lives of their children.

The in-house initiatives in conjunction with the efforts of the welfare reform task force were taken to better position Nevada for the passage of national welfare reform law; and, in August 1996, that law became a reality. The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 forevermore changed the Nevada welfare assistance program. Following its passage, Welfare Division staff analyzed the law in September and by October 18, 1996 had submitted a Temporary Assistance for Needy Families (TANF) State Plan to begin the flow of block grant dollars into the state. In November 1996, public hearings were held on the TANF State Plan which essentially maintained the then current AFDC and Job Opportunities and Basic Skills Training (JOBS) programs and incorporated the budgeting policies of the 1995

Miller Plan. Nevada intended to pursue several of the optional provisions available in designing a welfare program using the 1997 Legislature as the public forum venue.

When the 69th legislative session convened, two bills related to welfare reform were drafted for consideration -- the first was AB401 which outlined Nevada's "state-specific" welfare reform program and contained a number of the federally mandated child support provisions, namely the Uniform Interstate Family Support Act (UIFSA), new hire reporting, and other child support enforcement tools to augment collections; the second, SB356, another federal mandate, to withhold professional, occupational and recreational licenses for those delinquent in their child support obligation. AB401 addressed the following issues: 1) each household undergo a skills assessment; 2) each household establish a Personal Responsibility Plan identifying each member's role in moving the household to self-sufficiency; 3) each household sign an Agreement of Cooperation stipulating their responsibilities and penalties imposed for non-compliance; 4) sanctions for non-compliance; 5) time limits for benefit assistance (and extensions to same); 6) hardship exemptions for the 24 and 60 time limits; 7) work requirements and job training; 8) job development; 9) the diversion program; 10) employment services for non-custodial parents; 11) domestic violence screening; 12) childhood immunizations; 13) school attendance; 14) transitional assistance; and 15) administrative hearings. Both bills passed into law.

Another issue of note was the emphasis being given to developing public-private partnerships whereby staff work with Nevada employers to help get jobs for welfare recipients. In FY 2000, the federal work participation rate for all TANF families was 40%, which increased to 50% by 2002. For two-parent families, the rate was 90%. The state penalty for not meeting these quotas is severe; hence, involvement of Nevada employers in welfare reform remains critical as is the state's responsibility to reach out to these employers and help prepare a viable employment pool of applicants for them to hire from. Extensive work with the Department of Employment, Training and Rehabilitation and other community partners continues to be pursued to enable low-income families to enter the workforce. State legislators also recognized the importance of child care assistance in the welfare reform challenge. Historically, the amount of state dollars invested in child care has not been significant. For FY 1998, \$18 million was available for child care of which \$7 million was a commitment made by the state. In FY 1999, there was \$19.3 million with a \$7.6 million state commitment. Nevada's child care program continued to grow from approximately \$29 million in FY 2000 to over \$34 million in FY 2003 and has essentially remained at that level through FY 2013.

Of note, for historical purposes, the Child Care Development Fund (and the funding streams which comprise this fund) was transferred to the Welfare Division from the Department of Human Resources, Director's Office. Along the same lines, the 1997 Legislature passed SB427 which was significant in that the Medicaid medical services program was transferred to a new DHR agency called the Division of Health Care Financing and Policy. Also, transferred with Medicaid were Elder Protective Services and the Homemaker Program. The 1997 Legislature also moved the Weatherization Assistance Program to the Department of Business and Industry, Housing Division.

Nevada exited the 1997 Legislature with the tenets of the state's new welfare reform provisions to be implemented in various stages. By July 1998, Nevada had experienced a 42% decline in the AFDC/TANF population since March 1995, the highest month for this population's caseload. This decline continued with a 62% decrease in this population in 2000 from the March 1995 high. Noteworthy as well was that caseload decline occurred in a state with the fastest growing population in the nation. One of the more poignant challenges of welfare reform is accurately

assessing the short- and long-term outcomes to ensure families are truly becoming self-sufficient within the prescribed time frames. To accomplish this, the Welfare Division began working with the University of Nevada, Reno in 1998 to conduct a longitudinal study of those families who leave the system. In 1998, the agency was successful in its collaboration efforts with other state, county and local entities resulting in approximately 300-400 recipients finding employment each month. By 2000, many recipients remaining on cash assistance had some form of barrier(s) to employment.

It was during 1998 the agency began to complete screening assessment of recipient employment skills, previous work experience, and their training and child care needs. Every person undergoes a strength-based assessment where barriers to employment and other potential issues such as domestic violence and substance abuse may be discovered. As discovered, barriers to employment are addressed by agency staff. In cases of domestic violence, substance abuse or mental health issues, the expertise of other entities is enlisted. Noteworthy is the fact the agency sets aside monies in its budget to pay for these and other services. The role of social workers has been reintroduced into the welfare system. Nevada began hiring social workers in 1995 and has continued to ask for and hire more as they enable the agency to truly communicate and work with the more difficult clientele we serve.

The Balanced Budget Act of 1997 made the Welfare-to-Work (WtW) Program possible and the timing was perfect for Nevada, one of the first five states in the nation to have its WtW State Plan approved by the Department of Labor in January 1998. As previously stated, the Welfare Division had already experienced a significant drop in the AFDC/TANF caseload and was beginning to experience the challenges of serving the harder-to-employ recipients. When the Department of Labor offered the WtW formula grants to the states and local communities, Nevada moved quickly to ready itself to serve a “more difficult – non-job ready” client. WtW funds are channeled through the Local Workforce Investment Boards (LWIBs) in northern and southern Nevada. The LWIBs, in turn, award local contracts to entities willing to help low-income persons become self-sufficient. In FY 2001, the Department of Employment, Training and Rehabilitation became responsible for administration of the WtW Program.

Another area of concern was the previous recidivism problem that existed with the old AFDC Program whereby roughly one-third of the recipients would return to the program when faced with an employment crisis. The division created a one-time “Job Retention Bonus” of \$350 for TANF recipients who began work as of July 1, 1999. The bonus is given when the individual has worked six consecutive months at a minimum of 25 hours per week.

In 2005, congress passed the Deficit Reduction Act which reauthorized the TANF program and significantly changed the structure of the federal work requirements and removed much of the flexibility awarded states under PRORWA. As a result, the TANF program has evolved into a work program stressing employment and employment support services as a means for self-sufficiency rather than its former role as a economic ‘safety net’ for families.

- The caseload reduction credit was modified so, as of October 1, 2006, adjustments to the participation rates are based on caseload declines after 2005 rather than after 1995.
- The state’s participation rate calculation will be based on the combined number of families receiving assistance in the TANF and state-funded programs that count toward the state’s MOE requirement. (Programs funded solely with state MOE dollars did not count toward work rates under the 1996 law. Nevada served households with significant barriers to employment under such a state-funded program until the effective date of this change.)

- The act directed HHS to adopt regulations no later than June 30, 2006, specifying uniform methods for reporting hours of work, the type of documentation needed to verify reported hours of work, whether an activity can be treated as one of the federally listed work activities for purposes of participation rates, and the circumstances under which a parent who resides with a child receiving assistance should be included in the work participation rates.
- It establishes a new penalty of up to 5 percent of a state's block grant if a state fails to implement procedures and internal controls consistent with the Secretary's regulations.

The interim regulations which were published in June 2006 describe the work related activities which could count toward meeting the work requirements, the methods states must use for reporting work activities and the types of documentation needed to verify a work-eligible individual's hours of participation.

As required, Nevada submitted a Work Verification Plan (WVP) draft in September 2006 and operated under the interim verification procedures until a final WVP was approved and implemented effective October 1, 2007.

It is a significant challenge to the Division to meet the required work participation rates under the new regulations which limits state flexibility and imposes a significant administrative burden in regards to verification and internal control standards. The Division is currently operating two demonstration models to determine if either provides a more effective and efficient means to operate the TANF employment and training program.

In the area of child care, the Division of Welfare & Supportive Services partners with the Children's Cabinet for northern and rural Nevada who out-station staff in Division offices and maintain a central office in the Reno area for eligibility determinations. The Children's Cabinet will also implement a statewide Resource & Referral system to help inform parents what they should look for to find quality child care for their children. In Clark County the Division similarly partners with the Urban League for eligibility determinations.

In SFY 2012, Nevada collected \$205.9 million in child support payments. This represents a significant increase from the \$106.5 million collected in FY 00. Currently, Nevada serves 105,088 cases. Non-public assistance cases total 51,669; former public assistance cases total 23,325; and current public assistance cases are 30,094.

Effective October 1998, as a result of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, state child support programs are required to collect information from the courts for any child support order issued or modified after October 1, 1998. It also requires any wage withholding payments be processed through a state or central disbursement unit. In FY 2000, the Nevada Child Support Enforcement Program implemented the State Central Collection and Disbursement Unit (SCaDU) to meet this requirement.

In FY 01, the Welfare Division developed a protocol with the Division of Mental Health and Developmental Services and Vocational Rehabilitation to effectively address mental health and vocational issues with TANF clients serviced by these agencies. Additionally, protocol was established with child welfare agencies statewide to ensure reasonable efforts are made to preserve families being served by both agencies.

Welfare reform continued with President Bush signing the Deficit Reduction Act (DRA) of 2005, which among other things reauthorized the TANF program through 2010. The level of funding

originally authorized in 1996 was not changed and the population modifier for states with extreme population growth was scheduled to end in FY2008, although it was later extended to end in FY09. This provision has a significant impact on Nevada and other states such as Arizona who have seen the largest population growth in the nation.

The DRA's impact on Nevada is profound. It severely limited work activities countable toward work participation; placed strict verification requirements in place; prohibited states from excluding from their WPR denominator families in separate state program paid with maintenance of effort funds. As a result Nevada may be facing federal penalties for not meeting the WPR standards.

In addition, current economic downturns have caused an increase in the unemployment rate, which in turn has increased the TANF, SNAP and Medicaid populations. Nevada has been the number one state in home foreclosures for the past few years with no signs of the subsiding in the near future. At its peak in 2012, the state's unemployment rate of 14.9% was the highest since the Great Depression and the highest nationwide.

In February 2009 in response to the continued economic downturn, Congress enacted the American Recovery and Reinvestment Act of 2009 (ARRA). The President signed this historic legislation on February 17, 2009 which contained several provisions enhancing the TANF, SNAP and Medicaid programs. This included a 13.6% increase in the SNAP benefit allotment, additional 100% federal administrative funds for states to administer the program and temporarily lifted the restrictions of three months of benefits in a 36 month period for able bodied adults without children. The ARRA created the TANF Emergency Contingency Fund which provided federal funds up to 50% of a state's TANF block grant to provide basic assistance, subsidized employment or non-recurring short-term benefits. The state received \$4,848,052 in FY2009 and \$10,519,579 in FY2010 for a total of \$15,367,631 which was used to provide basic assistance payments to needy families. The Act also provided temporary increases to states in the amount of its Federal Medical Assistance Payment (FMAP) to help accommodate the increased Medicaid caseloads. The normal FMAP is approximately 50% and the ARRA provided an increase to those base rates. These contingency measures have been continued through 2013 with legislation passed on January 1, 2013.

Clearly, the post welfare reform era is a paradigm shift for the organization and staff employed therein. All efforts continue to be made to ensure staff are well-trained and clients well-served in the Welfare Division's continuing mission to "Work for the Welfare of ALL Nevadans."

In 2010 Congress enacted the Patient Protections and Affordable Care Act, implemented in January of 2014 though which millions of uninsured Americans gained access to affordable coverage through Affordable Insurance Exchanges and improvements in Medicaid and the Children's Health Insurance Program (CHIP). The programs use consistent standards and systems to promote sharing of information and efficiently meeting the consumers' healthcare needs, improved quality, and lower costs.

Following the issuance of the final rule, states were given the option to expand access to Medicaid and CHIP, with significant Federal support, to include coverage for all individuals between ages 19 and 64 with incomes up to 138% of the federal poverty level. Nevada chose to utilize this option and has since reduced the state's uninsured rate from 22% to 12% by doing so. The law also simplified Medicaid and Chip by codifying the streamlining of income based rules and systems for processing applications and renewals thereby modernizing the eligibility, enrollment, and renewal process.

BIBLIOGRAPHIC NOTE

The first portion of this document was written by Ralph J. Roske in 1974 and comes from Legislative Counsel Bureau files. Mr. Roske reports his sources to be government officials, the Nevada Historical Society in Reno, and the Nevada State Archives in Carson City.

ACRONYMS/ ABBREVIATIONS



NSWD ACRONYMS / ABBREVIATIONS

-A-

AAPIRS Automated Application Processing and Information Retrieval System
 ABAWDs Able Bodied Adults Without Dependents
 ACA Affordable Care Act
 ACES Association for Children for Enforcement of Support (SEP)
 ACF Administration for Children & Families (HHS-FEDERAL)
 ACT (or The Act) - Social Security Act
 AD Advanced Directives (MEDICAID)
 ADA Americans with Disabilities Act
 ADH Administrative Disqualification Hearing
 ADHC Adult Day Health Care (MEDICAID)
 AG Attorney General (STATE)
 AGCF Adult Group Care Facility
 AJS Applicant Job Search
 AKA Also Known As
 AORD As Of Review Date (QC)
 AMPS Application Modernization and Productivity Services
 APA Administrative Procedures Act
 APD Advanced Planning Document
 APHSA American Public Human Services Association (formerly APWA)
 APP Application
 APR Approved; Approval
 A/R Applicant/Recipient; Authorized Representative
 AREERA Agricultural Research Extension and Education Reform Act of 1998
 ARRA American Recovery and Reinvestment Act 2009
 ASC Ambulatory Surgery Center (MEDICAID)
 ASM All Staff Memo
 ASVI Alien Status Verification Index (INS)
 AT Action Transmittal
 ATAC Assistant Terminal Agency Coordinator
 ATP Authorization To Purchase (card)(FS)(no longer used in Nevada)
 AU Assistance Unit

-B-

BADA Budget Account Detail Analysis
 BC Birth Certificate
 BC/BSN Blue Cross and Blue Shield of Nevada
 BDP Bureau of Data Processing (SSA)
 BDR Bill Draft Request
 BE Best Estimate
 BER Beneficiary Earnings Record
 BENDEX Beneficiary Data Exchange (SSA)
 BHF Bureau of Health Facilities (FEDERAL)
 BIA Bureau of Indian Affairs (FEDERAL)
 BLC Bureau of Licensure and Certification (Federal-Medicaid)

BOE Board of Examiners
 BPR Business Process Re-engineering
 B&S Budget and Statistics
 BSSI Bureau of Supplemental Security Income (FEDERAL)
 BUY-IN Payments by a Public Assistance Agency of Medicare Part A & B Insurance Premiums

-C-

CA Corrective Action
 CACTUS Clark County Social Service (CCSS) Automated Client Tracking and User Support
 CAP Corrective Action Plan
 CAPR Consolidated Annual Performance and Evaluation Report
 CC Child Care
 CCDBG Child Care Development Block Grant
 CCDF Child Care Development Fund
 CDC Center for Disease Control
 CEJ Continuing Exclusive Jurisdiction
 CERT Community Emergency Response Team
 CETA Comprehensive Employment Training Act
 C/F Case File
 CFR Code of Federal Regulations
 CHAP Child Health Assurance Program
 CHD Child
 CHIN Child in Need of Supervision
 CHIP Child Health Insurance Program (from Balanced Budget Act of 1997) (Division of Health Care Financing and Policy)
 CHIP Community Home-based Initiative Program (AGING Services)
 CHRI Criminal History Record Information
 CHRT Centralized Hearings Representative Team
 CJIS Criminal Justice Information System
 CK Check
 CL Claim
 CLETS California Law Enforcement Telecommunications System
 CMIA Case Management Improvement Act
 CMMS Centers for Medicare and Medicaid Services (FEDERAL Medicaid Agency - formerly HCFA)
 CO Central Office
 COBRA Consolidated Omnibus Budget Reconciliation Act (of 1984)
 COLA Cost Of Living Adjustment
 CON Certificate Of Need
 CONF Conference
 CONT Continue
 COOP Cooperate
 COP Conditions Of Participation
 CORE Casino Occupational Referral for Employment

CPAS	Claims Processing Assessment System	DMV/	
CPE	Common Procedures Edit (MEDICAID)	PS& DMV	Department of Motor Vehicles and Public Safety (STATE)
CPS	Child Protective Services	DO	District Office
CPT	Current Procedural Terminology (MEDICAID)	DOB	Date Of Birth
CR	Caretaker Relative	DOD	Date of Decision
CR	Case Record	DOL	Department of Labor (FEDERAL)
CRS	Cost Reimbursement Series	DOM	District Office Manager or District Office Memo (DWSS)
CS	Child Support	DOS	Disk Operating System (for PCs)
CSA	Civil Service Annuities	DP	Data Processing
CSBG	Community Services Block Grant	DPS	Department of Public Safety
CSENET	Child Support Enforcement Network	DRA	Deficit Reduction Act
CSEP	Child Support Enforcement Program	DRG	Diagnostically Related Group (MEDICAID)
CSHCN	Children's Special Health Care Needs	DSD	Detailed Systems Design (NOMADS)
CST	Custodian (IV-D Case)	DUR	Drug Utilization Review (MEDICAID)
CSU	Customer Service Unit	DWIP	Disabled Waiver Initiative Program
CSV	Cash Surrender Value	DWSS	Division of Welfare and Supportive Services (replaces NSWd)
CT	Caretaker		
CTA	Control Terminal Agency		
CWEP	Community Work Experience Program (component of JOBS)		
CWIS	Child Welfare Information System	-E-	
CWS	Child Welfare Services	EA	Emergency Assistance
CY	Calendar Year	EAP	Energy Assistance Program
		EBT	Electronic Benefit Transfer
-D-		ECIP	Energy Crisis Intervention Program
DA	District Attorney	ECO	Emergency Care Only (MEDICAID)
DAC	Disaster Assistance Center	EDC	Estimated Date of Confinement
DAG	Deputy Attorney General	EDD	Estimated Date of Delivery
DADS	Division for Aging and Disability Services (STATE)	E-DRS	Electronic Disqualified Recipient System
DC	Dependent Care	EFF	Effective
DCFS	Division of Child and Family Services (STATE)	EFT	Electronic Funds Transfer
DDS	Data Development Systems	EHP	Emergency Community Services Homeless Grant
DEFRA	Deficit Reduction Act (of 1984)	EIN	Employer Identification Number
DEITS	Department of Enterprise Information Technology Services (Formerly DOIT)	EITC	Earned Income Tax Credit
DEL	Delete	EITS	Enterprise Information Technology Services
DETR	Department of Employment, Training and Rehabilitation (STATE)	ELA	Eligible Legalized Alien
DFSP	Disaster Food Stamp Program	ELIG	Eligible
DHCFP	Division of Health Care Financing and Policy (STATE)	EMA	Emergency Medicaid Assistance
DHHS	Department of Health and Human Services (STATE)	EOB	Explanation Of Benefits (MEDICARE); Economic Opportunity Board
DHHS	Department of Health and Human Services (FEDERAL)	E&P	Eligibility & Payments
DHRM	Division of Human Resource Management	EPS	Elder Protective Services (MEDICAID)
DI	Designated Instructor	ESD	Employment Security Division (STATE)
DIP	Division Information and Procedures	ESG	Emergency Shelter Grant
DISC	Document Imaging System Center	ESRD	End Stage Renal Disease (MEDICAID)
DISQ	Disqualified; Disqualification	E&SS	Employment and Supportive Services
DL	Driver's License	E&T	Employment and Training Programs
DLS	Driver's License Suspension	ETU	Employment & Training Unit
DME	Durable Medical Equipment (MEDICAID)	EVE	Electronic Verification of Eligibility (MEDICAID)
DMI	Direct Mail Issuance	-F-	
		FA	Future Action
		FAME	Food Stamps, TANF, Medicaid Eligibility (non IV-D part of NOMADS)

FC	Foster Care	HCC	Health Care Choices
FCH	Foster Care Home; Family Care Home	HH	Household or Head of Household
FCI	Foster Care for Indian Children	HHA	Home Health Agency/ Home Health Aide (MEDICAID)
FCS	Food and Consumer Service (FEDERAL, part of USDA, now called FNS)	HHC	Household Composition
FED	Federal	HHS	Health and Human Services (FEDERAL)
FEMA	Federal Emergency Management Agency (disaster assistance)	HI	Health Insurance System (SSA)
FFP	Federal Financial Participation	HIB	Hospital Insurance Benefits (MEDICARE, Part A)
FFS	Fee for Service (Regular Medicaid; now called LOM)	HIPAA	Health Insurance Portability and Accountability Act of 1996
FFY	Federal Fiscal Year	HIWA	Health Insurance for Workforce Advancement
FHA	Federal Housing Administration (FEDERAL)	HIX	Health Insurance Exchange
FHMA	Farmers Home Administration (FEDERAL)	HMO	Health Maintenance Organization
FIC	Foster and Institutional Care	HO	Hearing Officer
FICA	Federal Insurance Contribution Act (SOCIAL SECURITY)	HOH	Head of Household
FIPS	Federal Information Processing Standards	HtE	Hard-to-Employ
FLSA	Fair Labor Standards Act	HUD	Housing & Urban Development (FEDERAL)
FMAP	Federal Medical Assistance Percentages	HV	Home Visit
FMD	Facility Management Division	-I-	
FMLA	Family Medical Leave Act	IAR	Interim Assistance Reimbursement
FMV	Fair Market Value	ICAMA	Interstate Compact on Adoption & Medical Assistance
FNS	Food and Nutrition Services (FEDERAL; part of USDA)	ICE	Immigration and Customs Enforcement (FEDERAL)
FPL	Federal Poverty Level	ICF	Intermediate Care Facility
FPLS	Federal Parent Locator Services (Support Enforcement)	ICF/MR	Intermediate Care Facility for the Mentally Retarded
FPP	Family Preservation Program	ICI	Individual Case Identification
FRC	Family Resource Center	ICL	Intermediate Care Level (MEDICAID)
FRM	Form Release Memo	ICPC	Interstate Compact on the Placement of Children
FS	Food Stamps Replaced by Supplemental Nutrition Assistance Program (SNAP)	ID	Identification
FSA	Family Support Administration (FEDERAL)	IDA	Individual Development Account
FTI	Federal Tax Information	IDT	Interdisciplinary Team (MEDICAID)
FV	Face Value	IEVS	Income & Eligibility Verification System (Data Networking of ESD, IRS, SDX, Buy-In, BENDEX with Welfare Systems)
FY	Fiscal Year	IFC	Interim Finance Committee (NEVADA State Legislature)
FYI	For Your Information	IFG	Individual and Family Grant (Disaster Assistance)
-G-		IFS	Integrated Financial System (STATE) Accounting System
GA	General Assistance	IGA	Indian General Assistance
GAD	Grant Award Document	ILIP	Independent Living Initiative Program
GAO	General Accounting Office (FEDERAL)	IM	Informational Memorandum
GC	Good Cause	IMD	Institution for Mental Diseases
GSD	General Systems Design (NOMADS)	INC	Income
-H-		INCAP	Incapacitated
HA	Housing Authority	INEL	
HADIC	Handicapped Child(ren)	or INELIG	Ineligible
HBV	Hospital Birth Verification	INV	Investigations/Investigator
HCBS	Home or Community Based Services (MEDICAID)	IP	Inpatient (MEDICAID)
HCBW	Home and Community Based Waiver (MEDICAID) HCFA Health Care Financing Administration (FEDERAL)	IPV	Intentional Program Violation (FS)
		I&R	Investigations and Recovery (DWSS)

IRIS	Investigations and Recovery Information System	MDTA	Manpower Development Training Act
IRG	Interstate Referral Guide	ME	Management Evaluation
IRS	Internal Revenue Service	MED	Medicaid Eligibility Document
IS	Information Systems	MEDI-CAL	California's Medicaid Program
ISSC	Integrated Systems Solutions, Corporation	MER	Medicaid Estate Recovery Program
IT	Information Technology	MFCU	Medicaid Fraud Control Unit
ITC	Inter-Tribal Council		
IUA	Individual Utility Allowance		
		-P-	
-J-		PCCM	Primary Care Case Management (MEDICAID)
JAD	Joint Application Development	PCN	Primary Care Network (MEDICAID)
JCAHO	Joint Commission on Accreditation of Health Organizations	PCP	Primary Care Provider
JD	Job Developers	PDC	Professional Development Center
JOIN	Job Opportunities In Nevada (JTPA agency in northern NEVADA)	PERM	Patient Error Rate Measurement
JTPA	Job Training Partnership Act	PERS	Public Employees' Retirement System
		PF	Putative Father
		PFO	Parental Financial Obligation
		PH	Public Housing
		PHP	Prepaid Health Plan
		PIC	Private Industry Council (related to JTPA and JOBS)
-L-		PIN	Personal Identification Number
LAN	Local Area Network (NOMADS)	PIQ	Potential Ineligible Inquiry (SEP report)
LF	Legal Father	PL	Patient Liability; Poverty Level
LIHEA	Low Income Home Energy Assistance	P.L.	Public Law
LKA	Last Known Address	PLS	Parent Locator Service (SEP)
LKE	Last Known Employer	PM	Prior Medical
LL	Landlord	PMT	Payment
LM	Legal Mother	PO	Printout
LOA	Leave of Absence	PO	Purchase Order
LOI	Letter of Intent	POAM	Plan of Action Milestone
LOM	Limited Option Medicaid	POCA	Plan of Corrective Action
LOS	Length of Stay (MEDICAID)	POGS	Prioritization of Government Services
LPOE	Last Place Of Employment	POS	Point-of-Sale
LPR	Lawful Permanent Resident	POS	Purchase Of Service
LS	Lump Sum	P&P	Policy and Procedure (INQUIRY)
LTC	Long Term Care (MEDICAID)	P&P	Prohibitions and Penalties
LUA	Limited Utility Allowance	PPBB	Priority and Performance Based Budget
LWIB	Local Workforce Investment Board	PPD	Per Patient Day
LWOP	Leave Without Pay	PRE	Program Review and Evaluation (replaces PRIaR)
		PPO	Preferred Provider Organization
-M-		PPR	Personal Property Reserve
MA	Medical Assistance	PRI	Person Resolution Index
MAABD	Medical Assistance to the Aged, Blind and Disabled (Nevada's MEDICAID Program)	PRIDE	Positive Recognition Inspires Dynamic Excellence
MAC	Maximum Allowable Cost	PRISM	Person Resolution information and Service-Based Maintenance
MAO	Medicaid Assistance Only	PRO	Peer Review Organization or Professional Review Organization (MEDICAID)
MAPS	Medical Assistance Plans	PRP	Personal Responsibility Plan
MARS	Management & Administrative Reporting Subsystem (MEDICAID)	PRUCOL	Permanently Residing Under Color of Law
MASH	Mobilized Assistance and Shelter for the Homeless	PRWORA	Personal Responsibility and Work Opportunity Reconciliation Act (1996)
MBO	Management By Objectives	PSE	Public Service Employee
MBR	Master Beneficiary Records System (SSA)	PT	Policy Transmittal
MC	Marriage Certificate		
MCO	Managed Care Organizations		
MCU	Medical Care Unit		
MDT	Multi-Disciplinary Team		

PTF	Patient Trust Fund	SCaDU	State Collection and Disbursement Unit
PV	Postponed Verification (FS)	SDX	State Data Exchange (SSI)
PWE	Principal Wage Earner	SEL	Service Eligibility Listing
		SEP	Support Enforcement Program; Support Enforcement Procedure
-Q-		SERT	Senior Evidence Review Team (AGING SERVICES)
QA	Quality Assurance	SEU	Support Enforcement Unit
QC	Quality Control	SFU	Standard Filing Unit (AFDC); Separate Food Unit (FS)
QDWI	Qualified Disabled Working Individuals	SFY	State Fiscal Year
QHP	Qualified Health Plan	SH	Subsidized Housing
QI-1s	Qualifying Individuals (MAABD)	SIRT	Special Investigative Recovery Team
QI-2s	Qualifying Individuals (MAABD)	SIU	Special Investigative Unit
QIDB	Qualified Integrated Data Base	SLIAG	State Legislation Impact Assistance Grant
QMB	Qualified Medicare Beneficiary	SLMB	Special Low-Income Medicare Beneficiaries
		SMIB	Supplemental Medical Insurance Benefits (MEDICARE Part B)
-R-		SNAP	Supplemental Nutrition Assistance Program
RAM	Random Access Memory (Computer/PCs)	SNAPP	Skilled Nursing Assessment Patient Profile (MEDICAID)
RAW	Replenishment Agricultural Worker	SNEA	State of Nevada Employees' Association
RC	Relative Caregiver	SNF	Skilled Nursing Facility
RCRR	Refined Customization Requirements Reports (NOMADS)	SNL	Skilled Nursing Level (MEDICAID)
R&A	Review and Adjustment	SOA	Service Oriented Architecture
RD	Redetermination	SOLQ	State Online Query
REACT	Rapid Emergency Assistance Coordination Team	SON	State of Nevada
RECALC	Recalculated (budgeting)	SOPR	Service of Process
REF	Reference; Referral	SP	Stepparent
REHAB	Rehabilitation Division (DETR)	SPA	SSI Payment Amount
RES	Resource; Residence	SPA	State Plan Amendment
RETRO	Retroactive	SPLS	State Parent Locator Service (SEP)
R/F	Review File	SPP	Single Parent Program
RFI	Request for Information	SRS	Social and Rehabilitation Service
RFP	Request For Proposal	SS-5	Social Security Card Application Form
RJ	Responding Jurisdiction	SSA	Social Security Administration (DHHS)
RMS	Random Moment Sampling	SSBG	Social Services Block Grant
RMU	Referral Management Unit (Investigations)	SSC	Social Security Card
RO	Regional Office (FEDERAL)	SSD	Social Security Disability
R&O	Rights and Obligations	SSG	Self Sufficiency Grant
ROE	Review of Eligibility	SSI	Supplemental Security Income
ROI	Report of Illness	SSIS	Social Service Inventory System
RR	Railroad Retirement	SSN	Social Security Number
R&S	Research & Statistics	SSP Plan	Self Sufficiency Plan
RSDI	Retirement, Survivors & Disability Insurance (SOCIAL SECURITY)	Or SSP	State Supplementary Payment
		STARS	Serving Teens Achieving Real-Life Success
-S-		START	Statewide Training And Review Team
SA	Systems Alert	STEP	Specialized Training & Employment Partnership
SAFAH	Supplemental Assistance for Facilities to Assist the Homeless	SU	Sub Assistance Unit
SAM	State Administrative Manual	SUA	Standard Utility Allowance (FS)
SAOR	State Agency Operations Review (SNAP)	SURS	Surveillance & Utilization Review System (MEDICAID)
SAPTA	Substance Abuse Prevention and Treatment Agency	SUSP	Suspend; Suspension
SASSI	Substance Abuse Subtle Screening Inventory	SvK	Sneede vs. Kizer
SAVE	Systematic Alien Verification for Entitlements	SYSOP	System Operations
SAW	Special Agricultural Worker		
SC	Show Cause		

-T-		WEST PO	Western Governors' Policy Office
TAC	Terminal Agency Coordinator	WIA	Workforce Investment Act
TAF	TANF Action Form	WIC	Women, Infants & Children (program which supplies vouchers for food; HEALTH DIVISION)
TANF	Temporary Assistance for Needy Families	WOO	Window of Opportunity
TC	Telephone Call	WSEA	Western States EBT Alliance
TCC	Transitional Child Care	WTPY	Wire Third Party Inquiry
TEFRA	Tax Equity and Fiscal Responsibility Act (or 1982)	WtW	Welfare-to-Work
TIN	Tax Identification Number		
TIPIJ	Technology Improvement Project & Investment Justification	IV-A	AFDC Eligibility Program (Title IV-A of the Social Security Act)
TIR	Technology Improvement Request	IV-B	Child Welfare Services (Title IV-B of the Social Security Act)
TJTC	Targeted Jobs Tax Credit	IV-D	Support Enforcement Program (Title IV-D of the Social Security Act)
TM	Transitional Medicaid	IV-E	Child Welfare Services Foster Care Maintenance & Adoption Subsidies (Title IV-E of the Social Security Act)
TP	Termination Pending (term pend)	IV-F	JOBS Program (Title IV-F of the Social Security Act)
TPL	Third Party Liability		
TPM	Third Party Master Record (SSA)	XIX	Medicaid Program (Title XIX of the Social Security Act)
TPQY	Third Party Query System (Social Security)	XX	Social Services Block Grant (Title XX of the Social Security Act)
TPR	Termination of Parental Rights (SEP)	XXI	Child Health Insurance Program (Nevada Check Up)
TQM	Total Quality Management		
TR	Treasurer's Report (SEL)		
TUA	Telephone Utility Allowance		
UCR	Usual, Customary and Reasonable		
-U-			
UI	Underissuance		
UIB	Unemployment Insurance Benefits		
UID	Unique Identification		
UIFSA	Uniform Interstate Family Support Act		
UP	Underpayment		
UPD	Update		
UR	Utilization Review		
URES A	Uniform Reciprocal Enforcement of Support Act (SEP)		
USCIS	United States Citizenship and Immigration Service		
USDA	U.S. Department of Agriculture		
UTL	Unable to Locate; Utility		
-V-			
VA	Veterans Administration		
VAWA	Violence Against Woman Act		
VERIF	Verification		
VIN	Vehicle Identification Number		
VOL	Voluntary		
VRS	Voice Response System		
VRU	Voice Response Unit		
VS	Vital Statistics		
-W-			
WAP	Weatherization Assistance Program		
WDCAS	Welfare Data Collection Analysis System		
W/D	Withdraw(n)		
WELF	Welfare Integrated Computer Systems		

CASELOAD HISTORY



CASELOAD HISTORY TABLE OF CONTENTS

	<u>Page</u>
DWSS Caseload History Narrative	1 - 2
Timeline of Important Events Since PRWORA Unveiled	3 - 6
DWSS Aid Code Descriptions	7 - 8
Change Over Time, FY2001 -FY2014	9 - 11
Medicaid Eligibles, FY1993 -FY2014	12 - 15
Welfare Eligibles, Tables 1,2 and 3	15 - 18
Historical Caseload and Expenditures Spreadsheet	19

Graphs

TANF	20
SNAP	21
Total Medicaid	22

Caseload History:
Annual Summaries

TANF/AFDC	23 - 25
CHAP	26 - 27
Aged	28 - 29
Blind	30 - 31
Disabled	32 - 33
MAABD	34 - 35
HCBW	36
QMB	37 - 38
SLMB	39 - 40
HIWA	41
County Match	42 - 43
Child Welfare	44 - 46
SNAP	47 - 48
NV CHECK UP/CHIP	49

Graphs: FY 2005 -FY 2014

Total TANF Basic Grant Recipients	50
TANF Related Medical	51
CHAP Recipients	52
Aged Eligibles	53
Disabled/Blind Eligibles	54
Medicare Beneficiaries Eligibles	55
County Match Eligibles	56
Child Welfare Eligibles	57
Total Medicaid Eligibles	58
SNAP Participating Persons	59
NV CHECK UP Recipients	60

CASELOAD HISTORY

The Research and Statistics Section of the Budget and Statistics Unit is responsible for Nevada's Division of Welfare and Support Services (DWSS) caseload information. Current information may be accessed via the DWSS website at www.dwss.nv.gov.

Caseload History

The following pages of graphs and spreadsheets report DWSS historical caseload information in different permutations.

Caseload Growth

Experiencing annual double-digit increases from the late 1980s through the early 1990s, Nevada's Aid to Families with Dependent Children (AFDC) caseload peaked in March 1995 at 42,703 recipients, one year after the nation's peak in March 1994.

On January 1, 1997, Nevada implemented the Temporary Assistance for Needy Families (TANF) program. TANF instituted a federally required 60-month lifetime time limit on receipt of cash benefits (child only cases are exempt), increased work participation requirements, and increased mandatory sanctions for failure to participate in work requirements and failure to cooperate with the Child Support Enforcement Program (CSEP). Additionally, state Welfare reform measures passed during the 1995 legislative session were implemented February 1, 1997. These included a stricter time limitation and sanction penalties.

TANF recipients decreased steadily from the middle 1990s through fiscal year 2000. Caseload decreases during this time can best be understood within the context of Nevada's welfare reform initiatives. These included the New Employees of Nevada (NEON) program that began in July 1995 and the Applicant Job Search (AJS) program that began in January 1996. These programs mirror national welfare reform in their emphasis on self-sufficiency through employment. Nevada, and most of the nation, enjoyed a healthy economy during this time, which attributed to the continued decline of caseloads nationwide.

Fiscal year 2001 marked the first time in several years that the TANF recipient caseload experienced growth, increasing approximately nine percent from the prior fiscal year due to a decline in the previously robust economy and Nevada's continued population growth. The tragic events of September 11, 2001 exacerbated this growth trend, contributing to a 59 percent increase in the TANF caseload from fiscal year 2001 to 2002 and an additional eight percent growth in fiscal year 2003.

A decrease in caseload was seen throughout fiscal years 2004 to 2007 due primarily to improved conditions in Nevada's economy as well as DWSS' ongoing efforts toward stressing work-first and aggressively transitioning individuals to self-sufficiency. Fiscal Year 2008 had an increase in caseloads due to the effects of the recession that started in December 2007. Since Fiscal Year 2008 all caseloads have continued to grow at rates not seen in recorded history and have set peak records in Fiscal Year 2014 in all categories.

The number of Supplemental Nutrition Assistance Program (SNAP) participants exhibited continued growth patterns, increasing approximately 14 percent from the beginning of fiscal year 2012 to the end of fiscal year 2014. This is attributed to consistent unemployment rate increases (peaking at 14% in October 2010), a continuous decline of Nevada's economy, a leading foreclosure rate in the nation (of over 5 years), and the continued effects of the recession that officially ended June 2009, but has continued to affect Nevada negatively. Converting to the Electronic Benefit Transfer (EBT) system, in which SNAP is similar to ATM

cards, eliminated the stigma some recipients may have felt when using the actual coupons, thus encouraging additional enrollment.

A new historical peak of 391,816 participating persons was reached in June 2014 with slow growth expected to continue into the next biennium.

The number of Medicaid eligible recipients increased in both fiscal years 2013 and 2014; growing 3.1 percent and 63.6 percent respectively. The steep increase in 2014 was due to the implementation of the Affordable Health Care Act (ACA) with Mandatory programs starting in October 2013 and Optional programs starting in January 2014.

Some Notes on Spreadsheets in the Following Pages

“Timeline of Important Events Since PRWORA Unveiled”

The “Timeline of Important Events” spreadsheet highlights major events locally, nationally and internationally since September 1994.

“DWSS Aid Code Descriptions”

The “Aid Code” spreadsheet provides a list of all types of program eligibility at DWSS, along with the corresponding aid code used in the NOMADS computer system. It also includes aid codes that are no longer used along with their end dates.

"Change Over Time"

The summary spreadsheet "Change-Over-Time" gives annual average monthly totals and the percent change from year-to-year for DWSS TANF, Medicaid and Food Stamps.

"Medicaid Eligibles"

The "Medicaid Eligibles" spreadsheet shows the annual average monthly total for current eligible recipients and retro eligibility for each program for fiscal years 1993-2014. Retro eligibility is derived from the Division of Health Care and Finance Policy MMIS computer system (report WL80737A) one year after the fiscal year ends.

"Welfare Eligibles"

"Welfare Eligibles, Tables 1, 2 and 3" are not the official DWSS caseload information but are presented here for estimation purposes only. The information is a snapshot in time as of June 30, 2014. Each table is shown within the context of the official county population estimates by the Nevada State Demographer for March 2014. These tables can be used to establish comparative relationships or to examine a specific county or counties.

Table 1 shows the estimated percent each county has of the statewide caseload per program. Significantly, Clark County, which has about 72 percent of the state's population, accounts for proportionately more than its share of the following programs: TANF, Total Medicaid, and SNAP. Washoe County, which has about 15 percent of the state's population, has proportionately more than its share in NCU, MCB, Blind, QMB, SLMB, and QI.

Table 2 puts each county's caseload within the context of its population. For example, almost 15 percent of Clark County's population receives SNAP and over 18 percent are Medicaid eligible.

Table 3 shows each county's caseload within the context of total statewide population. For example, over 18 percent of Nevada's population is Medicaid Eligible, with 13.5 percent in Clark County. Over 14 percent of Nevada's population is eligible for SNAP, with almost 11 percent in Clark County.

TIMELINE OF IMPORTANT EVENTS SINCE PRWORA UNVEILED (AS OF 30 JUNE 2014)

YEAR	DATE	EVENT
1994	✓ SEP 94	U.S. CONGRESSIONAL PERSONAL RESPONSIBILITY ACT UNVEILED.
1995	✓ MAR 95	AID TO FAMILIES WITH DEPENDENT CHILDREN (AFDC) RECIPIENT HISTORIC HIGH MONTH (42,703).
	✓ JUL 95	NEW EMPLOYEES OF NEVADA (NEON) STARTS.
1996	✓ JAN 96	APPLICANT JOB SEARCH (AJS) STARTS.
	✓ AUG 96	U.S. CONGRESSIONAL PERSONAL RESPONSIBILITY ACT SIGNED INTO LAW.
1997	✓ JAN 97	TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) STARTS - 60 MONTHS FOR FEDERAL TIME LIMITS.
	✓ FEB 97	EARNED INCOME DISREGARDS BEGINS.
	✓ FEB 97	F/S ABAWDS MUST MEET WORK PARTICIPATION REQUIREMENT.
1998	✓ JAN 98	NV TANF TIME LIMITS START (24 ON, 12 OFF, 24 ON, 12 OFF, 12 ON).
1999	✓ SEP 99	FOOD STAMPS AUTHORIZED CASES LOW MONTH (29,042).
	✓ 01 OCT 99	TANF CASH RESOURCE/ASSET LIMIT INCREASED FROM \$1,000 TO \$2,000.
	✓ NOV 99	FOOD STAMPS PARTICIPATING CASES LOW MONTH (27,469).
	✓ NOV 99	FOOD STAMPS RECIPIENTS LOW MONTH (58,869).
2000	JAN 00	FIRST 12 MONTH SITOUT BEGINS FOR NV TANF CASH GRANT RECIPIENTS.
	JAN 00	INCREASED PAYMENTS FOR NON-NEEDY CARETAKERS STARTS.
	JAN 00	LOWEST UNEMPLOYMENT RATE (3.8%) FOR NV (SEASONALLY ADJUSTED).
	FEB 00	LOWEST UNEMPLOYMENT RATE (3.8%) FOR NV (SEASONALLY ADJUSTED).
	MAR 00	TANF HISTORIC RECIPIENT LOW MONTH (15,487).
	MAR 00	LOWEST UNEMPLOYMENT RATE (3.8%) FOR NV (SEASONALLY ADJUSTED).
	APR 00	LOWEST UNEMPLOYMENT RATE (3.8%) FOR NV (SEASONALLY ADJUSTED).
2001	JAN 01	NV TANF CASH GRANT RECIPIENTS CAN RETURN FROM FIRST SITOUT.
	JAN 01	SECOND INCREASED PAYMENTS FOR NON-NEEDY CARETAKERS STARTS.
	MAR 01	START OF RECESSION.
	JUL 01	CHILD ONLY FAMILY PRESERVATION PLAN (FPP) AID CODE "COF" STARTS.
	JUL 01	CHILD ONLY NON-NEEDY CARETAKER AID CODE "CON" STARTS.
	✓ 11 SEP 01	TERRORIST ATTACK ON NEW YORK CITY, WASHINGTON DC & PENNSYLVANIA.
	✓ 01 OCT 01	UNEMPLOYMENT INSURANCE BENEFITS (UIB) FOR ANY INDIVIDUAL LAID OFF AFTER SEPTEMBER 11, 2001 ARE EXEMPT WHEN DETERMINING TANF, TANF-RELATED MED AND CHAP ELIGIBILITY.
	OCT 01	LAST PHASE-IN OF COVERAGE OF CHAP CHILDREN.
	OCT 01	CHILD ONLY KINSHIP PROGRAM AID CODE "COK" STARTS.
	OCT 01	2 PARENT AID CODE "UP" CATEGORY TRANSFERRED TO STATE MOE.
	OCT 01	FS EBT PHASE-IN STARTS.
	NOV 01	END OF RECESSION.
	DEC 01	NSWD CENTRAL OFFICE MOVED TO 1470 COLLEGE PARKWAY, CARSON CITY.
2002	JAN 02	FIRST TIME THAT NON-NV RESIDENTS COULD HAVE MET THE 60 MONTH FEDERAL LIMIT ON TANF (DEPENDING ON OTHER STATE IMPOSED LIMITS).
	JUN 02	FS EBT PHASE-IN COMPLETED.
	JUL 02	MEDICAL CARE FOR CERVICAL/BREAST CANCER AID CODE "MCB" STARTS.
	1 SEP 02	OCT 2001 EXEMPTION POLICY FOR UNEMPLOYMENT INSURANCE BENEFITS (UIB) FOR DETERMINING TANF, TANF-RELATED MED AND CHAP ELIGIBILITY ENDS.
	DEC 02	AID CODE "QJ" ENDS.
2003	JAN 03	FIRST TIME THAT NV RESIDENTS COULD HAVE MET THE 60 MONTH FEDERAL LIMIT ON TANF IF THEY HAD BEEN ON TANF IN JANUARY 1997 (START OF FEDERAL TIME LIMITS).
	JAN 03	SECOND SITOUT BEGINS FOR NV TANF CASH GRANT RECIPIENTS.
	19 MAR 03	LAUNCH OF SECOND IRAQ WAR.
	01 APR 03	THE 2002 FOOD STAMPS FARM BILL RESTORES BENEFITS TO LEGAL IMMIGRANTS WHO LIVED IN THE U.S. AS A QUALIFIED ALIEN FOR 5 YEARS FROM THE DATE OF ENTRY.
	APR 03	NEVADA'S FOOD STAMP ISSUANCE CYCLE CHANGED FROM A FISCAL MONTH TO A CALENDAR MONTH.
	01 OCT 03	THE 2002 FOOD STAMPS FARM BILL RESTORES BENEFITS TO LEGAL IMMIGRANT CHILDREN UNDER 18 YEARS OF AGE WHO LAWFULLY RESIDE IN THE U.S. REGARDLESS OF THE DATE THEY ENTERED THE COUNTRY.
	01 OCT 03	DIVISION OF HEALTH CARE FINANCING & POLICY MMIS SYSTEM ONLINE.
	01 DEC 03	FLAMINGO DISTRICT OFFICE OPENS (LAS VEGAS, CLARK COUNTY).
	14 DEC 03	NEW SANCTION POLICY STARTS (AFFECTS JANUARY 2004 BENEFITS).
2004	JAN 04	NV TANF CASH GRANT RECIPIENTS CAN RETURN FROM SECOND SITOUT.
	01 JUL 04	INCREASED PAYMENTS FOR KINSHIP CASES AID CODE "COK".
	01 JUL 04	ELIMINATION OF CHAP ASSETS TEST.
	01 JUL 04	HEALTH INSURANCE WORK ADVANCEMENT PROGRAM (HIWA) AID CODE "WY9" STARTS.
	01 OCT 04	NEW SSP-MOE PROGRAM STARTS (ADDITIONAL AID CODES "AF" & "A", SELECTED GROUPS).

<u>2005</u>	<p>JAN 05 FIRST TIME THAT THE 60 MONTH FEDERAL LIMIT ON TANF WILL AFFECT THOSE NV RECIPIENTS THAT HAVE BEEN ON TANF SINCE JAN 98 (EXCEPT HARDSHIP CASES).</p> <p>MAR 05 POLICY CHANGE ALLOWS INELIGIBLE NON-CITIZENS TO RETAIN AN OPEN MEDICAID CARD FOR EMERGENCY MEDICAL SERVICES ONLY. AFFECTS TANF EM4 AND MAABD EM1, EM3 & EM9 AID CODES.</p> <p>JUN 05 AID CODE "NO9" (PL 105-33) ENDS.</p> <p>01 JUL 05 FAMILY PRESERVATION PROGRAM (FPP) AID CODE "COF" TRANSFERRED TO MHDS.</p> <p>01 JUL 05 AGED OUT OF FOSTER CARE AID CODE "AO" STARTS.</p> <p>29 AUG 05 HURRICANE KATRINA (STRONG CATEGORY 3) HITS NEW ORLEANS AND SURROUNDING AREAS.</p> <p>SEP 05 NSWD NAME CHANGED TO DIVISION OF WELFARE AND SUPPORTIVE SERVICES (DWSS).</p> <p>12 SEP 05 NEW TANF (BOTH CASH & MED ONLY) AID CODE "HK" FOR HURRICANE KATRINA EVACUEES STARTS (1ST DAY BENEFITS ISSUED).</p> <p>OCT 05 HOME & COMMUNITY BASED WAIVER (DISABLED-GROUP CARE) AID CODE "HG9" CLOSED.</p> <p>01 OCT 05 ADDITIONAL SSP-MOE CODES ("G" & "H") STARTS.</p> <p>14 DEC 05 CHARLESTON DISTRICT OFFICE MOVED TO NEW LOCATION. NEW NAME IS NELLIS DISTRICT OFFICE.</p> <p>31 DEC 05 TANF CASH BENEFITS FOR HURRICANE KATRINA EVACUEES ENDS.</p>
<u>2006</u>	<p>JAN 06 HOME & COMMUNITY BASED WAIVER (AGED-DWIP) AID CODE "HD1" STARTS.</p> <p>JAN 06 LOWEST UNEMPLOYMENT RATE (3.6%) FOR NV (SEASONALLY ADJUSTED).</p> <p>JAN 06 DEFICIT REDUCTION ACT PASSED.</p> <p>MAR 06 ADDITIONAL SSP-MOE CODE ("I") STARTS.</p> <p>31 MAR 06 TANF MED ONLY BENEFITS FOR HURRICANE KATRINA EVACUEES ENDS.</p> <p>01 APR 06 LABOR SURPLUS AREAS IN NV ARE ELIMINATED (CHANGED BY DEPARTMENT OF LABOR). THIS AFFECTS FS ABAWD INDIVIDUALS WHICH WILL NO LONGER BE EXEMPT FROM ABAWD PROVISIONS. THERE IS NO CHANGE TO TRIBAL AREAS.</p> <p>01 JUL 06 HOME & COMMUNITY BASED WAIVER (AGED-ASSISTED LIVING FACILITY (ALF)) AID CODE "AL1" STARTS (FOR CLARK COUNTY RESIDENTS ONLY).</p> <p>01 JUL 06 2 VALID PROOF OF CITIZENSHIP DOCUMENTS FOR ASSISTANCE REQUIRED BASED ON DRA REGULATIONS.</p> <p>01 OCT 06 CHANGES TO TANF DUE TO DEFICIT REDUCTION ACT OFFICIALLY IN EFFECT.</p> <p>01 OCT 06 ALL SSP-MOE CODES EXCEPT "I" ENDS. AID CODE "UP" NO LONGER SSP-MOE.</p> <p>01 DEC 06 NEW AID CODE "PS" STARTS. PREGNANT WOMEN WITH INCOME BETWEEN 133% AND 185% FEDERAL POVERTY LEVEL. PART OF HIFA. THIS IS NOT TITLE XIX MEDICAID. DO'S WILL PROCESS APPLICATIONS AS PART OF CHAP.</p>
<u>2007</u>	<p>JAN 07 TANF NEEDS STANDARD WAS SYNCED UP TO FEDERAL POVERTY LEVELS.</p> <p>JAN 07 DISREGARDS UPDATED: 100% 1ST 3 MONTHS; 85% NEXT 3 MONTHS; 75% NEXT 3 MONTHS; 65% FINAL 3 MONTHS.</p> <p>MAY 07 SOUTHERN CHILD CARE DO OPENED (CONTRACT EMPLOYEES ONLY).</p> <p>MAY 07 CACU OFFICE MOVED TO 1504 N. MAIN ST, LAS VEGAS.</p> <p>JUN 07 FS PILOT PROJECT "TRUSTED PARTNERS" STARTS. FOOD BANK OF NORTHERN NEVADA WILL WORK WITH HOUSEHOLDS IN NORTHERN AND RUAL NEVADA. "HELP" OF SOUTHERN NEVADA WILL WORK WITH HOUSEHOLDS IN CLARK COUNTY.</p> <p>30 JUN 07 1024 W. OWENS DO (I&R) CLOSED. ALL EMPLOYEES MOVED TO DESERT INN OFFICE.</p> <p>1 JUL 07 TANF CASH GRANTS INCREASED BY 10%. AFFECTS ALL CASH AID CODES (AF, AI, UP, COA & COS) WITH EXCEPTION OF NON-NEEDY (CON) AND KINSHIP CARE (COK).</p> <p>24 JUL 07 FEDERAL MINIMUM WAGE RAISED FROM \$5.15 TO \$5.85 PER HOUR (1ST INCREASE IN 10 YEARS).</p> <p>31 JUL 07 RECIPIENT COUNTS FOR AID CODES AF, AI, UP, COA & COS HAVE BEEN MODIFIED. DUE TO A LEGISLATIVELY APPROVED 10% INCREASE IN BENEFITS WHICH WAS EFFECTIVE 01 JULY 2007 (FY08), SYSTEM CONVERSION ISSUES OCCURRED IN WHICH EXTRA SUPPLEMENTAL PAYMENTS ARTIFICIALLY INFLATED THE CASELOAD COUNTS. A PERCENTAGE FACTOR WAS APPLIED TO ADJUST THE DATA.</p> <p>31 AUG 07 RECIPIENT COUNTS FOR AID CODES AF, AI, UP, COA & COS HAVE BEEN MODIFIED. DUE TO A LEGISLATIVELY APPROVED 10% INCREASE IN BENEFITS WHICH WAS EFFECTIVE 01 JULY 2007 (FY08), SYSTEM CONVERSION ISSUES OCCURRED IN WHICH EXTRA SUPPLEMENTAL PAYMENTS ARTIFICIALLY INFLATED THE CASELOAD COUNTS. A PERCENTAGE FACTOR WAS APPLIED TO ADJUST THE DATA.</p> <p>01 SEP 07 RENO BIBLE WAY DO (I&R) CLOSED. ALL STAFF MOVED TO NORTHERN PDC.</p> <p>15 SEP 07 CARSON CITY DO MOVED TO 2533 N CARSON ST, #200 AND 2527 N CARSON ST, #255 & 260, CARSON CITY. 2533 N CARSON WILL BE FIELD SERVICES. 2527 N CARSON WILL BE CHILD CARE AND ENERGY ASSISTANCE PROGRAM.</p> <p>01 OCT 07 NEW AID CODES SG, TL, TN, TN1, TN2 & TP USED STARTING WITH OCTOBER BENEFIT ISSUANCE. AID CODES AF, AI & UP WILL BE PHASED OUT NATURALLY. NO CHANGE TO CHILD ONLY AID CODES.</p> <p>01 OCT 07 PRE-CASH MEDICAID (PC) ENDS.</p> <p>01 OCT 07 TANF CASH PROGRAM DE-LINKED FROM MEDICAID IN NOMADS. CASH AID CODES WILL ALSO HAVE TANF MED AID CODE.</p> <p>01 OCT 07 ELKO DISTRICT OFFICE MOVED TO 1020 RUBY VISTA DR #101, ELKO.</p> <p>01 OCT 07 GROSS UNEARNED INCOME LIMIT FOR THE HWA PROGRAM (WY9) HAS BEEN REMOVED.</p> <p>01 OCT 07 UNDUE HARDSHIP FOR MEETING AGE REQUIREMENTS FOR KINSHIP CARE (COK) INSTITUTED. CHILD/CHILDREN MUST HAVE "SPECIAL NEEDS" OR ARE A "HARD TO PLACE" SIBLING GROUP AND APPLICANT MUST DEMONSTRATE AN EXTREME FINANCIAL HARDSHIP.</p> <p>15 OCT 07 GOVERNOR CALLS FOR HIRING FREEZE FOR MOST STATE POSITIONS.</p> <p>DEC 07 START OF RECESSION.</p> <p>26 DEC 07 PUBLIC LAW 110-161 OF THE CONSOLIDATED APPROPRIATIONS ACT OF 2008 GRANTS IRAQI AND AFGHAN NON-CITIZENS SPECIAL IMMIGRANT STATUS UNDER SECTION 101(A)(27) OF THE IMMIGRATION AND NATIONALITY ACT (INA). INDIVIDUALS AND FAMILY MEMBERS GRANTED THIS SPECIAL IMMIGRATION STATUS ARE ELIGIBLE FOR RESETTLEMENT ASSISTANCE, ENTITLEMENT PROGRAMS AND OTHER BENEFITS THE SAME AS REFUGEES ADMITTED UNDER SECTION 207 OF THE INA, EXCEPT THE PERIOD OF ELIGIBILITY CANNOT EXCEED 6 MONTHS (8 MONTHS FOR IRAQ IMMIGRANTS). THESE PROVISIONS EXPIRE ON 30 SEPTEMBER 2008 (30 NOVEMBER 2008 FOR IRAQ IMMIGRANTS) UNLESS EXTENDED BY FEDERAL LAW.</p>

2008	<p>JAN 08 WINNEMUCCA DO MOVED TO 3140 TRADERS WAY, WINNEMUCCA.</p> <p>17 JAN 08 EXPANDED ELIGIBILITY FOR PREGNANT WOMEN (AID CODE PS) TERMINATED. RECIPIENTS CURRENTLY ELIGIBLE WILL REMAIN SO UNTIL 2 MONTHS AFTER BIRTH.</p> <p>04 FEB 08 GROSS UNEARNED INCOME LIMIT FOR THE HIWA PROGRAM (WY9) HAS BEEN REINSTATED AT \$699.00.</p> <p>25 FEB 08 EXPANDED ELIGIBILITY FOR PREGNANT WOMEN (AID CODE PS) REINSTATED WITH A 200 CASE/RECIPIENT CAP.</p> <p>APR 08 REQUIREMENT TO PROVIDE PROOF OF SERVICE REINSTATED AS AN ELIGIBILITY REQUIREMENT FOR EMERGENCY MEDICAL ASSISTANCE PROGRAMS (AFFECTS AID CODES EM1, EM3, EM4 & EM9).</p> <p>26 JUN 08 CONGRESS INCLUDED EMERGENCY UNEMPLOYMENT COMPENSATION IN THE FISCAL YEAR 2008 SUPPLEMENTAL SPENDING BILL (P.L. 110-252). THE BILL EXTENDED UNEMPLOYMENT INSURANCE (UI) BENEFITS FOR UP TO 13 WEEKS, THROUGH THE END OF MARCH 31, 2009. THE UEC BENEFITS PASSED IN THE BILL WERE 100% FEDERALLY FUNDED.</p> <p>24 JUL 08 FEDERAL MINIMUM WAGE RAISED FROM \$5.85 TO \$6.55 PER HOUR.</p> <p>30 SEP 08 TANF-TEMP (TP) PROGRAM DISCONTINUED AS ORIGINALLY IMPLEMENTED. TEMP PROGRAM WILL STILL BE AVAILABLE FOR FAMILIES EXPERIENCING AN EPISODE OF NEED AS A RESULT OF UNFORESEEN CIRCUMSTANCES. THIS WOULD INCLUDE NATURAL DISASTERS SUCH AS FLOODS, EARTHQUAKES, ETC.</p> <p>01 OCT 08 HOUSEHOLDS TERMINATED FOR FAILING TO COMPLY WITH AN ESTABLISHED PERSONAL RESPONSIBILITY PLAN (PRP) WILL BE INELIGIBLE FOR TANF CASH AND TANF RELATED MEDICAID (TRM) FOR 3 MONTHS.</p> <p>01 OCT 08 THE FOOD, CONSERVATION AND ENERGY ACT OF 2008 (FCEA) RENAMED THE FOOD STAMPS PROGRAM TO "SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)".</p> <p>21 NOV 08 CONGRESS PASSED THE UNEMPLOYMENT COMPENSATION EXTENSION ACT OF 2008 (P.L. 110-449). PROVIDED AN ADDITIONAL SEVEN WEEKS OF EXTENDED UNEMPLOYMENT COMPENSATION FOR LAID-OFF WORKERS IN ALL STATES. UEC BENEFITS WERE FINANCED 100% BY THE FEDERAL GOVERNMENT.</p>
2009	<p>17 FEB 09 AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009 (ARRA) SIGNED INTO LAW.</p> <p>17 FEB 09 CONGRESS PASSED ANOTHER EXTENSION OF THE 2008 EUC THROUGH ARRA. EUC BENEFITS ARE FINANCED 100% BY THE FEDERAL GOVERNMENT.</p> <p>FEB 09 TANF NEON AND TANF RELATED MEDICAID HOUSEHOLD MEMBERS MAY BE ELIGIBLE FOR TRANSITIONAL MEDICAID (TR) FOR 12 MONTHS FOLLOWING THE LAST MONTH OF TANF NEON OR TANF RELATED MEDICAID ELIGIBILITY.</p> <p>16 MAR 09 ALL SNAP APPLICANT HOUSEHOLDS ARE CATEGORICALLY ELIGIBLE FOR BENEFITS WITH EXCEPTION OF PENDING TANF OR SSI APPLICANTS AND DENIED OR TERMINATED TANF OR SSI RECIPIENTS.</p> <p>01 APR 09 ARRA INCREASED THE MAXIMUM BENEFIT LEVEL OF ALL SNAP HOUSEHOLDS BY 13.6%.</p> <p>01 APR 09 ARRA CHANGED THE ABAWD POLICY LIMITING THE RECEIPT OF 3 MONTHS OF SNAP BENEFITS IN A 36-MONTH PERIOD NO LONGER IN EFFECT.</p> <p>01 APR 09 IN LIEU OF FACE-TO-FACE INTERVIEWS, CASEWORKERS MAY NOW CONDUCT INTERVIEWS, AT BOTH INITIAL APPLICATION AND RECERTIFICATION, BY TELEPHONE FOR ALL SNAP HOUSEHOLDS.</p> <p>01 APR 09 TANF HOUSEHOLDS WHO ARE TERMINATED FOR NON-COMPLIANCE WITH THEIR PRP WILL NO LONGER LOSE MEDICAID ELIGIBILITY FOR ANY HOUSEHOLD MEMBERS. THE 3 MONTH SIT-OUT PERIOD WILL NO LONGER BE IMPOSED AGAINST THE MEDICAID CASE FOR ANY SANCTIONS IMPOSED.</p> <p>01 APR 09 H.R.2, CHILDREN'S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT - OBRA POLICY WILL REMOVE THE REQUIREMENT FOR A CHILD TO CONTINUE TO LIVE IN THE SAME HOUSEHOLD AS THE MOTHER AND FOR THE MOTHER TO BE ELIGIBLE FOR MEDICAID IF STILL PREGNANT. ADDITIONALLY, A CHILD BORN TO A WOMAN WHO IS ELIGIBLE FOR MEDICAID ON THE DATE OF THE CHILD'S BIRTH IS DEEMED TO HAVE APPLIED AND BEEN FOUND ELIGIBLE FOR MEDICAID EFFECTIVE THE BIRTH MONTH AND REMAINS ELIGIBLE FOR ONE YEAR. CHANGES IN INCOME, HOUSEHOLD COMPOSITION, COOPERATION WITH OTHER PROGRAM REQUIREMENTS, INCLUDING REDETERMINATION AND CITIZENSHIP, WILL NOT AFFECT THE CHILD'S ELIGIBILITY.</p> <p>APR 09 WINNEMUCCA DISTRICT OFFICE CLOSED.</p> <p>01 JUN 09 NEVADA CHILD CARE SYSTEM (NCCS) IMPLEMENTED.</p> <p>JUN 09 RECESSION OFFICIALLY OVER BASED ON NATIONAL BUREAU OF ECONOMIC RESEARCH (NBER) REPORT.</p> <p>01 JUL 09 PROGRAM NAME CHANGED FOR NON-NEEDY CARETAKER TO "RELATIVE CAREGIVER".</p> <p>01 JUL 09 NEVADA'S MINIMUM WAGE INCREASES \$.70. MINIMUM WAGE WITH QUALIFIED HEALTH BENEFITS INCREASES TO \$6.55 PER HOUR. EMPLOYEES WITH NO HEALTH BENEFITS WILL EARN \$7.55 PER HOUR.</p> <p>24 JUL 09 FEDERAL MINIMUM WAGE RATE INCREASED FROM \$6.55 TO \$7.25 PER HOUR.</p> <p>06 NOV 09 THE PRESIDENT SIGNED THE WORKER, HOMEOWNERSHIP, AND BUSINESS ASSISTANCE ACT OF 2009 (THE WORKER ASSISTANCE ACT (P.L. 111-92)). THIS LAW EXPANDS THE 2008 EMERGENCY UNEMPLOYMENT COMPENSATION (EUC) PROGRAM. REFER TO FFIS ISSUE BRIEF 09-46 DATED NOVEMBER 24, 2009 FOR FULL DETAILS.</p> <p>NOV 09 SECTION 8 OF THE WORKER ASSISTANCE ACT REQUIRES THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) TO EXCLUDE THE \$25 WEEKLY INCREASE IN UIB BENEFITS APPROVED WITH ARRA EFFECTIVE NOVEMBER 2009.</p>
2010	<p>01 JAN 10 EFFECTIVE JANUARY 1, 2010 STATES ARE PROHIBITED FROM RECOVERING MEDICAID EXPENDITURES FOR MEDICARE PREMIUMS AND COST SHARING PAID UNDER MEDICARE BENEFICIARY PROGRAMS FROM THE ESTATES OF DECEASED MEDICAID RECIPIENTS. REF: MEDICARE IMPROVEMENT FOR PATIENTS AND PROVIDERS ACT OF 2008 (MIPPA).</p> <p>01 JAN 10 EFFECTIVE JANUARY 1, 2010 THE SOCIAL SECURITY ADMINISTRATION WILL BEGIN TRANSMITTING INFORMATION ON LOW INCOME SUBSIDY (LIS) APPLICATIONS TO STATE MEDICAID AGENCIES. AGENCIES MUST TREAT THE DATA SSA TRANSMITS AS THE START OF A MEDICARE BENEFICIARY APPLICATION. SLMB AND QI ELIGIBILITY MAY BE RETROACTIVE TO THE APPLICATION EFFECTIVE DATE. REF: MEDICARE IMPROVEMENT FOR PATIENTS AND PROVIDERS ACT OF 2008 (MIPPA).</p> <p>01 MAR 10 EFFECTIVE MARCH 1, 2010 AN ELIGIBILITY REDETERMINATION WILL NO LONGER BE REQUIRED FOR TANF CASH PROGRAMS AND ALL MEDICAID PROGRAMS, INCLUDING ALL MAABD CATEGORIES. THE NEW POLICY WILL REQUIRE AN ANNUAL ELIGIBILITY REVIEW ONLY.</p>

- 2010**
- 01 MAR 10 PROGRAM NAME CHANGED FOR NON-QUALIFIED/NON-CITIZEN TO "CITIZEN CHILDREN HOUSEHOLD".
 - 01 JUN 10 CHAP JOINT CUSTODY POLICY CHANGE - CHAP ELIGIBILITY WILL ONLY CONSIDER THE INCOME OF THE HOUSEHOLD MEMBER WHO SUBMITS THE APPLICATION ON BEHALF OF THE CHILD(REN). THE SECOND PARENTS INCOME AND HOUSEHOLD INFORMATION IS NO LONGER NEEDED TO DETERMINE ELIGIBILITY FOR CHAP.
 - 01 JUL 10 STATE MINIMUM WAGE INCREASE - MINIMUM WAGE WITH HEALTH BENEFITS IS \$7.25 PER HOUR. MINIMUM WAGE WITHOUT HEALTH BENEFITS IS \$8.25 PER HOUR.
 - 22 JUL 10 PRESIDENT SIGNED THE UNEMPLOYMENT COMPENSATION EXTENSION ACT OF 2010 THAT ALLOWS EMERGENCY UNEMPLOYMENT COMPENSATION (EUC) CLAIMS TO BE ESTABLISHED THROUGH NOVEMBER 30, 2010.
 - OCT 10 HIGHEST UNEMPLOYMENT RATE (14.0%) FOR NV (SEASONALLY ADJUSTED).
 - 17 DEC 10 PRESIDENT SIGNED THE TAX RELIEF, UNEMPLOYMENT INSURANCE REAUTHORIZATION, AND JOB CREATION ACT OF 2010 (P.L. 111-312). THE ACT EXTENDS FEDERAL UNEMPLOYMENT INSURANCE (UI) BENEFITS FOR 13 MONTHS. IT EXTENDS THE EMERGENCY UNEMPLOYMENT COMPENSATION (EUC) PROGRAM, AS WELL AS FULL FEDERAL FINANCING OF EUC AND THE EXTENDED BENEFITS (EB) PROGRAM. IT ALSO LENGTHENS THE LOOK-BACK PROVISION OF THE EB PROGRAM, WHICH WILL HELP STATES REMAIN ELIGIBLE FOR THE PROGRAM.
 - 29 DEC 10 APPLICATIONS MODERNIZATION AND PRODUCTIVITY SERVICES (AMPS) GOES LIVE.
 - DEC 10 UNIVERSAL OFFICE ESTABLISHED.
-
- 2011**
- 01 JUN 11 EFFECTIVE JUNE 1 APPLICATIONS FOR HIFA WAIVER PROGRAM (PS) WILL NO LONGER BE PROCESSED. AS OF NOVEMBER 1 THE PROGRAM WILL NO LONGER EXIST. APPLICATIONS APPROVED PRIOR TO JUNE 1 WILL MAINTAIN ELIGIBILITY THROUGH THE BIRTH OF THE BABY PLUS TWO MONTHS OF POST PARTUM.
 - JUL 11 NORTHERN PROFESSIONAL DEVELOPMENT CENTER CLOSED.
 - 01 SEP 11 EFFECTIVE SEPTEMBER 2011 THE KINSHIP CARE PROGRAM (COK) BENEFIT PAYMENTS WERE REDUCED 25%.
 - 01 OCT 11 EFFECTIVE OCTOBER 2011 ADULT LOAN PROGRAM RECIPIENTS ARE ELIGIBLE FOR 60 MONTHS OF LIFETIME BENEFITS IN TOTAL FROM ANY TANF-FUNDED PROGRAM FROM ANY JURISDICTION. IN ADDITION, AFTER RECEIVING 24 MONTHS OF BENEFITS EITHER CUMULATIVE OR CONSECUTIVELY FROM ANY JURISDICTION, REQUIRES A SIT-OUT PERIOD OF 12 CONSECUTIVE MONTHS FROM RECEIPT OF ANY TANF CASH PROGRAM BENEFITS IN NEVADA. THE LOAN PROGRAM SHALL NO LONGER BE AN OPTION FOR TWO PARENT HOUSEHOLDS UNLESS BOTH PARENTS HAVE A REASONABLE EXPECTATION OF A FUTURE SOURCE OF INCOME, INCLUDING A LUMP SUM PAYMENT. OFFICE MANAGERS MUST APPROVE ALL NEW LOAN APPLICATIONS.
 - 15 DEC 11 IRAQ WAR OFFICIALLY ENDS.
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- 2012**
- 31 MAR 12 PS AID CODE ENDS DUE TO PROGRAM CLOSURE.
-
- 2013**
- 01 APR 13 TANF CASH CHILD ONLY PROGRAM NAME CHANGED FOR "CITIZEN CHILDREN" TO "TANF CHILDREN", NO CHANGE TO AID CODE COA.
 - 01 APR 13 TANF CASH CHILD ONLY PROGRAM NAME CHANGED FOR "RELATIVE CARETAKER" TO "NON-NEEDY RELATIVE CAREGIVERS", NO CHANGE TO AID CODE CON.
 - 01 APR 13 TANF CASH CHILD ONLY PROGRAM NAME CHANGED FOR "KINSHIP" TO "KINSHIP CARE RELATIVE CAREGIVERS", NO CHANGE TO AID CODE COK.
 - 01 APR 13 TAX-PREFERRED EDUCATION ACCOUNTS INCLUDING QUALIFIED TUITION PROGRAMS DESCRIBED IN SECTION 529 OF THE INTERNAL REVENUE CODE OF 1986, COVERDELL EDUCATION SAVINGS ACCOUNTS UNDER SECTION 530 OF THE SAME CODE, THE NEVADA PREPAID TUITION PROGRAM AND THE UPROMIS COLLEGE FUND 529 PLAN ARE EXEMPT FOR TANF CASH RESOURCES.
 - 01 APR 13 IN AN EFFORT TO SIMPLIFY AND STREAMLINE THE PROCESS OF DETERMINING TANF CASH ELIGIBILITY A CLIENT STATEMENT (AKA SELF ATTESTATION) AS THE VERIFICATION SOURCE FOR RESOURCES WILL BE ACCEPTED.
 - 01 JUN 13 FOR ALL FMC AND CHAP APPLICATIONS PROCESSED ON OR AFTER JUNE 1, 2013 CLIENT STATEMENT CAN BE ACCEPTED AS THE DOCUMENTED VERIFICATION SOURCE FOR THE FOLLOWING ELIGIBILITY FACTORS: RESIDENCY, HOUSEHOLD COMPOSITION, PREGNANCY & RESOURCES. THERE IS NO CHANGE TO TANF CASH, MAABD & SNAP PROGRAMS.
 - 30 JUN 13 RENO DISTRICT OFFICE AT KINGS ROW CLOSED.
 - 01 JUL 13 NEW RENO DISTRICT OFFICE OPENS AT 4055 SOUTH VIRGINIA ST.
 - 01 JUL 13 NEW SPARKS DISTRICT OFFICE OPENS AT 630 GREENBRAE DRIVE.
 - 01 OCT 13 AFFORDABLE HEALTH CARE ACT STARTS. MANDATORY CASELOAD STARTS 01 OCT AND OPTIONAL CASELOAD STARTS JANUARY 2014.
 - 01 NOV 13 SNAP BENEFIT PAYMENTS THAT WERE INCREASED DUE TO ARRA IN APRIL 2009 HAVE BEEN REDUCED.
-
- 2014**
- JAN 14 ACA OPTIONAL CASELOAD STARTS.
 - FEB 14 LAS VEGAS SPRING MOUNTAIN OFFICE OPENED (OFFICE CODE - SM).
 - MAR 14 LAS VEGAS CRAIG ROAD OFFICE OPENED (OFFICE CODE - CR).
 - MAY 14 LAS VEGAS CHANDLER (SOUTHERN ADMIN OFFICE) OPENED (OFFICE CODE - AO).
 - JUN 14 SNAP AUTHORIZED CASES NEW PEAK (196,297).
 - JUN 14 SNAP PARTICIPATING CASES NEW PEAK (194,082).
 - JUN 14 SNAP PARTICIPATING PERSONS NEW PEAK (391,816).
 - JUN 14 SNAP DOLLAR VALUE NEW PEAK (\$45,379,450).
 - JUN 14 NV'S UNEMPLOYMENT RATE AT 7.7% (SEASONALLY ADJUSTED).

Nevada State Division of Welfare and Supportive Services Aid Code Descriptions (Past & Present) as of 30 June 2014

AID CODE	DESCRIPTION
AD1	ADULT DISABLED AGED (PUBLIC LAW)
AD3	ADULT DISABLED BLIND (PUBLIC LAW)
AD5	ADULT DISABLED OBRA BABY
AD9	ADULT DISABLED (PUBLIC LAW)
AF	TANF CASH 1 PARENT FAMILY (ENDED SEP 07)
AF5	TANF CASH 1 PARENT FAMILY OBRA BABY (MED ONLY) (ENDED SEP 07)
AI	TANF CASH 1 OR 2 PARENT INCAPACITY (ENDED SEP 07)
AI5	TANF CASH 1 OR 2 PARENT INCAPACITY OBRA BABY (MED ONLY) (ENDED SEP 07)
ALL	HOME & COMMUNITY BASED WAIVER AGED (ALF). (ASSISTED LIVING FACILITY). CLARK COUNTY ONLY. (STARTED JUL 06)
AM	OTHER MAGI MED, PARENTS & CARETAKERS (PREVIOUSLY TANF RELATED MEDICAID)
AM1	ACA MAGI MED, EXPANDED PARENTS & CARETAKERS (ACA OPTIONAL - STARTED JANUARY 2014)
AM5	OBRA BABY
AO	AGED OUT OF FOSTER CARE MEDICAL ONLY (STARTED JUL 05)
AO5	AGED OUT OF FOSTER CARE MEDICAL ONLY OBRA BABY (STARTED JUL 05)
CA	ACA MAGI MED, CHILDLESS ADULT (19-64) (ACA OPTIONAL - STARTED JANUARY 2014)
CA5	TANF CASH CHILD ONLY NON-QUAL NON-CITIZEN OBRA BABY (MED ONLY) (ENDED SEP 07)
CH	CHAP, POVERTY LEVEL CHILDREN & PREGNANT WOMEN
CH1	ACA MAGI MED, CHAP EXPANDED CHILDREN'S GROUP (6-18) (ACA MANDATORY - STARTED OCTOBER 2013)
CH5	CHAP OBRA BABY
CK5	TANF CASH CHILD ONLY KINSHIP OBRA BABY (MED ONLY) (ENDED SEP 07)
CM1	COUNTY MATCH AGED
CM3	COUNTY MATCH BLIND
CM5	COUNTY MATCH OBRA BABY
CM9	COUNTY MATCH DISABLED
CN5	TANF CASH CHILD ONLY NON-NEEDY CARETAKER OBRA BABY (MED ONLY) (ENDED SEP 07)
COA	TANF CASH CHILD ONLY CITIZEN CHILDREN HOUSEHOLDS (NAME CHANGED FROM NON-QUAL NON-CITIZEN MARCH 2010)
COF	TANF CASH CHILD ONLY FAMILY PRESERVATION PLAN. (STARTED JUL 01 & TRANSFERRED TO MHDS EFFECTIVE 01 JUL 2005)
COK	TANF CASH CHILD ONLY KINSHIP (STARTED OCT 01)
CON	TANF CASH CHILD ONLY RELATIVE CAREGIVER (NAME CHANGED FROM NON-NEEDY CARETAKER PRIOR TO JULY 2010)
COS	TANF CASH CHILD ONLY SSI
CS5	TANF CASH CHILD ONLY SSI OBRA BABY (MED ONLY) (ENDED SEP 07)
EM1	EMERGENCY MEDICAL AGED (NON-QUAL NON-CITIZEN)
EM2	ACA MAGI MED, EMERGENCY MED EXPANDED MEDICAL ADULT GROUP (ACA OPTIONAL - STARTED JANUARY 2014)
EM3	EMERGENCY MEDICAL BLIND (NON-QUAL NON-CITIZEN)
EM4	OTHER MAGI MED, EMERGENCY MED
EM5	OBRA BABY (U.S. CITIZEN)
EM8	ACA MAGI MED, EMERGENCY MED EXPANDED CHILDREN'S GROUP (ACA MANDATORY - STARTED OCTOBER 2013)
EM9	EMERGENCY MEDICAL DISABLED (NON-QUAL NON-CITIZEN)
GC1	GROUP CARE AGED
GC3	GROUP CARE BLIND
GC9	GROUP CARE DISABLED
HC1	HOME & COMMUNITY BASED WAIVER AGED (CHIP)
HD1	HOME & COMMUNITY BASED WAIVER AGED (DWIP) (STARTED JAN 06)
HD3	HOME & COMMUNITY BASED WAIVER BLIND (DWIP)
HD5	HOME & COMMUNITY BASED WAIVER OBRA BABY
HD9	HOME & COMMUNITY BASED WAIVER DISABLED (DWIP)
HG1	HOME & COMM BASED WAIVER AGED (GROUP CARE)
HG3	HOME & COMM BASED WAIVER BLIND (GROUP CARE)
HG5	HOME & COMM BASED WAIVER OBRA BABY
HG9	HOME & COMMUNITY BASED WAIVER DISABLED (GROUP CARE) (ENDED OCT 2005)
HK	TANF CASH & TANF MED HURRICANE KATRINA (SEP 05 - 31 DEC 05 TANF CASH; SEP 05 - 31 MAR 06 TANF MED)
HK5	TANF CASH HURRICANE KATRINA OBRA BABY (SEP 05 - AUG 06)
HR1	HOME & COMM BASED WAIVER AGED (RETARDED)
HR3	HOME & COMMUNITY BASED WAIVER BLIND (RETARDED)
HR5	HOME & COMMUNITY BASED WAIVER OBRA BABY
HR9	HOME & COMMUNITY BASED WAIVER DISABLED (RETARDED)
IN1	INDEPENDENT LIVING AGED (SSI)
IN3	INDEPENDENT LIVING BLIND (SSI)
IN5	INDEPENDENT LIVING OBRA BABY
IN9	INDEPENDENT LIVING DISABLED (SSI)
KB3	KATIE BECKETT BLIND
KB9	KATIE BECKETT DISABLED
MCB	CERVICAL/BREAST CANCER (STARTED JUL 02)

Nevada State Division of Welfare and Supportive Services Aid Code Descriptions (Past & Present) as of 30 June 2014

AID CODE	DESCRIPTION
NCU	NV CHECK-UP (TRANSFERRED TO DWSS FROM DHCFP EFFECTIVE JULY 2013)
NO9	SSI NO7 - DISABLED (ENDED JUN 05)
PC	PRE-CASH MEDICAID (ENDED SEP 07)
PC5	PRE-CASH MEDICAID OBRA BABY (ENDED SEP 07)
PK1	PICKLE AGED (PUBLIC LAW)
PK3	PICKLE BLIND (PUBLIC LAW)
PK5	PICKLE OBRA BABY
PK9	PICKLE DISABLED (PUBLIC LAW)
PM	OTHER MAGI MED, POST MEDICAL (EXCESS CHILD SUPPORT)
PM5	OBRA BABY
PR1	PRE-MED AGED
PR3	PRE-MED BLIND
PR9	PRE-MED DISABLED
PS	PREGNANT WOMEN WITH INCOME BETWEEN 133% AND 185% OF POVERTY LEVEL (HIFA - NOT TITLE XIX). (STARTED DEC 06; ENDE
QD3	QUALIFIED DISABLED WORKING INDIVIDUAL BLIND
QD9	QUALIFIED DISABLED WORKING INDIVIDUAL DISABLED
QI1	SLMB QUALIFIED INDIVIDUAL 1 AGED
QI3	SLMB QUALIFIED INDIVIDUAL 1 BLIND
QI9	SLMB QUALIFIED INDIVIDUAL 1 DISABLED
QJ1	SLMB QUALIFIED INDIVIDUAL 2 AGED (ENDED DEC 2002)
QJ3	SLMB QUALIFIED INDIVIDUAL 2 BLIND (ENDED DEC 2002)
QJ9	SLMB QUALIFIED INDIVIDUAL 2 DISABLED (ENDED DEC 2002)
QM1	QUALIFIED MEDICARE BENEFICIARY AGED
QM3	QUALIFIED MEDICARE BENEFICIARY BLIND
QM5	QUALIFIED MEDICARE BENEFICIARY OBRA BABY
QM9	QUALIFIED MEDICARE BENEFICIARY DISABLED
SG	TANF CASH SELF SUFFICIENCY GRANT PROGRAM (STARTED OCT 07)
SI1	SPECIAL INCOME LEVEL AGED
SI3	SPECIAL INCOME LEVEL BLIND
SI5	SPECIAL INCOME LEVEL OBRA BABY
SI9	SPECIAL INCOME LEVEL DISABLED
SL1	SPECIAL LOW-INCOME MEDICARE BENEFICIARY AGED
SL3	SPECIAL LOW-INCOME MEDICARE BENEFICIARY BLIND
SL9	SPECIAL LOW-INCOME MEDICARE BENEFICIARY DISABLED
SN	OTHER MAGI MED, SNEEDE VS. KIZER
SN5	OBRA BABY
SS1	SSI AGED (INSTITUTIONAL)
SS3	SSI BLIND (INSTITUTIONAL)
SS9	SSI DISABLED (INSTITUTIONAL)
SU1	SUSPENDED SSI AGED (PUBLIC LAW)
SU3	SUSPENDED SSI BLIND (PUBLIC LAW)
SU5	SUSPENDED SSI OBRA BABY
SU9	SUSPENDED SSI DISABLED (PUBLIC LAW)
TL	TANF CASH LOAN PROGRAM (STARTED OCT 07)
TN	TANF CASH 1 PARENT FAMILY (STARTED OCT 07)
TN1	TANF CASH 1 OR 2 PARENT INCAPACITY (STARTED OCT 07)
TN2	TANF CASH 2 PARENT FAMILY (STARTED OCT 07)
TP	TANF CASH TEMPORARY PROGRAM (STARTED OCT 07). ENDED 30 SEP 08 AS ORIGINALLY IMPLEMENTED. REMAINS VALID AID COD
TR	OTHER MAGI MED, TRANSITIONAL MEDICAL
TR5	OBRA BABY
UP	TANF CASH 2 PARENT FAMILY (ENDED SEP 07)
UP5	TANF CASH 2 PARENT FAMILY OBRA BABY (ENDED SEP 07)
WB1	WOULD BE ELIGIBLE SSI IF NOT IN LONG TERM CARE AGED
WB3	WOULD BE ELIGIBLE SSI IF NOT IN LONG TERM CARE BLIND
WB9	WOULD BE ELIGIBLE SSI IF NOT IN LONG TERM CARE DISABLED
WS1	WIDOW/WIDOWER/SURVIVING DIVORCED SPOUSE AGED (PUBLIC LAW)
WS3	WIDOW/WIDOWER/SURVIVING DIVORCED SPOUSE BLIND (PUBLIC LAW)
WS9	WIDOW/WIDOWER/SURVIVING DIVORCED SPOUSE DISABLED (PUBLIC LAW)
WW1	WIDOW/WIDOWER AGED (PUBLIC LAW)
WW3	WIDOW/WIDOWER BLIND (PUBLIC LAW)
WW9	WIDOW/WIDOWER DISABLED (PUBLIC LAW)
WY9	HEALTH INSURANCE WORK ADVANCEMENT PROGRAM (HIWA) (STARTED JUL 04)

	CHANGE OVER TIME: PERCENT CHANGE YEAR OVER YEAR												
	2007-2008	2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014	
	%chg	FY08	%chg	FY09	%chg	FY10	%chg	FY11	%chg	FY12	%chg	FY13	%chg
TANF Single Parent Grants	17.8%	11,082	1.0%	11,196	29.9%	14,548	3.5%	15,062	-5.3%	14,263	0.0%	14,268	0.0%
TANF Two Parent Incap Grants	0.3%	154	-6.2%	145	45.0%	210	36.2%	286	22.1%	349	-10.1%	313	313
TANF Two Parent Grants	47.0%	2,115	26.5%	2,675	54.3%	4,127	10.6%	4,566	-6.4%	4,275	1.6%	4,345	4,345
TANF Child Only Non-Needy Relative Caregivers Grants	-10.6%	2,562	-6.4%	2,397	-2.8%	2,330	2.1%	2,380	0.5%	2,391	2.6%	2,454	2,454
TANF Child Only Kinship Care Relative Caregivers Grants	9.0%	500	2.0%	510	6.1%	541	-5.0%	514	-9.5%	465	-12.2%	408	408
TANF Child Only TANF Children Grants	10.9%	2,088	43.0%	2,986	54.7%	4,621	17.4%	5,426	5.4%	5,719	-5.2%	5,421	5,421
TANF Child Only SSI Household Grants	-1.9%	1,479	2.6%	1,517	1.7%	1,544	1.6%	1,569	3.2%	1,618	0.3%	1,623	1,623
TANF Temporary Program Grants	N/A	520	-80.2%	103	13.8%	1,163	-9.7%	1,050	-76.1%	251	-98.3%	4	4
TANF Loan Program Grants	N/A	858	19.0%	1,022	-88.9%	1	-14.3%	1	-100.0%	0	0.0%	0	0
TANF Self-Sufficiency Grants	N/A	12	-56.7%	5									
TOTAL TANF GRANTS	20.6%	21,369	5.6%	22,556	28.9%	29,084	6.1%	30,853	-4.9%	29,331	-1.7%	28,837	28,837
TANF Related Med	28.3%	80,813	11.6%	90,177	30.3%	117,486	14.2%	134,186	4.3%	139,930	3.5%	144,885	144,885
TOTAL TANF	0.1%	80,813	11.6%	90,177	30.3%	117,486	14.2%	134,186	4.3%	139,930	3.5%	144,885	144,885
CHAP	11.9%	32,075	34.9%	43,255	44.0%	62,272	24.9%	77,786	9.6%	85,264	2.4%	87,309	87,309
AGED	2.8%	11,120	2.0%	11,347	-11.6%	10,030	3.3%	10,357	1.8%	10,546	3.4%	10,902	10,902
BLIND	-1.3%	371	3.7%	385	-13.5%	333	2.1%	340	3.7%	352	-2.7%	343	343
DISABLED	3.5%	26,360	4.0%	27,415	0.5%	27,561	8.2%	29,829	5.9%	31,583	6.3%	33,558	33,558
HCBW (DWSS)						3,753	6.0%	3,977	1.0%	4,016	-0.2%	4,007	4,007
HCBW (DHCFP)						3,687	7.9%	3,977	1.0%	4,016	-0.2%	4,007	4,007
QMB	7.1%	7,594	11.0%	8,431	7.6%	9,070	16.2%	10,537	19.2%	12,559	7.5%	13,506	13,506
SLMB	6.9%	6,599	7.1%	7,071	14.6%	8,105	18.4%	9,600	15.3%	11,066	7.2%	11,862	11,862
HIWA	30.6%	28	-39.6%	17	-26.6%	12	-15.4%	11	-20.6%	8	-24.0%	6	6
COUNTY MATCH	-3.4%	1,419	0.5%	1,425	-2.0%	1,397	-1.7%	1,373	10.8%	1,521	-0.5%	1,513	1,513
TOTAL TANF & MAABD (DWSS HCBW ONLY)	3.5%	166,379	13.9%	189,522	26.6%	240,019	15.8%	277,985	6.8%	296,845	3.7%	307,893	307,893
CHILD WELFARE	7.1%	7,492	0.6%	7,534	0.3%	7,556	-1.4%	7,453	-1.9%	7,314	13.7%	8,314	8,314
TOTAL MEDICAID (DWSS)**	3.6%	173,871	13.3%	197,056	25.6%	247,575	15.3%	285,448	6.6%	304,160	4.0%	316,206	316,206
TOTAL MEDICAID (DHCFP)**						247,509	15.3%	285,448	6.6%	304,160	4.0%	316,206	316,206
Supplemental Nutrition Assistance Program (SNAP)	15.0%	137,589	30.7%	179,790	44.8%	260,417	24.1%	323,290	8.9%	352,156	1.8%	358,592	358,592
CHILD CARE DEVELOPMENT FUND (with Retro)	6.8%	11,511	-19.9%	9,215	-21.3%	7,251	19.2%	8,640	-15.4%	7,312	-29.4%	5,162	5,162
NV Check Up (with Retro)										21,366	-0.7%	21,216	21,216

1. Retros from MPP Report VL80737A 1 year after the FY ends; retros FY13 are estimates. TANF Med and SLMB retro starts in FY10.
 2. Child Welfare is Title XIX only.
 3. TANF Temporary Program Loan Program and Self-Sufficiency Program began October 2007.
 4. TANF Temporary Program ends October 2008. Will only be used for emergency situations (natural disasters, etc).
 **Beginning October 2007, all TANF Cash Program recipients are not automatically eligible for Medicaid and have been deducted from the Total Medicaid line. TANF Cash recipients have a dual TANF Med aid code.
 ***Beginning Fiscal Year 2010, HCBW has been removed from Aged, Blind & Disabled and is tracked separately. Both DWSS & DHCFP are shown for comparison purposes. Total Medicaid will be listed for both DWSS & DHCFP totals.
 NOTE: DHCFP TOTAL MEDICAID INCLUDES HCBW PROVIDED BY DHCFP AND MAY HAVE UP TO A 2-3 MONTH LAG TIME.
 NOTE: DWSS TOTAL MEDICAID IS FROM AFR56A MONTHLY AID CODE REPORT FOR THE CURRENT MONTH.
 NOTE: NV Check-Up transferred to DWSS from DHCFP effective with SFY 2014 (July 2013). Previous years provided for informational purposes only.

CHANGE OVER TIME: PERCENT CHANGE YEAR OVER YEAR

	2013-2014 %chg	FY14P
TANF Single Parent Grants	17.8%	16,806
TANF Two Parent Incap Grants	9.1%	342
TANF Two Parent Grants	25.8%	5,466
TANF Child Only Non-Needy Relative Caregivers Grants	6.0%	2,602
TANF Child Only Kinship Care Relative Caregivers Grants	-7.1%	379
TANF Child Only TANF Children Grants	-8.8%	4,941
TANF Child Only SSI Household Grants	4.9%	1,703
TANF Temporary Program Grants		
TANF Loan Program Grants	-100.0%	0
TANF Self-Sufficiency Grants	250.0%	1
TOTAL TANF GRANTS	11.8%	32,239
TANF Related Med (ACA Starts October 2013)	14.4%	165,780
TOTAL TANF	14.4%	165,780
CHAP	56.7%	136,833
AGED	2.1%	11,136
BLIND	1.3%	347
DISABLED	8.0%	36,229
HCBW (DWSS)	5.6%	4,232
HCBW (DHCFP)	2.2%	4,094
QMB	11.2%	15,013
SLMB	2.2%	12,127
HIWA	-38.2%	4
COUNTY MATCH	-2.6%	1,473
TOTAL TANF & MAABD	24.5%	383,174
CHILD WELFARE	10.0%	9,141
TOTAL MEDICAID (DWSS)**	24.1%	392,315
TOTAL MEDICAID (DHCFP)**	24.0%	392,177
Supplemental Nutrition Assistance Program (SNAP)	-99.3%	2,516
CHILD CARE DEVELOPMENT FUND (with Retro)	-4.9%	4,999
NY Check Up (with Retro)	2.6%	21,771

Notes:
 1. Retros from MPP Report WL80757A 1 year after the FY ends; retros for FY14 are estimates.
 2. Child Welfare is Title XIX only.
 3. TANF Temporary Program ends October 2008. Will only be used for emergency situations (natural disasters, etc).
 **HCBW has been removed from Aged, Blind & Disabled and is tracked separately. Both DWSS & DHCFP are shown for comparison purposes. Total Medicaid will be listed for both DWSS & DHCFP totals.
 NOTE: DHCFP TOTAL MEDICAID INCLUDES HCBW PROVIDED BY DHCFP AND MAY HAVE UP TO A 2-3 MONTH LAG TIME.
 NOTE: DWSS TOTAL MEDICAID IS FROM APR566 MONTHLY AID CODE REPORT FOR THE CURRENT MONTH.
 NOTE: NY Check Up transferred to DWSS from DHCFP effective with SFY 2014 (July 2013). Previous years provided for informational purposes only.

FY93 - FY99 MEDICAID ELIGIBLES: ANNUAL AVERAGE MONTHLY TOTALS

MEDICAID ELIGIBLE RECIPIENT CATEGORY	FY93 AVG		FY94 AVG		FY95 AVG		FY96		FY97		FY98		FY99	
	CURR ELIG	RETRO ELIG	CURR ELIG	RETRO ELIG	CURR ELIG	RETRO ELIG	CURR ELIG	RETRO ELIG						
TANF 1 Parent Grants	32945	32945	35670	35670	38939	38939	38010	38010	30114	30114	26595	26595	20964	20964
TANF RELATED MED CHAP	3257	3257	3747	3747	4362	4362	5440	5440	5206	5206	5559	5559	8733	8733
	10811	12416	12980	15019	15501	18071	18389	20946	21007	23716	21812	24938	24123	27213
TOT TANF 1 Prnt	47,013		52,397		58,802		61,839		56,327		53,966		53,820	
TANF 2 Parent Grnts.	1410	1410	1673	1673	1634	1634	1210	1210	762	762	1254	1254	936	936
TANF-UP MED 42/7	203	203	271	271	301	301	205	205	119	119	20	20	0	0
TANF Two Parent Rel Med	594	594	1291	1291	2129	2129	2753	2753	3007	3007	3340	3340	4072	4072
TOT TANF 2 Prnt.	2,207		3,235		4,064		4,168		3,888		4,613		5,007	
TOT TANF GRANTS	34355	34355	37343	37343	40573	40573	39220	39220	30876	30876	27848	27848	21900	21900
TOT TANF MED	4054	4054	5309	5309	6792	6792	8398	8398	8332	8332	8919	8919	12805	12805
CHAP	10811	12416	12980	15019	15501	18071	18389	20946	21007	23716	21812	24938	24123	27213
TOTAL TANF	49,220		55,632		62,866		66,007		60,215		58,579		58,827	
AGED	6182	6604	6718	7092	7179	7567	7533	7937	7663	8031	7708	8137	7893	8297
BLIND	355	373	365	381	376	389	374	386	375	388	377	393	389	403
DISABLED	8291	9658	9632	11177	11284	12982	12864	14591	13606	15120	13978	15703	15026	16775
QMB	2204	2308	2521	2648	3014	3226	3523	3742	3966	4169	4118	4347	4561	4632
SLMB			177	177	419	419	949	949	1278	1278	1545	1545	1988	1988
COUNTY MATCH	623	761	776	926	910	1057	842	1007	912	1098	899	1072	953	1145
TOT TANF & MAABD	66,875	70,529	75,821	80,072	86,048	91,076	92,092	97,176	88,015	93,008	87,204	92,902	89,637	95,157
REFUGEE	89	106	62	93	---	---	---	---	---	---	---	---	---	---
CHILD WELFARE	1474	2087	1425	2174	2481	2722	2716	2842	2744	2899	3381	3365	3612	3466
TOTAL MEDICAID	68,438	72,722	77,308	82,339	88,529	93,798	94,808	100,018	90,759	95,907	90,585	96,267	93,249	98,623

NOTES: 1. Totals may not sum due to rounding. Retros are from system WL80737A one year after the FY ends. TANF Cash and TANF MED have no retro. AFDC/TANF has no retro. NSWD Refugee program ended 6/30/94.

FY00 - FY05 MEDICAID ELIGIBLES: ANNUAL AVERAGE MONTHLY TOTALS

MEDICAID ELIGIBLE RECIPIENT CATEGORY	FY00		FY01		FY02		FY03		FY04		FY05	
	CURR ELIG	RETRO ELIG	CURR ELIG	RETRO ELIG	CURR ELIG	RETRO ELIG	CURR ELIG	RETRO ELIG	CURR ELIG	RETRO ELIG	CURR ELIG	RETRO ELIG
TANF 1 PARENT GRANTS	15,830	15,830	16,867	16,867	19,654	19,654	19,501	19,501	15,010	15,010	12,442	12,442
TANF 2 PARENT GRANTS	831	831	1,256	1,256	390	390	329	329	215	215	221	221
(UP) TANF 2 PARENT GRANTS			3,211	3,211	3,489	3,489	3,489	3,489	2,340	2,340	1,912	1,912
(CO) TANF NNCT GRANTS			3,869	3,869	4,279	4,279	4,279	4,279	3,551	3,551	3,208	3,208
(COK) TANF KINSHIP GRANTS			**55	**55	**55	**55	285	285	281	281	306	306
(COA) TANF NONQUAL/NONCIT GRANTS			1,018	1,018	1,018	1,018	1,657	1,657	1,808	1,808	1,896	1,896
(COS) TANF SSI HOUSEHOLD GRANTS			526	526	1,381	1,381	1,381	1,381	1,639	1,639	1,651	1,651
(COF) TANF FPP GRANTS*			112	112	112	112	112	112	112	112	112	112
TOTAL TANF GRANTS	16,661	16,661	18,123	18,123	28,809	28,809	31,034	31,034	24,956	24,956	21,748	21,748
TANF RELATED MED	18,810	18,810	32,140	32,140	45,290	45,290	58,692	58,692	67,929	67,929	70,687	70,687
CHAP	24,222	25,304	21,177	25,501	19,258	23,672	22,211	25,275	23,154	26,650	23,659	26,752
TOTAL TANF RELATED MED	43,032	44,114	53,317	57,641	64,548	68,962	80,903	83,967	91,083	94,579	94,347	97,439
TOTAL TANF GRANTS	16,661	16,661	18,123	18,123	28,809	28,809	31,034	31,034	24,956	24,956	21,748	21,748
TOTAL TANF MED	43,032	44,114	53,317	57,641	64,548	68,962	80,903	83,967	91,083	94,579	94,347	97,439
TOTAL TANF	59,693	60,775	71,440	75,764	93,357	97,771	111,937	115,000	116,039	119,535	116,094	119,187
AGED	8,152	8,558	8,217	8,598	8,598	8,919	9,014	9,291	9,462	9,822	9,861	10,125
BLIND	345	330	305	366	305	374	325	331	339	351	344	353
DISABLED	15,983	17,707	17,465	19,352	19,138	21,048	20,602	22,399	21,926	24,354	23,071	24,748
QMB	5,001	4,950	5,223	5,214	5,577	5,566	6,532	6,437	7,558	7,710	7,403	7,410
SLMB	2,326	2,326	3,208	3,208	3,795	3,795	4,505	4,505	4,973	4,973	5,273	5,273
HIWA											7	10
COUNTY MATCH	997	1,198	1,087	1,309	1,161	1,340	1,201	1,373	1,180	1,396	1,229	1,409
TOTAL MAABD	32,804	35,069	35,505	38,047	38,573	41,042	42,179	44,336	45,439	48,606	47,188	49,328
TOTAL TANF & MAABD	92,497	95,845	106,945	113,811	131,931	138,814	154,116	159,336	161,477	168,141	163,282	168,515
CHILD WELFARE	3,854	3,567	4,009	3,832	4,295	4,302	4,985	4,945	5,088	5,052	6,271	5,887
TOTAL MEDICAID	96,352	99,412	110,954	117,643	136,114	143,003	158,989	164,168	166,453	173,081	169,441	174,289

NOTE: Totals may not sum due to rounding. Retros are from WL80737A one year after the FY ends. TANF Cash and TANF MED have no retro.
 ** FY02 Kinship average is based on a 6-mo average, since the program started mid-fiscal year. A 12-month average is used for this spreadsheet for Total TANF. Therefore, Total TANF will not equal the sum of each program since Kinship is listed at a higher 6-month average.
 FPP totals are deducted from "Total Medicaid" figure because they are included in the "Disabled" category.

HIWA program starts FY05.

FY06, FY07, FY08, FY09, FY10 & FY11 MEDICAID ELIGIBLES

MEDICAID ELIGIBLE RECIPIENT CATEGORY	FY06		FY07		FY08		FY09		FY10		FY11	
	CURRENT ELIG	RETRO ELIG										
(AF) TANF1 PARENT GRANTS	10,818	10,818	9,408	9,408								
(AD) TANF 2 PARENT INCAP GRANTS	194	194	154	154								
(UD) TANF 2 PARENT GRANTS	1,642	1,642	1,438	1,438								
(CON) TANF NNCT GRANTS	3,077	3,077	2,864	2,864								
(COK) TANF KINSHIP GRANTS	387	387	459	459								
(COA) TANF NONQUAL/NONCIT GRANTS	2,006	2,006	1,882	1,882								
(COS) TANF SSI/HOUSEHOLD GRANTS	1,567	1,567	1,508	1,508								
(HS) TANF HURRICANE KATRINA GRANTS*	566	566										
TOTAL TANF GRANTS	19,880	19,880	17,712	17,712								
TANF RELATED MED	67,675	67,675	63,008	63,008	80,813	80,813	90,177	90,177	108,951	108,951	117,486	134,186
CHAP	24,701	28,035	25,470	28,674	28,591	31,568	39,202	43,255	57,279	62,272	73,560	77,786
TOTAL TANF RELATED MED	92,376	95,710	88,478	91,682	109,404	112,381	129,380	133,432	166,230	179,758	200,525	211,972
TOTAL TANF GRANTS	19,880	19,880	17,712	17,712	4,934	4,934						
TOTAL TANF MED	92,376	95,710	88,478	91,682								
TOTAL TANF	112,256	115,590	106,190	109,395								
AGED	10,240	10,445	10,583	10,813	10,996	11,120	11,165	11,347	9,801	10,030	10,163	10,357
BLIND	354	361	370	376	366	371	381	385	327	333	356	340
DISABLED	23,430	24,922	23,847	25,468	24,862	26,360	25,847	27,415	25,620	27,561	27,850	29,829
HCBW (DWSS)									3,696	3,753	3,931	3,977
HCBW (DHCFP)									3,687	3,687	3,860	3,977
QMB	6,927	6,895	7,129	7,088	7,674	7,594	8,507	8,431	9,123	9,070	10,682	10,537
SLMB	5,630	5,630	6,171	6,171	6,599	6,599	7,071	7,071	7,819	8,105	9,366	9,600
HWVA	21	23	20	21	25	28	16	17	13	12	10	11
COUNTY MATCH	1,271	1,483	1,285	1,468	1,261	1,419	1,278	1,425	1,214	1,397	1,212	1,373
TOTAL MAABD	47,874	49,759	49,405	51,405	51,782	53,491	54,366	56,091	57,613	60,262	63,551	66,025
TOTAL TANF & MAABD	160,130	165,350	155,595	160,800	161,186	165,872	183,645	189,522	223,843	240,019	263,876	277,995
CHILD WELFARE	7,301	6,950	7,180	6,996	7,790	7,492	7,914	7,534	8,080	7,556	8,395	7,453
TOTAL MEDICAID	167,431	172,300	162,775	167,796	173,909	178,298	191,559	197,056	231,923	247,576	272,271	285,448
TOTAL MEDICAID (DHCFP)**									231,914	247,510	272,200	285,448

NOTE: Totals may not sum due to rounding. Retros are from WL80737A one year after the FY ends. TANF Cash and TANF MED have no retro.

*Hurricane Katrina Aid Code HK started Sep 05 and ended Dec 31, 2005 (HK TANF) and Feb 2006 (HK Med-Only).

**Starting October 2007, all TANF Cash Program recipients are not automatically eligible for Medicaid. TANF Cash recipients have a dual TANF Med aid code.

FY08YTD column includes July-September 2007 average TANF grants as they were Med eligible during those months.

**SOURCE NOTE: DHCFP TOTAL MEDICAID INCLUDES HCBW PROVIDED BY DHCFP.

**SOURCE NOTE: DWSS TOTAL MEDICAID HCBW IS FROM AFR66A MONTHLY AID CODE REPORT FOR THE CURRENT MONTH (EFFECTIVE FY 10).

NOTE: Totals may not sum due to rounding. Retros are from WL80737A one year after the FY ends. TANF MED retros starts FY 10.

FY12, FY13 & FY14 MEDICAID ELIGIBLES
ANNUAL AVERAGE MONTHLY TOTALS

MEDICAID ELIGIBLE RECIPIENT CATEGORY	FY12		FY13		FY14	
	CURRENT ELIG	RETRO ELIG	CURRENT ELIG	RETRO ELIG	PROJ ELIG	PROJ RETRO
TANF RELATED MED CHAP	132,157 81,097	139,930 85,264	135,823 82,448	144,885 87,309	157,505 129,699	165,780 136,833
TOTAL TANF RELATED MED	213,254	225,194	218,271	232,194	287,204	302,613
TOTAL TANF GRANTS TOTAL TANF MED						
TOTAL TANF						
AGED	10,398	10,546	10,657	10,902	10,974	11,136
BLIND	344	352	336	343	338	347
DISABLED	29,970	31,583	31,826	33,558	34,291	36,229
HCBW (DWSS)	3,993	4,016	3,960	4,007	4,186	4,232
HCBW (DHCFP)	3,904	4,016	3,905	4,007	4,103	4,103
QMB	12,674	12,559	13,550	13,506	15,013	15,013
SLMB	10,756	11,066	11,471	11,862	11,820	12,127
HIWA	8	8	6	6	4	4
COUNTY MATCH	1,353	1,521	1,299	1,513	1,299	1,473
TOTAL MAABD (DWSS HCBW ONLY)	69,496	71,651	73,105	75,698	77,925	80,562
TOTAL TANF & MAABD (DWSS)	282,750	296,845	291,376	307,893	365,128	383,174
CHILD WELFARE	7,190	7,314	8,172	8,314	8,987	9,141
TOTAL MEDICAID (DWSS)*	289,940	304,160	299,548	316,206	374,115	392,315
TOTAL MEDICAID (DHCFP)**	289,852	304,160	299,493	316,206	374,032	392,186

**SOURCE NOTE: DHCFP TOTAL MEDICAID INCLUDES HCBW PROVIDED BY DHCFP.

*SOURCE NOTE: DWSS TOTAL MEDICAID HCBW IS FROM AFR56A MONTHLY AID CODE REPORT FOR THE CURRENT MONTH.

NOTE: Totals may not sum due to rounding. Retros are from WL80737A one year after the FY ends.

Welfare Eligibles (w/o retros): JUNE 2014
 Table 1. Percent County Caseload of Total Caseload
 NOTE: THIS IS NOT OFFICIAL DWSS CASELOAD; FOR ESTIMATE ONLY

COUNTY	POP	POP %	POP	POP %	TANF CASH ONLY	CHILD ONLY	TOTAL CASH	TANF MED	CHAP	NCU	MCB	AGED	BLIND	DIS-ABLED	QMB	SLMB	QI	COUNTY	MAABD	CWXIX	AID CODE 61	TOTAL CW/61	TOT MED	SNAP
Carson City	54,850	1.94%	54,850	1.94%	2.00%	1.55%	1.86%	2.20%	2.04%	3.33%	1.48%	1.93%	1.05%	2.27%	2.83%	3.05%	2.83%	7.07%	2.50%	0.90%	5.38%	1.01%	2.15%	2.03%
Churchill	25,416	0.90%	25,416	0.90%	1.56%	0.91%	1.37%	1.07%	0.97%	0.98%	0.49%	1.06%	1.05%	1.11%	1.27%	1.05%	1.39%	1.52%	1.15%	0.90%	0.00%	0.87%	1.04%	0.95%
Clark	2,049,742	72.58%	2,049,742	72.58%	78.64%	80.50%	79.19%	74.03%	75.72%	71.27%	65.02%	78.11%	72.25%	73.87%	68.68%	66.85%	67.22%	67.33%	72.38%	76.52%	58.86%	76.10%	74.49%	76.46%
Douglas	47,988	1.70%	47,988	1.70%	0.73%	0.43%	0.64%	1.02%	0.82%	1.18%	2.46%	0.67%	0.52%	0.72%	1.00%	1.11%	1.25%	0.91%	0.84%	0.90%	0.32%	0.89%	0.91%	0.72%
Elko	54,574	1.93%	54,574	1.93%	0.61%	0.61%	0.61%	0.96%	1.41%	1.62%	0.00%	1.08%	1.57%	0.95%	1.05%	0.94%	0.74%	2.51%	1.01%	1.00%	6.01%	1.12%	1.15%	0.97%
Esmeralda	896	0.03%	896	0.03%	0.00%	0.00%	0.00%	0.01%	0.01%	0.03%	0.00%	0.02%	0.00%	0.00%	0.00%	0.04%	0.00%	0.08%	0.01%	0.02%	0.00%	0.01%	0.00%	
Eureka	2,019	0.07%	2,019	0.07%	0.00%	0.00%	0.00%	0.02%	0.02%	0.02%	0.00%	0.02%	0.00%	0.02%	0.05%	0.03%	0.07%	0.08%	0.03%	0.01%	0.00%	0.02%	0.01%	
Humboldt	17,678	0.63%	17,678	0.63%	0.21%	0.22%	0.21%	0.40%	0.44%	0.64%	0.99%	0.42%	0.00%	0.42%	0.41%	0.39%	0.21%	0.84%	0.41%	0.40%	0.32%	0.40%	0.42%	
Lander	6,406	0.23%	6,406	0.23%	0.08%	0.11%	0.09%	0.14%	0.17%	0.16%	0.00%	0.17%	0.26%	0.17%	0.09%	0.14%	0.05%	0.30%	0.15%	0.14%	0.00%	0.14%	0.15%	
Lincoln	5,065	0.18%	5,065	0.18%	0.09%	0.07%	0.08%	0.12%	0.13%	0.12%	0.00%	0.20%	0.00%	0.12%	0.19%	0.14%	0.19%	0.30%	0.16%	0.02%	0.00%	0.02%	0.12%	
Lyon	53,018	1.88%	53,018	1.88%	1.50%	1.31%	1.44%	1.75%	1.58%	2.10%	5.42%	1.20%	1.57%	1.82%	2.03%	2.46%	2.14%	1.52%	1.83%	1.39%	4.43%	1.69%	1.65%	
Mineral	4,563	0.16%	4,563	0.16%	0.34%	0.19%	0.30%	0.19%	0.14%	0.08%	0.49%	0.23%	1.05%	0.29%	0.31%	0.38%	0.30%	0.61%	0.30%	0.05%	0.32%	0.06%	0.19%	
Nye	44,472	1.57%	44,472	1.57%	1.85%	1.87%	1.86%	2.31%	1.61%	1.00%	2.46%	1.49%	2.09%	2.33%	2.96%	3.64%	3.83%	1.22%	2.51%	1.46%	2.53%	2.04%	2.18%	
Pershing	6,861	0.24%	6,861	0.24%	0.05%	0.05%	0.05%	0.14%	0.15%	0.11%	0.00%	0.13%	0.00%	0.13%	0.13%	0.21%	0.28%	0.46%	0.15%	0.16%	0.00%	0.14%	0.11%	
Storey	4,027	0.14%	4,027	0.14%	0.01%	0.02%	0.01%	0.05%	0.02%	0.03%	0.49%	0.02%	0.00%	0.03%	0.04%	0.06%	0.02%	0.08%	0.04%	0.03%	0.00%	0.03%	0.04%	
Washoe	436,153	15.44%	436,153	15.44%	12.22%	12.04%	12.17%	15.32%	14.52%	17.23%	20.69%	13.02%	18.06%	15.42%	18.69%	19.23%	19.20%	13.98%	16.24%	15.88%	21.20%	16.01%	15.17%	
White Pine	10,203	0.36%	10,203	0.36%	0.10%	0.13%	0.11%	0.26%	0.27%	0.09%	0.00%	0.23%	0.52%	0.33%	0.26%	0.29%	0.28%	1.22%	0.31%	0.23%	0.63%	0.24%	0.23%	
State	2,823,931	100.00%	2,823,931	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	

NOTE: JUNE 2014 was SNAP highest recipient count (400,041) on AME44A

NOTE: "NCU" (NV Checkup) is not Title XIX Medicaid and is not included in "TOT MED".

NOTE: "TANF CASH" INCLUDES ALL CASH AID CODES WITH EXCEPTION OF CHILD ONLY AID CODES.

NOTE: ALL CASH AID CODES HAVE BEEN DELINKED FROM MEDICAID. CASH AID CODES HAVE A DUAL AID CODE FOR TANF MED. TOTAL TANF CASH IS NOT INCLUDED IN TOTAL MEDICAID.

Sources: DWSS AME44A, run date 07/01/2014.

Population: Nevada County Population Projections for 2014 dated MARCH 2014 by the Nevada State Demographer.

Welfare Eligibles (w/o retros): JUNE 2014
 Table 2. Percent County Caseload of County Population
 NOTE: THIS IS NOT OFFICIAL DWSS CASELOAD; FOR ESTIMATE ONLY

	POP	POP %	POP	POP %	CASH	CHILD ONLY	TOTAL CASH	TANF MED	CHAP	NCU	MCB	AGED	BLIND	DIS- ABLED	QMB	SLMB	QI	COUNTY	MAABD	CWXIX CODE 61	AID	TOTAL CWI/61	TOT MED	SNAP
Carson City	54,850	1.94%	54,850	1.94%	0.82%	0.27%	1.09%	8.69%	7.56%	1.44%	0.01%	0.46%	0.01%	1.57%	0.82%	0.44%	0.22%	0.17%	3.70%	0.21%	0.03%	0.24%	20.20%	14.82%
Churchill	25,416	0.90%	25,416	0.90%	1.39%	0.34%	1.73%	9.15%	7.75%	0.91%	0.00%	0.55%	0.02%	1.64%	0.80%	0.33%	0.24%	0.08%	3.66%	0.45%	0.00%	0.45%	21.01%	14.98%
Clark	2,049,742	72.58%	2,049,742	72.58%	0.87%	0.37%	1.24%	7.81%	7.52%	0.82%	0.01%	0.50%	0.01%	1.36%	0.53%	0.26%	0.14%	0.04%	2.86%	0.48%	0.01%	0.49%	18.69%	14.92%
Douglas	47,988	1.70%	47,988	1.70%	0.35%	0.09%	0.43%	4.59%	3.48%	0.88%	0.01%	0.19%	0.00%	0.56%	0.33%	0.19%	0.11%	0.03%	1.41%	0.24%	0.00%	0.24%	9.74%	5.97%
Elko	54,574	1.93%	54,574	1.93%	0.25%	0.11%	0.36%	3.80%	5.24%	0.70%	0.00%	0.26%	0.01%	0.66%	0.31%	0.14%	0.06%	0.06%	1.49%	0.23%	0.03%	0.27%	10.81%	7.08%
Esmeralda	896	0.03%	896	0.03%	0.00%	0.00%	0.00%	3.35%	2.12%	0.89%	0.00%	0.33%	0.00%	0.00%	0.00%	0.33%	0.00%	0.11%	0.78%	0.33%	0.00%	0.33%	6.59%	2.01%
Eureka	2,019	0.07%	2,019	0.07%	0.00%	0.00%	0.00%	2.03%	1.58%	0.20%	0.00%	0.10%	0.00%	0.35%	0.40%	0.10%	0.15%	0.05%	1.14%	0.05%	0.00%	0.05%	4.80%	2.58%
Humboldt	17,678	0.63%	17,678	0.63%	0.27%	0.12%	0.39%	4.88%	5.05%	0.86%	0.01%	0.32%	0.00%	0.91%	0.37%	0.18%	0.05%	0.06%	1.88%	0.29%	0.01%	0.29%	12.12%	7.56%
Lander	6,406	0.23%	6,406	0.23%	0.28%	0.16%	0.44%	4.61%	5.43%	0.59%	0.00%	0.34%	0.02%	1.00%	0.22%	0.17%	0.03%	0.06%	1.84%	0.28%	0.00%	0.28%	12.16%	9.66%
Lincoln	5,065	0.18%	5,065	0.18%	0.39%	0.14%	0.53%	5.27%	5.11%	0.55%	0.00%	0.53%	0.00%	0.91%	0.61%	0.22%	0.16%	0.08%	2.51%	0.04%	0.00%	0.04%	12.93%	9.36%
Lyon	53,018	1.88%	53,018	1.88%	0.64%	0.23%	0.87%	7.13%	6.08%	0.94%	0.02%	0.30%	0.01%	1.30%	0.61%	0.37%	0.17%	0.04%	2.80%	0.34%	0.00%	0.36%	16.39%	12.45%
Mineral	4,563	0.16%	4,563	0.16%	1.71%	0.39%	2.10%	8.96%	6.11%	0.44%	0.02%	0.66%	0.09%	2.43%	1.10%	0.66%	0.28%	0.18%	5.39%	0.15%	0.02%	0.18%	20.67%	16.81%
Nye	44,472	1.57%	44,472	1.57%	0.94%	0.40%	1.34%	11.26%	7.36%	0.53%	0.01%	0.44%	0.02%	1.98%	1.06%	0.65%	0.37%	0.04%	4.56%	0.42%	0.02%	0.44%	23.63%	19.58%
Perthing	6,861	0.24%	6,861	0.24%	0.17%	0.07%	0.25%	4.29%	4.42%	0.38%	0.00%	0.25%	0.00%	0.74%	0.31%	0.25%	0.17%	0.09%	1.81%	0.29%	0.00%	0.29%	10.80%	6.41%
Storey	4,027	0.14%	4,027	0.14%	0.05%	0.05%	0.10%	2.81%	1.12%	0.15%	0.02%	0.05%	0.00%	0.32%	0.17%	0.12%	0.02%	0.02%	0.72%	0.10%	0.00%	0.10%	4.77%	2.41%
Washoe	436,153	15.44%	436,153	15.44%	0.63%	0.26%	0.90%	7.60%	6.78%	0.93%	0.01%	0.39%	0.02%	1.34%	0.68%	0.35%	0.19%	0.04%	3.01%	0.47%	0.02%	0.48%	17.88%	12.72%
White Pine	10,203	0.36%	10,203	0.36%	0.22%	0.12%	0.33%	5.55%	5.42%	0.22%	0.00%	0.30%	0.02%	1.22%	0.40%	0.23%	0.12%	0.16%	2.44%	0.28%	0.02%	0.30%	13.71%	9.05%
State	2,823,931	100.00%	2,823,931	100.00%	0.80%	0.34%	1.14%	7.66%	7.21%	0.84%	0.01%	0.47%	0.01%	1.34%	0.56%	0.28%	0.15%	0.05%	2.87%	0.45%	0.01%	0.47%	18.21%	14.17%

NOTE: JUNE 2014 was SNAP highest recipient count (400,041) on AME44A
 NOTE: "NCU" (NV Checkup) is not Title XIX Medicaid and is not included in "TOT MED".
 NOTE: "TANF CASH" INCLUDES ALL CASH AID CODES WITH EXCEPTION OF CHILD ONLY AID CODES.
 NOTE: ALL CASH AID CODES HAVE BEEN DELINKED FROM MEDICAID. CASH AID CODES HAVE A DUAL AID CODE FOR TANF MED. TOTAL TANF CASH IS NOT INCLUDED IN TOTAL MEDICAID.
 Sources: Recipients: DWSS AME44A, run date 07/01/2014.
 Population: Nevada County Population Projections for 2014 dated MARCH 2014 by the Nevada State Demographer.

Welfare Eligibles (w/o retros): JUNE 2014
 Table 3. Percent County Caseload of Total Statewide Population
 NOTE: THIS IS NOT OFFICIAL DWSS CASELOAD; FOR ESTIMATE ONLY

COUNTY	POP	POP %	POP	POP %	CASH	CHILD ONLY	TOTAL CASH	TANF MED	CHAP	NCU	MCB	AGED	BLIND	DIS- ABLED	QMB	SLMB	QI	COUNTY	MAABD	CWIX CODE 61	AID	TOTAL CW/61	TOT MED	SNAP
Carson City	54,850	1.94%	54,850	1.94%	0.0160%	0.0052%	0.0212%	0.1688%	0.1469%	0.0279%	0.0001%	0.0090%	0.0001%	0.0304%	0.0159%	0.0086%	0.0043%	0.0033%	0.0718%	0.0041%	0.0006%	0.0047%	0.3923%	0.2879%
Churchill	25,416	0.90%	25,416	0.90%	0.0125%	0.0030%	0.0156%	0.0823%	0.0697%	0.0082%	0.0000%	0.0050%	0.0001%	0.0148%	0.0072%	0.0030%	0.0021%	0.0007%	0.0329%	0.0041%	0.0000%	0.0041%	0.1891%	0.1348%
Clark	2,049,742	72.58%	2,049,742	72.58%	0.6306%	0.2708%	0.9014%	5.6714%	5.4586%	0.5971%	0.0047%	0.3649%	0.0098%	0.9893%	0.3873%	0.1883%	0.1026%	0.0314%	2.0745%	0.3480%	0.0066%	0.3546%	13.5639%	10.8311%
Douglas	47,988	1.70%	47,988	1.70%	0.0059%	0.0015%	0.0073%	0.0781%	0.0591%	0.0099%	0.0002%	0.0032%	0.0001%	0.0086%	0.0057%	0.0032%	0.0019%	0.0004%	0.0240%	0.0041%	0.0000%	0.0041%	0.1655%	0.1015%
Elko	54,574	1.93%	54,574	1.93%	0.0049%	0.0021%	0.0070%	0.0734%	0.1013%	0.0136%	0.0000%	0.0050%	0.0002%	0.0127%	0.0059%	0.0027%	0.0011%	0.0012%	0.0289%	0.0045%	0.0007%	0.0052%	0.2088%	0.1368%
Esmeralda	896	0.03%	896	0.03%	0.0000%	0.0000%	0.0000%	0.0011%	0.0007%	0.0003%	0.0000%	0.0001%	0.0000%	0.0000%	0.0000%	0.0001%	0.0000%	0.0000%	0.0002%	0.0001%	0.0000%	0.0001%	0.0021%	0.0006%
Eureka	2,019	0.07%	2,019	0.07%	0.0000%	0.0000%	0.0000%	0.0015%	0.0011%	0.0001%	0.0000%	0.0001%	0.0000%	0.0002%	0.0003%	0.0001%	0.0001%	0.0000%	0.0008%	0.0000%	0.0000%	0.0000%	0.0034%	0.0018%
Humboldt	17,678	0.63%	17,678	0.63%	0.0017%	0.0007%	0.0024%	0.0305%	0.0316%	0.0054%	0.0001%	0.0020%	0.0000%	0.0057%	0.0023%	0.0011%	0.0003%	0.0004%	0.0188%	0.0000%	0.0000%	0.0000%	0.0759%	0.0473%
Lander	6,406	0.23%	6,406	0.23%	0.0006%	0.0004%	0.0010%	0.0104%	0.0123%	0.0013%	0.0000%	0.0008%	0.0000%	0.0023%	0.0005%	0.0004%	0.0001%	0.0001%	0.0042%	0.0006%	0.0000%	0.0006%	0.0276%	0.0219%
Lincoln	5,065	0.18%	5,065	0.18%	0.0007%	0.0002%	0.0010%	0.0095%	0.0092%	0.0010%	0.0000%	0.0010%	0.0000%	0.0016%	0.0011%	0.0004%	0.0003%	0.0001%	0.0045%	0.0001%	0.0000%	0.0001%	0.0232%	0.0168%
Lyon	53,018	1.88%	53,018	1.88%	0.0120%	0.0044%	0.0164%	0.1339%	0.1141%	0.0176%	0.0004%	0.0056%	0.0002%	0.0243%	0.0114%	0.0070%	0.0033%	0.0007%	0.0525%	0.0063%	0.0005%	0.0068%	0.3077%	0.2338%
Mineral	4,563	0.16%	4,563	0.16%	0.0028%	0.0005%	0.0034%	0.0145%	0.0099%	0.0007%	0.0000%	0.0011%	0.0001%	0.0039%	0.0018%	0.0011%	0.0005%	0.0003%	0.0087%	0.0002%	0.0000%	0.0003%	0.0334%	0.0272%
Nye	44,472	1.57%	44,472	1.57%	0.0148%	0.0063%	0.0211%	0.1773%	0.1159%	0.0084%	0.0002%	0.0070%	0.0003%	0.0312%	0.0167%	0.0103%	0.0058%	0.0006%	0.0719%	0.0066%	0.0003%	0.0069%	0.3721%	0.3084%
Pershing	6,861	0.24%	6,861	0.24%	0.0004%	0.0002%	0.0006%	0.0104%	0.0107%	0.0009%	0.0000%	0.0006%	0.0000%	0.0018%	0.0007%	0.0006%	0.0004%	0.0000%	0.0044%	0.0007%	0.0000%	0.0007%	0.0262%	0.0156%
Storey	4,027	0.14%	4,027	0.14%	0.0001%	0.0001%	0.0001%	0.0040%	0.0016%	0.0002%	0.0000%	0.0001%	0.0000%	0.0005%	0.0002%	0.0002%	0.0000%	0.0000%	0.0010%	0.0000%	0.0000%	0.0001%	0.0068%	0.0034%
Washoe	436,153	15.44%	436,153	15.44%	0.0980%	0.0405%	0.1385%	1.1736%	1.0468%	0.1443%	0.0015%	0.0608%	0.0024%	0.2066%	0.1054%	0.0545%	0.0293%	0.0065%	0.4655%	0.0722%	0.0024%	0.0746%	2.7619%	1.9646%
White Pine	10,203	0.36%	10,203	0.36%	0.0008%	0.0004%	0.0012%	0.0200%	0.0196%	0.0008%	0.0000%	0.0011%	0.0001%	0.0044%	0.0015%	0.0008%	0.0004%	0.0006%	0.0088%	0.0010%	0.0001%	0.0011%	0.0495%	0.0327%
State	2,823,931	100.00%	2,823,931	100.00%	0.8019%	0.3364%	1.1383%	7.6607%	7.2091%	0.8378%	0.0072%	0.4672%	0.0135%	1.3394%	0.5639%	0.2832%	0.1526%	0.0466%	2.8663%	0.4548%	0.0112%	0.4660%	16.2093%	14.1661%

NOTE: JUNE 2014 was SNAP highest recipient count (400,041) on AIME44A
 NOTE: "NCU" (NY Checkup) is not Title XIX Medicaid and is not included in "TOT MED".
 NOTE: "TANF CASH" INCLUDES ALL CASH AID CODES WITH EXCEPTION OF CHILD ONLY AID CODES.
 NOTE: ALL CASH AID CODES HAVE BEEN DELINKED FROM MEDICAID. CASH AID CODES HAVE A DUAL AID CODE FOR TANF MED. TOTAL TANF CASH IS NOT INCLUDED IN TOTAL MEDICAID.
 Sources: Recipients DWSS AIME44A, run date 07/01/2014.
 Population: Nevada County Population Projections for 2014 dated MARCH 2014 by the Nevada State Demographer.

HISTORICAL CASELOAD and EXPENDITURES

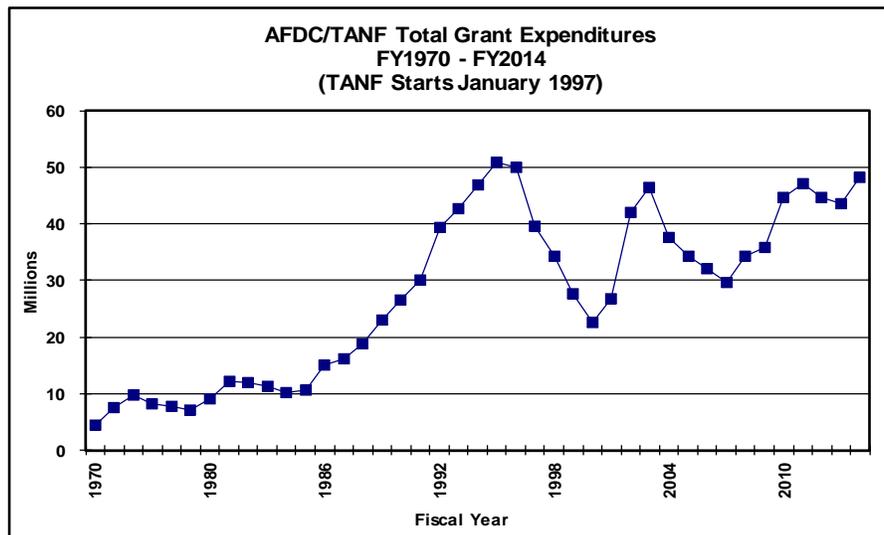
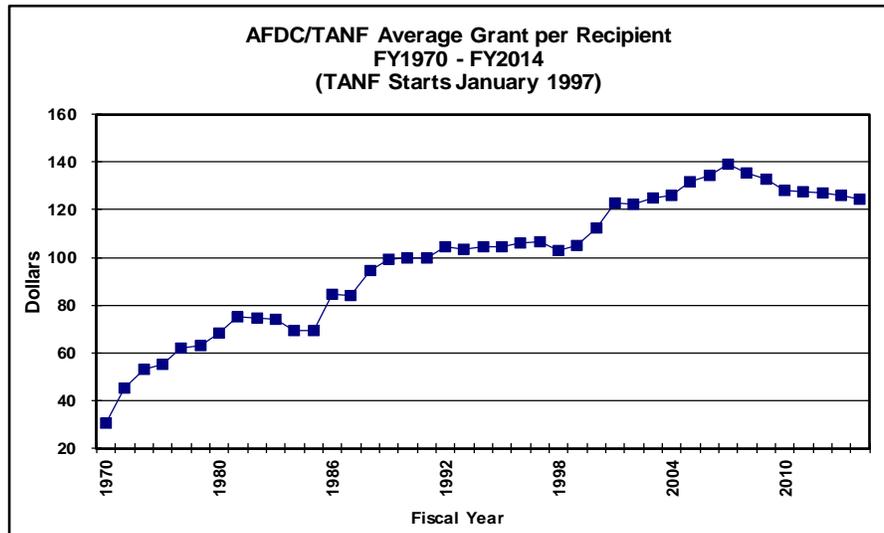
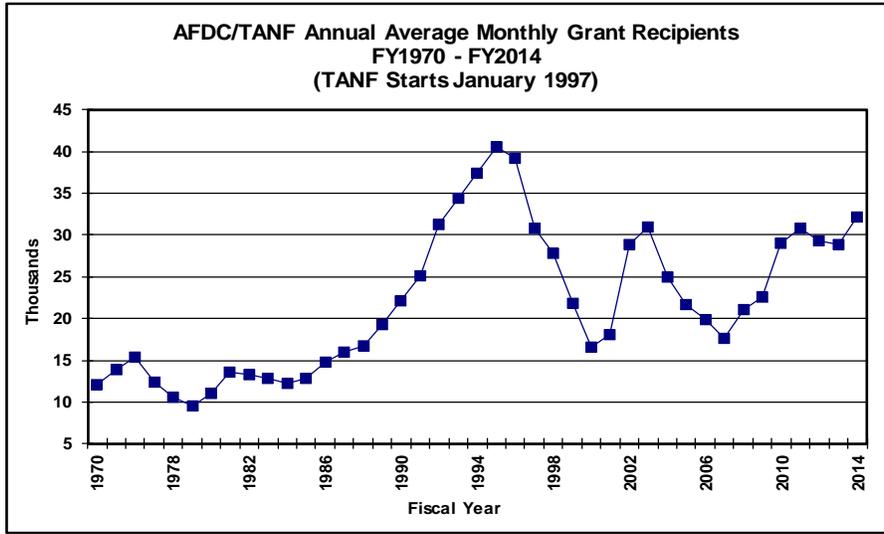
Year	Temporary Assistance for Needy Families (TANF)			SNAP			Total Medicaid Eligibles				
	Ann Avg Mon Recp	Total Grant Expenditures	Avg per Recipient	Ann Avg Part Person	Tot Issuance	Avg per Part Person	Non-Child Welfare	Child Welfare	Total Med Elig	Total Expenditures	Avg per Eligible
1970	12,029	\$4,446,297	\$30.80								
1975	13,939	\$7,613,458	\$45.52	SNAP began 1973-74.	\$14,027,040	\$36.61					
1976	15,451	\$9,863,469	\$53.20		\$14,196,167	\$40.05					
1977	12,449	\$8,215,694	\$55.00		\$19,502	\$41.34					
1978	10,537	\$7,830,172	\$61.92		\$8,534,186	\$43.43					
1979	9,532	\$7,194,510	\$62.90		\$9,535,329	\$39.21					
1980	10,976	\$9,018,866	\$68.48		\$13,888,244	\$38.54					
1981	13,564	\$12,212,934	\$75.03		\$20,022,712	\$44.03					
1982	13,370	\$11,934,066	\$74.39		\$18,814,397	\$47.76					
1983	12,792	\$11,385,305	\$74.17		\$20,902,797	\$49.91					
1984	12,261	\$10,200,918	\$69.33		\$20,939,546	\$50.94					
1985	12,904	\$10,715,265	\$69.20		\$21,028,093	\$54.30					
1986	14,814	\$15,042,113	\$84.62		\$21,824,575	\$54.51					
1987	15,999	\$16,183,445	\$84.29		\$23,265,589	\$54.31					
1988	16,708	\$18,932,847	\$94.43		\$24,503,975	\$57.14					
1989	19,359	\$23,114,321	\$99.50		\$37,979,988	\$65.53					
1990	22,133	\$26,549,323	\$99.96		\$50,903,549	\$72.02					
1991	25,143	\$30,175,865	\$100.01		\$82,010,465	\$78.72					
1992	31,286	\$39,272,113	\$104.61		\$70,370,210	\$77.17					
1993	34,355	\$42,668,777	\$103.50		\$83,730,380	\$76.95					
1994	37,343	\$46,894,747	\$104.65		\$90,839,028	\$78.47					
1995	40,574	\$50,888,030	\$104.52		\$94,591,541	\$80.33					
1996	39,221	\$49,958,695	\$106.15		\$95,575,952	\$81.52					
1997	30,876	\$39,580,615	\$106.83		\$82,010,465	\$78.72					
1998	27,848	\$34,354,738	\$102.84		\$73,816,808	\$75.82					
1999	21,900	\$27,608,156	\$105.13		\$59,063,848	\$77.51					
2000	16,661	\$22,592,285	\$112.57		\$57,400,692	\$77.79					
2001	18,123	\$26,782,105	\$122.98		\$64,127,521	\$76.32					
2002	28,809	\$41,990,487	\$122.10		\$88,811,716	\$81.14					
2003	31,034	\$46,468,562	\$124.91		\$109,047,479	\$84.96					
2004	24,956	\$37,631,175	\$125.80		\$118,632,583	\$82.56					
2005	21,748	\$34,307,844	\$131.56		\$126,436,277	\$86.33					
2006	19,880	\$32,015,344	\$134.26		\$124,486,526	\$87.64					
2007	17,712	\$29,579,790	\$139.33		\$129,249,045	\$90.06					
2008	21,022	\$34,190,931	\$135.70		\$157,984,295	\$95.69					
2009	22,556	\$35,923,608	\$132.73		\$179,790	\$112.16					
2010	29,084	\$44,736,022	\$128.21		\$381,588,683	\$122.11					
2011	30,853	\$47,167,802	\$127.43		\$477,682,415	\$123.13					
2012	29,331	\$44,664,101	\$126.92		\$518,493,195	\$122.70					
2013	28,837	\$43,525,013	\$125.81		\$524,977,396	\$122.00					
2014	32,239	\$48,159,450	\$124.49		\$527,560,395	\$117.08					

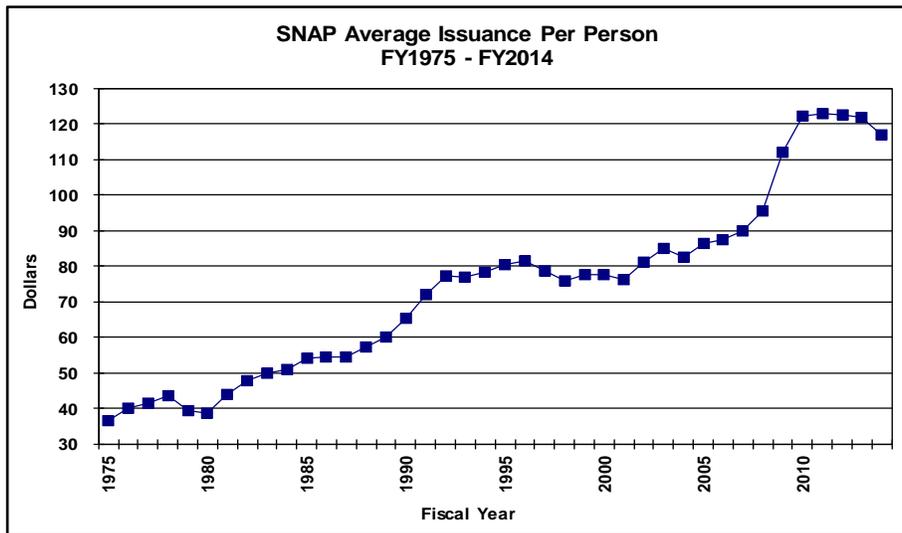
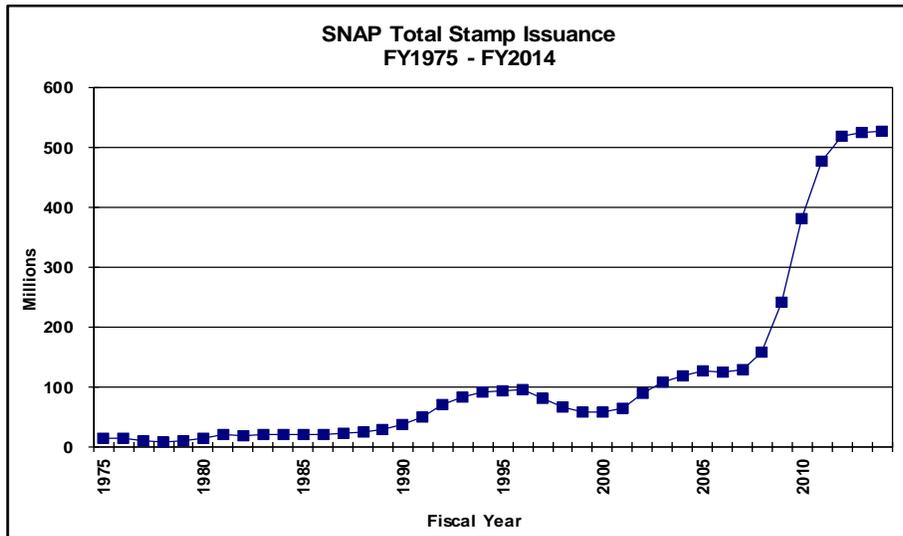
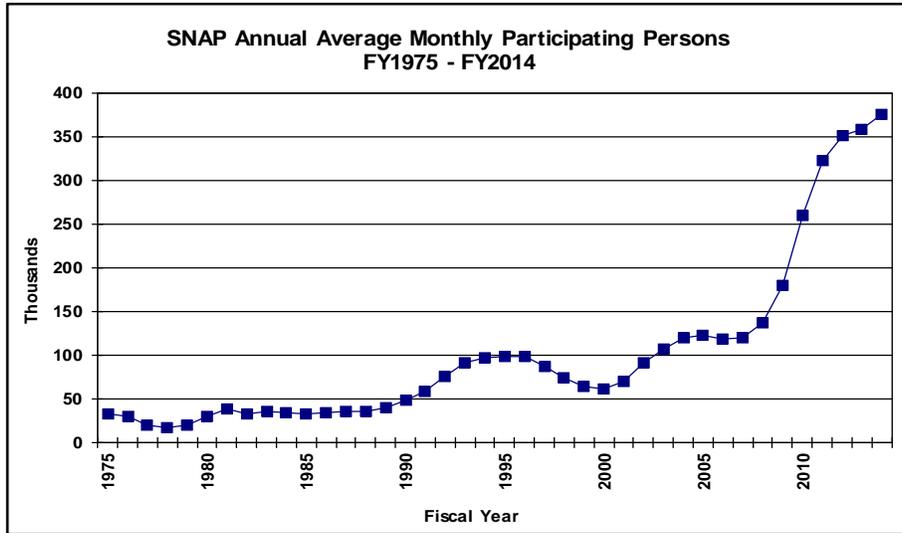
Year	Total Medicaid Eligibles			Total Expenditures	Avg per Eligible
	Non-Child Welfare	Child Welfare	Total Med Elig		
1970					
1975					
1976					
1977					
1978					
1979					
1980					
1981					
1982					
1983					
1984					
1985	22,099	1,013	23,112	\$66,152,874	\$2,38.52
1986	24,570	1,226	25,796	\$73,965,311	\$2,38.94
1987	26,488	1,441	27,929	\$86,451,608	\$2,57.95
1988	27,480	1,552	29,032	\$90,824,772	\$2,60.70
1989	31,492	1,685	33,177	\$105,799,330	\$2,65.74
1990	38,116	1,706	39,822	\$139,891,081	\$2,92.74
1991	46,567	1,811	48,378	\$169,501,066	\$2,91.97
1992	60,480	1,931	62,411	\$230,444,464	\$3,07.70
1993	70,635	2,087	72,722	\$268,583,973	\$3,07.77
1994	80,165	2,174	82,339	\$300,133,923	\$3,03.76
1995	91,076	2,222	93,298	\$357,321,068	\$3,17.46
1996	97,176	2,842	100,018	\$384,142,043	\$3,20.06
1997	93,008	2,899	95,907	\$387,607,138	\$3,36.79
1998	92,902	3,665	96,567	\$424,534,751	\$3,67.50
1999	95,157	3,466	98,623	\$455,738,798	\$3,85.10
2000	95,845	3,567	99,412	\$489,113,707	\$4,10.01
2001	113,811	3,832	117,643	\$574,940,749	\$4,07.26
2002	138,814	4,302	143,116	\$674,233,707	\$3,92.59
2003	159,336	4,985	164,321	\$853,361,914	\$4,32.77
2004	167,751	5,139	172,890	\$910,561,801	\$4,38.89
2005	168,403	5,887	174,290	\$1,229,504,874	\$5,87.86
2006	165,350	6,950	172,300	\$1,229,918,325	\$5,94.85
2007	160,799	6,996	167,795	\$1,156,812,710	\$5,74.52
2008	172,579	7,790	180,369	\$1,191,995,210	\$5,50.72
2009	189,522	7,534	197,056	\$1,095,292,757	\$4,63.19
2010	240,019	7,556	247,575	\$1,232,940,160	\$4,15.01
2011	277,995	7,453	285,448	\$1,543,067,177	\$4,50.48
2012	296,846	7,314	304,160	\$1,661,286,940	\$4,55.16
2013	307,892	8,314	316,206	\$1,821,350,125	\$4,80.00
2014	383,174	9,141	392,315	\$2,074,389,215	\$4,40.63

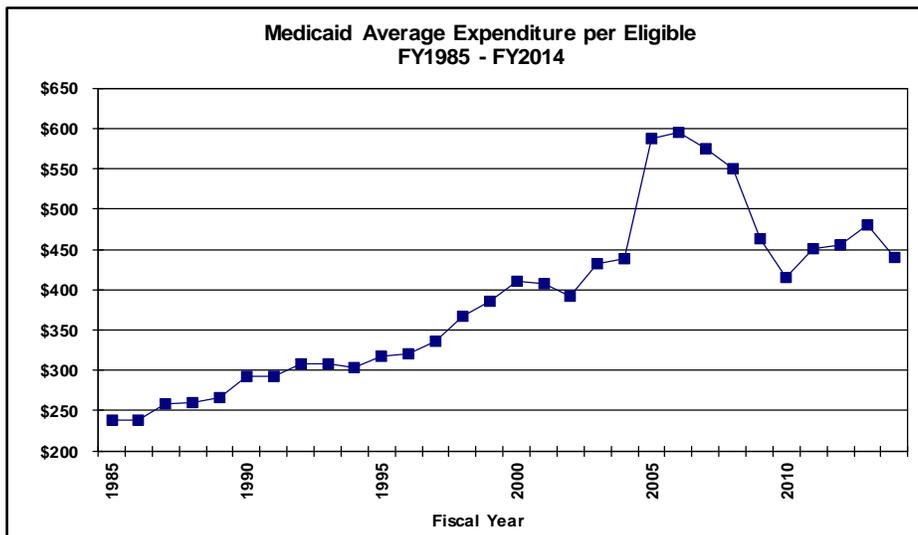
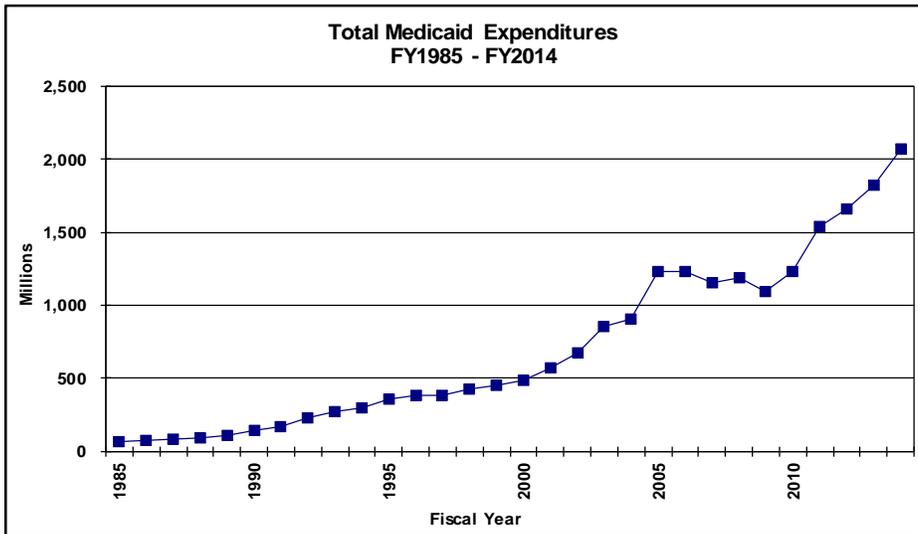
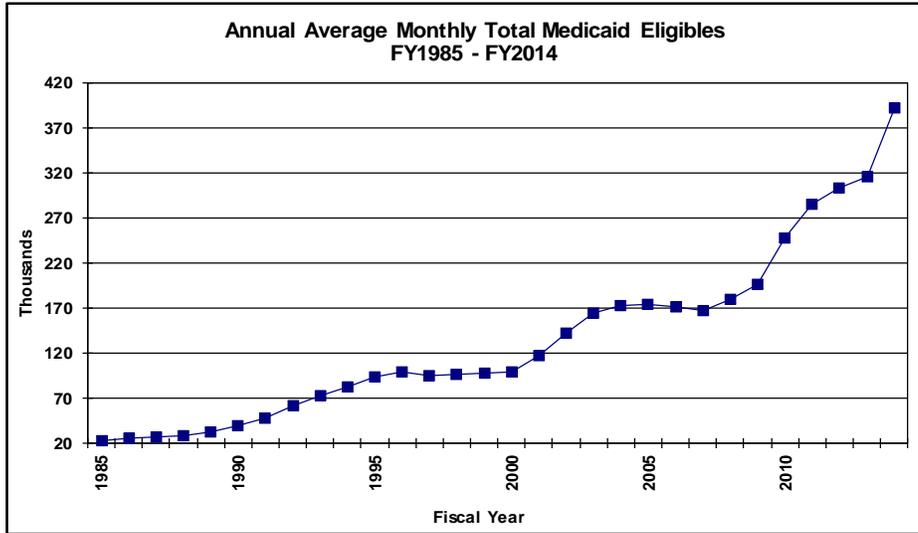
1. Total Medicaid Eligibles are all eligibles with retiros. Eligibles do not necessarily have a R&S Eligibles Summary Spreadsheet.
 2. Years are state fiscal years.
 3. Eligibles are annual average monthly totals.
 4. Expenditures do not include administrative costs; are "Medical Pay" only; source is the closing R3.0s; Controller's Office, for FY1982-FY1991; source is NSWD system report W180R16-7B on-line claims only; net of non-institutional provider tax, for FY1992-FY1998; thereafter, source is DHCFP.
 5. Affordable Health Care Act (ACA) starts SFY 2014. Mandatory program starts October 2013 and Optional program starts January 2014.
 6. Italics denote preliminary FY data.

1. Although the SNAP program began nationally in 1965, Nevada's program did not begin until 1973-74.
 2. Years are state fiscal years.
 3. Participating Persons = annual average monthly total.
 4. Total Issuance = total dollars issued for the year.
 5. All information comes from Research & Statistics Caseload Histories and Biennial Reports. State of Nevada (Biennial Reports take precedent unless data noted as income Food Stamps program to Supplemental Nutrition Assistance Program (SNAP) effective 1 October 2008.
 6. ARRA increased the maximum benefit level of all SNAP households by 13.6% effective 01 APR 2009.
 7. Benefit levels increased by ARRA reduced to pre-ARRA levels effective November 2013.

1. Years are state fiscal years.
 2. Recipients are annual average monthly totals.
 3. Total Expenditures are total dollars expended for the year for grants, both state and federal.
 4. All information comes from Research & Statistics Caseload Histories, Biennial Reports, and Executive Budgets.
 5. NSWD Budget Account #32.30.







TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (AFDC PRIOR TO 1/1/97) CUMULATIVE TOTAL
ANNUAL REPORT FY84 - FY92

YEAR	APPS REC'D	(2) % OF APPS TO TOTAL	(3) GRANTS WITH PUBLIC HOUSING		(4) GRANTS WO PUBLIC HOUSING		(5) TOTAL GRANTS 40-44		(6) MED ONLY 04 & 40-49		(7) TOTAL ELIG 04 & 40-49		(8) AVG FAM SIZE /GRANT	(9) TOT GRANTS PAID WITH PUB HOUSING	(10) TOT GRANTS PAID WO PUB HOUSING	(11) TOTAL GRANTS PAID	(12) AVG GRANT PER RECIP WITH P.H.	(13) AVG GRANT PER RECIP WO P.H.	(14) AVG GRANT PER GRANT RECIP	(15) AVG GRANT PER FAMILY
			CASES	RECIP	CASES	RECIP	CASES	RECIP	CASES	RECIP	CASES	RECIP								
FY84 TOT	9,512						54,164	147,130	1,375	3,623	55,539	150,753				\$10,200,918				
FY84 AVG	793	17.1%					4,514	12,261	115	302	4,629	12,563	2.71			\$850,077			\$69.33	
FY85 TOT	9,414						55,902	154,848	1,628	4,457	57,530	159,305				\$10,715,265			\$69.20	
FY85 AVG	785	16.4%					4,659	12,904	136	371	4,795	13,275	2.77			\$892,939				
FY86 TOT	9,957						63,764	177,768	1,863	4,612	65,627	182,380				\$15,042,113			\$84.62	
FY86 AVG	830	15.2%					5,314	14,814	155	384	5,469	15,198	2.78			\$1,253,509				
FY87 TOT	11,262						68,323	191,991	3,331	6,713	71,654	198,704				\$16,183,445			\$84.29	
FY87 AVG	939	15.7%					5,694	15,999	278	559	5,972	16,558	2.77			\$1,348,620				
FY88 TOT	12,693						71,940	200,501	3,257	6,604	75,197	207,105				\$18,932,847			\$94.43	
FY88 AVG	1,058	16.9%					5,995	16,708	271	550	6,266	17,259	2.75	\$5,401,439	\$9,547,117	\$1,577,737	\$89.08	\$103.77	\$99.50	
FY89 TOT	14,176						84,009	232,307	4,203	8,823	88,212	241,130				\$23,114,321			\$99.50	
FY89 AVG	1,181	16.1%					7,001	19,359	350	735	7,351	20,094	2.76	\$645,329	\$1,280,865	\$1,926,193	\$89.08	\$105.73	\$99.50	
FY90 TOT	20,931						96,039	265,590	9,211	17,940	105,250	283,530				\$26,549,323			\$99.50	
FY90 AVG	1,744	19.9%					8,003	22,132	768	1,495	8,771	23,627	2.69	\$752,464	\$1,459,962	\$2,212,444	\$89.30	\$106.52	\$99.50	
FY91 TOT	28,314						109,297	301,721	29,898	57,285	139,195	359,006				\$30,175,863			\$100.01	
FY91 AVG	2,360	20.3%					9,108	25,144	2,492	4,774	11,600	29,918	2.58	\$791,195	\$1,723,460	\$2,514,655	\$88.44	\$106.40	\$100.01	
FY92 TOT	25,965						137,956	375,431	68,504	118,118	206,460	493,549				\$39,272,113			\$113.38	
FY92 AVG	2,164	12.6%					11,496	31,286	5,709	9,843	17,205	41,129	2.72	\$855,322	\$2,419,552	\$3,272,676	\$86.00	\$113.38	\$104.61	

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (AFDC PRIOR TO 11/97) CUMULATIVE TOTAL
ANNUAL REPORT FY93 - FY01

YEAR	APPS RECD	(2) % OF APPS TO TOTAL	(3) GRANTS WITH PUBLIC HOUSING		(4) GRANTS W/O PUBLIC HOUSING		(5) TOTAL GRANTS		(6) MED ONLY 04 & 40 - 49		(7) TOTAL ELIG 04 & 40 - 49		(8) AVG FAM SIZE /GRANT	(9) TOT GRANTS PAID WITH PUB HOUSING	(10) TOT GRANTS PAID W/O PUB HOUSING	(11) TOTAL GRANTS PAID	(12) AVG GRANT PER RECIPIENT WITH P.H.	(13) AVG GRANT PER RECIPIENT W/O P.H.	(14) AVG GRANT PER GRANT RECIPIENT	(15) AVG GRANT PER FAMILY
			CASES	RECIPIENT	CASES	RECIPIENT	CASES	RECIPIENT	CASES	RECIPIENT	CASES	RECIPIENT								
FY93 TOT	30,192		37,985	120,709	114,127	291,550	152,112	412,259	103,860	178,381	255,972	590,640	2.71	\$9,804,438	\$2,864,339	\$42,668,776	\$81.22	\$112.72	\$103.50	
FY93 AVG	2,516	19.8%	3,165	10,059	9,511	24,296	12,676	34,355	8,655	14,865	21,331	49,220	2.71	\$817,037	\$2,738,695	\$3,555,731	\$81.22	\$112.72	\$103.50	
FY94 TOT	34,390		38,281	121,321	128,163	326,795	166,444	448,116	123,469	219,467	289,913	667,583	2.69	\$9,916,973	\$6,977,774	\$46,894,746	\$81.74	\$113.15	\$104.65	
FY94 AVG	2,866	20.7%	3,190	10,110	10,680	27,233	13,870	37,343	10,289	18,289	24,159	55,632	2.69	\$826,414	\$3,081,481	\$3,907,896	\$81.74	\$113.15	\$104.65	
FY95 TOT	36,374		37,781	118,114	147,306	368,770	185,087	486,884	145,549	267,522	330,636	754,406	2.63	\$9,607,371	\$4,280,660	\$50,888,031	\$81.34	\$111.94	\$104.52	
FY95 AVG	3,031	19.7%	3,148	9,843	12,276	30,731	15,424	40,574	12,129	22,294	27,553	62,867	2.63	\$800,614	\$3,440,055	\$4,240,669	\$81.34	\$111.94	\$104.52	
FY96 TOT	34,546		35,628	109,144	148,601	361,504	184,229	470,648	169,731	321,448	353,960	792,096	2.55	\$8,897,732	\$4,060,964	\$49,958,696	\$81.52	\$113.58	\$106.15	
FY96 AVG	2,879	18.8%	2,969	9,095	12,383	30,125	15,352	39,221	14,144	26,787	29,497	66,008	2.55	\$741,478	\$3,421,747	\$4,163,225	\$81.52	\$113.58	\$106.15	
FY97 TOT	28,891		30,225	91,980	119,621	278,531	149,846	370,511	185,866	352,062	335,712	722,573	2.47	\$7,382,199	\$2,198,416	\$39,580,615	\$80.26	\$115.60	\$106.83	
FY97 AVG	2,408	19.3%	2,519	7,665	9,968	23,211	12,487	30,876	15,489	29,339	27,976	60,214	2.47	\$615,183	\$2,683,201	\$3,298,385	\$80.26	\$115.60	\$106.83	
FY98 TOT*	29,008		25,699	83,529	104,656	251,647	130,355	334,176	41,168	107,025	325,114	702,941	2.57	\$6,346,218	\$28,008,520	\$34,354,738	\$76.93	\$111.34	\$102.84	
FY98 AVG*	2,417	22.3%	2,142	6,877	8,721	20,971	10,863	27,848	3,431	8,919	27,093	58,578	2.57	\$528,852	\$2,334,043	\$2,862,895	\$76.93	\$111.34	\$102.84	
FY99 TOT	29,491		19,835	64,402	83,245	198,397	103,080	262,799	60,822	153,654	332,459	705,927	2.55	\$4,948,834	\$22,659,322	\$27,608,156	\$76.79	\$114.34	\$105.13	
FY99 AVG	2,458	28.6%	1,653	5,367	6,937	16,533	8,590	21,900	5,069	12,805	27,705	58,827	2.55	\$412,403	\$1,888,277	\$2,300,680	\$76.79	\$114.34	\$105.13	
FY00 TOT	28,605		14,483	45,891	67,914	154,046	82,397	199,937	86,367	225,723	337,330	716,328	2.43	\$3,510,286	\$19,081,999	\$22,592,285	\$77.67	\$122.65	\$112.57	\$273.28
FY00 AVG	2,384	34.7%	1,207	3,824	5,660	12,837	6,866	16,661	7,197	18,810	28,111	59,694	2.43	\$291,641	\$1,562,782	\$1,874,423	\$77.67	\$122.65	\$112.57	\$273.28
FY01 TOT	40,186		19,711	55,010	69,599	162,465	89,310	217,475	141,392	385,678	370,236	857,274	2.44	\$5,186,481	\$21,595,624	\$26,782,105	\$94.05	\$132.78	\$122.98	\$299.43
FY01 AVG	3,349	45.0%	1,643	4,584	5,800	13,539	7,443	18,123	11,783	32,140	30,853	71,440	2.44	\$432,207	\$1,799,635	\$2,231,842	\$94.05	\$132.78	\$122.98	\$299.43

*Starting in FY98, CHAP was removed from column (6) to separate TANF Med Only and CHAP. Column (15) added starting Fiscal Year 2000.

TOTAL TANF CASH CUMULATIVE TOTAL
ANNUAL REPORT FY02 - FY14

YEAR	GRANTS PAID WITH PUBLIC HOUSING		GRANTS PAID WITHOUT PUBLIC HOUSING		TOTAL GRANTS PAID		AVG FAM SIZE	TOTAL GRANTS PAID WITH PUBLIC HOUSING	TOTAL GRANTS PAID WITHOUT PUBLIC HOUSING	TOTAL GRANTS PAID	AVG PER RECIPIENT WITH PH	AVG PER RECIPIENT W/O PH	AVG GRANT PER RECIPIENT
	CASE	ADULT	CHILD	RECIPIENT	CASE	ADULT	CHILD	RECIPIENT	CASE	ADULT	CHILD	RECIPIENT	
FY02 TOT	29,884	22,971	62,097	85,068	105,090	73,091	187,545	260,636	134,974	96,062	249,642	345,704	
FY02 AVG	2,490	1,914	5,175	7,089	8,758	6,091	15,629	21,720	11,248	8,005	20,804	28,809	2.55
FY03 TOT	30,874	22,894	65,561	88,455	115,303	77,724	206,225	283,949	146,177	100,618	271,786	372,404	
FY03 AVG	2,573	1,908	5,463	7,371	9,609	6,477	17,185	23,662	12,181	8,385	22,649	31,034	2.55
FY04 TOT	25,910	16,957	54,631	71,588	92,407	58,788	169,091	227,879	118,317	75,745	223,722	299,467	
FY04 AVG	2,159	1,413	4,553	5,966	7,701	4,899	14,091	18,990	9,860	6,312	18,644	24,956	2.53
FY05 TOT	21,996	12,427	45,372	57,799	83,337	50,557	152,616	203,173	105,333	62,984	197,988	260,972	
FY05 AVG	1,833	1,036	3,781	4,817	6,945	4,213	12,718	16,931	8,778	5,249	16,499	21,748	2.48
FY06 TOT	19,388	10,497	38,907	49,404	77,364	46,650	142,510	189,160	96,752	57,147	181,417	238,564	
FY06 AVG	1,616	875	3,242	4,117	6,447	3,888	11,876	15,763	8,063	4,762	15,118	19,880	2.47
FY07 TOT	17,380	8,902	34,345	43,247	70,531	40,423	128,879	169,302	87,911	49,325	163,224	212,549	
FY07 AVG	1,448	742	2,862	3,604	5,878	3,369	10,740	14,109	7,326	4,110	13,602	17,712	2.42
FY08 TOT	19,989	11,671	39,554	51,225	80,029	53,259	147,778	201,037	100,018	64,930	187,332	252,262	
FY08 AVG	1,666	973	3,296	4,269	6,669	4,438	12,315	16,753	8,335	5,411	15,611	21,022	2.52
FY09 TOT	19,749	11,693	39,623	51,316	86,891	58,144	161,209	219,353	106,640	69,837	200,832	270,669	
FY09 AVG	1,646	974	3,302	4,276	7,241	4,845	13,434	18,279	8,887	5,820	16,736	22,556	2.54
FY10 TOT	20,878	13,314	41,670	54,984	114,757	81,986	212,036	294,022	135,635	95,300	253,706	349,006	
FY10 AVG	1,740	1,110	3,473	4,582	9,563	6,832	17,670	24,502	11,303	7,942	21,142	29,084	2.57
FY11 TOT	19,759	12,701	39,227	51,928	124,021	88,238	230,072	318,310	143,780	100,939	269,299	370,238	
FY11 AVG	1,647	1,058	3,269	4,327	10,335	7,353	19,173	26,526	11,982	8,412	22,442	30,853	2.57
FY12 TOT	17,630	10,458	35,131	45,589	120,346	82,357	224,030	306,387	137,976	92,815	259,161	351,976	
FY12 AVG	1,469	872	2,928	3,799	10,029	6,863	18,669	25,532	11,498	7,735	21,597	29,331	2.55
FY13 TOT	17,338	10,103	34,931	45,034	117,659	81,486	219,523	301,009	134,997	91,589	254,454	346,043	
FY13 AVG	1,445	842	2,911	3,753	9,805	6,791	18,294	25,084	11,250	7,632	21,205	28,837	2.56
FY14 TOT	18,229	11,270	36,231	47,501	129,938	98,230	241,142	339,372	148,167	109,500	277,373	386,873	
FY14 AVG	1,519	939	3,019	3,958	10,828	8,186	20,095	28,281	12,347	9,125	23,114	32,239	2.61

Note: New Aid Codes started Fiscal Year 2002. Applications not tracked starting Fiscal Year 2002. Source is same as monthly reports.

CHAP CASELOAD REPORT - ANNUAL SUMMARY
AID CODE 47
FY85 - FY95

YEAR	(1) APPS		2 % APPS TO CASES	(3) CASES		(4) ADULTS		(5) CHILDREN		(6) RECIPIENTS		TOT	(7) MPP RETRO	(8) AVG FAM SIZE
	47	49		47	49	47	49	47	49	47	49			
FY85 TOT	257	257		24	24	5	19	19	24	24	24	24	364	
FY85 AVG	64	64		6	6	1	5	5	6	6	6	6	30	1.00
FY86 TOT	567	567		335	335	146	262	262	408	408	408	408	1,062	
FY86 AVG	47	47		28	28	12	22	22	34	34	34	34	89	1.22
FY87 TOT	992	992		740	740	329	737	737	1,066	1,066	1,066	1,066	2,017	
FY87 AVG	83	83		62	62	27	61	61	89	89	89	89	168	1.44
FY88 TOT	1,189	1,189		781	781	333	801	801	1,134	1,134	1,134	1,134	1,753	
FY88 AVG	99	99		65	65	28	67	67	95	95	95	95	146	1.45
FY89 TOT	1,591	1,591		931	931	365	1,046	1,046	1,411	1,411	1,411	1,411	2,552	
FY89 AVG	133	133		78	78	30	87	87	118	118	118	118	213	1.23
FY90 TOT	3,267	3,605		2,709	2,158	1,254	801	801	4,204	4,204	3,670	7,874	14,680	
FY90 AVG	272	300	74.1%	226	180	105	67	67	350	350	306	656	1,223	1.62
FY91 TOT	5,394	6,842		6,830	12,901	3,180	4,775	7,188	10,368	10,368	21,411	31,779	47,104	
FY91 AVG	450	571	34.7%	569	1,075	265	398	599	864	864	1,784	2,648	3,925	1.62
FY92 TOT	6,891	8,800		23,957	24,567	7,839	7,246	31,362	39,201	39,201	38,013	77,214	98,919	
FY92 AVG	574	733	18.1%	1,996	2,047	653	604	2,614	3,267	3,267	3,168	6,435	8,243	1.59
FY93 TOT	8,608	10,692		44,843	37,273	11,264	9,142	60,076	71,940	71,940	57,786	129,726	148,991	
FY93 AVG	717	891	13.0%	3,737	3,106	939	762	5,056	4,054	4,054	4,816	10,811	12,416	1.58
FY94 TOT	10,360	13,462		51,400	46,375	13,017	10,680	69,757	82,774	82,774	72,980	155,754	180,228	
FY94 AVG	863	1,122	13.8%	4,283	3,865	1,085	890	5,813	5,192	5,192	6,898	12,980	15,019	1.59
FY95 TOT	15,191	16,870		92,015	21,498	20,673	4,639	130,401	151,074	151,074	34,942	186,016	216,847	
FY95 AVG	1,266	1,406	14.9%	7,668	4,300	1,723	928	10,867	6,061	6,061	6,988	15,501	18,071	1.64

NOTE: *MPP retro eligible count of recipients from MPP Eligibility Report WL80737A.

CHAP CASELOAD REPORT - ANNUAL SUMMARY
 AFD CODE 47/CH
 FY06 - FY14

YEAR	(1) APPS	(2) % APPS TO CASES	(3) CASES	(4) ADULTS	(5) CHILDREN	(6) RECIPIENTS	(7) MPP RETRO	(8) AVG FAM SIZE
FY06 TOT	18,796		133,198	27,768	192,898	220,666	251,349	
FY06 AVG	1,566	14.1%	11,100	2,314	16,075	18,389	20,946	1.66
FY07 TOT	24,113		149,859	30,064	222,014	252,078	284,596	
FY07 AVG	2,009	16.1%	12,488	2,585	18,501	21,007	23,716	1.68
FY08 TOT	28,966		153,591	31,478	230,262	261,740	299,254	
FY08 AVG	2,414	18.9%	12,799	2,623	19,189	21,812	24,938	1.70
FY09 TOT	32,061		168,557	33,867	256,407	289,474	326,559	
FY09 AVG	2,672	19.0%	14,046	2,756	21,367	24,123	27,213	1.72
FY00 TOT	25,481		168,562	33,106	257,562	290,668	302,643	
FY00 AVG	2,123	15.1%	14,047	2,759	21,464	24,222	25,304	1.72
FY01 TOT	9,957		139,634	30,855	223,266	254,121	306,016	
FY01 AVG*	830	7.1%	11,636	2,571	18,606	21,177	25,501	1.82
FY02 TOT			130,486	26,034	205,067	231,101	284,059	
FY02 AVG			10,874	2,170	17,089	19,258	23,672	1.77
FY03 TOT			149,617	29,166	237,371	266,537	302,295	
FY03 AVG			12,468	2,431	19,781	22,211	25,275	1.78
FY04 TOT			154,191	33,271	244,575	277,846	319,805	
FY04 AVG			12,849	2,773	20,381	23,154	26,650	1.80
FY05 TOT			155,455	30,848	253,063	283,911	321,025	
FY05 AVG			12,955	2,571	21,089	23,659	26,752	1.83
FY06 TOT			166,035	32,435	263,972	296,407	336,419	
FY06 AVG			13,836	2,703	21,998	24,701	28,035	1.79
FY07 TOT			175,035	32,725	272,912	305,637	344,084	
FY07 AVG			14,586	2,727	22,743	25,470	28,674	1.75
FY08 TOT			194,115	38,391	304,704	343,095	378,810	
FY08 AVG			16,176	3,199	25,392	28,591	31,568	1.77
FY09 TOT			254,645	47,040	423,389	470,429	519,060	
FY09 AVG			21,220	3,920	35,282	39,202	43,255	1.85
FY10 TOT			361,467	67,107	620,244	687,351	747,258	
FY10 AVG			30,122	5,592	51,687	57,279	62,272	1.90
FY11 TOT			458,782	81,055	801,661	882,716	933,426	
FY11 AVG			38,232	6,755	66,805	73,560	77,786	1.92
FY12 TOT			500,422	84,661	888,506	973,167	1,023,168	
FY12 AVG			41,702	7,055	74,042	81,097	85,264	1.94
FY13 TOT			506,054	88,727	900,649	989,376	1,047,710	
FY13 AVG			42,171	7,394	75,054	82,448	87,309	1.96
FY14 TOT			782,085	141,385	1,415,004	1,556,389	1,641,990	
FY14 AVG			65,174	11,782	117,917	129,699	136,833	1.99

NOTE: Retro through FY13 from WL80737A one year after year end. FY14 is R&S estimate.
 Afd code 49 not used for CHAP effective SFY06.
 Applications not tracked starting FY02.

*NOTE: In Fiscal Year 2001, December 2000 thru May 2001 included UNBORN, child on the Med Card Register. This inflated the Average Family Size.

AGED CASELOAD REPORT - ANNUAL SUMMARY
FY83 - FY01

Year	(1) Apps Rec	(2) Total XIX Cases	(3) MPP Retro Cases	(4) NSWD Inst Cases	(5) Non Inst Cases	(6) SSI Cases	(7) Potential XIX SSI Cases	(8) Aged AGCF
FY83 TOT	2,255	52,308		16,928	35,380	39,172	4,726	2,970
FY83 AVG	188	4,359		1,411	2,948	3,264	394	248
FY84 TOT	1,998	51,676	56,064	16,367	35,309	39,127	4,299	2,890
FY84 AVG	167	4,306	4,672	1,364	2,942	3,261	358	241
FY85 TOT	1,726	52,533	56,605	16,020	36,513	41,004	4,804	3,022
FY85 AVG	144	4,378	4,717	1,335	3,043	3,417	400	252
FY86 TOT	1,560	53,710	58,132	15,524	38,186	42,702	4,943	3,056
FY86 AVG	130	4,476	4,844	1,294	3,182	3,559	412	255
FY87 TOT	1,624	55,019	60,241	16,314	38,705	44,445	5,944	3,096
FY87 AVG	135	4,585	5,020	1,360	3,225	3,704	495	258
FY88 TOT	1,692	56,751	59,350	16,241	40,510	45,481	5,117	3,328
FY88 AVG	141	4,729	4,946	1,353	3,376	3,790	426	277
FY89 TOT	2,112	60,039	63,193	16,376	43,663	44,879	2,562	3,512
FY89 AVG	176	5,003	5,266	1,365	3,639	3,740	214	293
FY90 TOT	2,651	63,443	68,555	15,721	46,058	47,521	2,571	3,552
FY90 AVG	221	5,287	5,713	1,310	3,838	3,960	214	296
FY91 TOT	2,558	67,740	72,039	16,973	50,767	50,039	2,725	3,471
FY91 AVG	213	5,645	6,003	1,414	4,231	4,170	227	289
FY92 TOT	2,618	70,487	74,347	17,553	52,934	52,746	3,556	3,386
FY92 AVG	218	5,874	6,196	1,463	4,411	4,396	296	282
FY93 TOT	3,160	74,180	79,251	16,919	57,261	56,633	4,477	3,560
FY93 AVG	263	6,182	6,604	1,410	4,772	4,719	373	297
FY94 TOT	2,983	80,618	85,106	16,563	64,055	61,438	4,019	3,960
FY94 AVG	249	6,718	7,092	1,380	5,338	5,120	335	330
FY95 TOT	3,135	86,146	90,802	15,902	70,244	66,001	3,348	4,122
FY95 AVG	261	7,179	7,567	1,325	5,854	5,500	279	344
FY96 TOT	3,076	90,398	95,249	16,394	74,004	22,791	943	1,396
FY96 AVG	256	7,533	7,937	1,366	6,167	5,698	236	349
FY97 TOT	3,251	91,951	96,367	15,284	76,667	75,823	6,706	
FY97 AVG	271	7,663	8,031	1,274	6,389	6,319	559	
FY98 TOT	3,627	92,498	97,639	15,017	77,481	76,922	7,208	
FY98 AVG	302	7,708	8,137	1,251	6,457	6,410	601	
FY99 TOT	4,244	94,710	99,558	14,243	80,467	79,348	7,199	
FY99 AVG	354	7,893	8,297	1,187	6,706	6,612	600	
FY00 TOT	4,488	97,825	102,692	14,684	83,141			
FY00 AVG	374	8,152	8,558	1,224	6,928			
FY01 TOT	5,070	98,607	103,179	15,000	83,607			
FY01 AVG	423	8,217	8,598	1,250	6,967			

NOTES:
 Retro through FY01 from WL80737A one year after year end.
 AGCF not available from U.S. Treasury Department starting FY97.
 SSI not available from U.S. Treasury Department starting FY00.

AGED CASELOAD REPORT - ANNUAL SUMMARY
FY02 - FY14

Year	(1) Total XIX Cases	(2) MPP Retro Cases	(3) NSWD Inst Cases	(4) Non Inst Cases
FY02 TOT	103,170	107,024	15,661	87,509
FY02 AVG	8,598	8,919	1,305	7,292
FY03 TOT	108,173	111,491	15,376	92,797
FY03 AVG	9,014	9,291	1,281	7,733
FY04 TOT	113,545	117,860	15,265	98,280
FY04 AVG	9,462	9,822	1,272	8,190
FY05 TOT	118,326	121,502	15,371	102,955
FY05 AVG	9,861	10,125	1,281	8,580
FY06 TOT	122,885	125,336	15,030	107,855
FY06 AVG	10,240	10,445	1,253	8,988
FY07 TOT	126,996	129,755	14,464	112,532
FY07 AVG	10,583	10,814	1,205	9,378
FY08 TOT	131,955	133,444	15,213	116,742
FY08 AVG	10,996	11,120	1,268	9,729
FY09 TOT	133,984	136,164	15,683	118,301
FY09 AVG	11,165	11,347	1,307	9,858
FY10 TOT*	117,609	120,357	15,174	101,254
FY10 AVG*	9,801	1,030	1,265	8,438
FY11 TOT	121,958	124,285	15,365	105,437
FY11 AVG	10,163	10,357	1,280	8,786
FY12 TOT	124,771	126,552	13,737	110,106
FY12 AVG	10,398	10,546	1,145	9,176
FY13 TOT	127,881	130,824	13,143	113,945
FY13 AVG	10,657	10,902	1,095	9,495
FY14 TOT	131,685	133,635	12,695	118,312
FY14 AVG	10,974	11,136	1,058	9,859

NOTES: Retro through FY13 from WL80737A one year after year end. FY14 is R&S estimate.
Applications not tracked starting FY02.

*NOTE: Aged HCBW cases have been removed and will be tracked as a separate category starting with FY10.
This explains steep decline in FY10 totals and averages.

BLIND CASELOAD REPORT - ANNUAL SUMMARY
FY83 - FY01

Year	(1) Apps Rec	(2) Total XIX Cases	(3) MPP Retro Cases	(4) NSWD Inst Cases	(5) Non Inst Cases	(6) SSI Cases	(7) Potential XIX SSI Cases	(8) Aged AGCF
FY83 TOT	80	4,053		419	3,634	5,447	1,813	39
FY83 AVG	7	338		35	303	454	151	3
FY84 TOT	99	4,049	4,338	451	3,598	5,418	1,820	26
FY84 AVG	8	337	362	38	300	452	152	2
FY85 TOT	63	3,984	4,242	439	3,545	5,529	1,984	30
FY85 AVG	5	332	354	37	295	461	165	3
FY86 TOT	78	4,081	4,558	445	3,636	5,902	2,266	52
FY86 AVG	7	340	380	37	303	492	189	4
FY87 TOT	75	4,132	4,646	403	3,729	6,125	2,396	58
FY87 AVG	6	344	387	34	311	510	200	5
FY88 TOT	66	4,176	4,270	399	3,777	6,143	2,363	57
FY88 AVG	6	348	356	33	315	512	197	5
FY89 TOT	69	4,262	4,363	401	3,861	5,725	1,826	60
FY89 AVG	6	355	364	33	322	477	152	5
FY90 TOT	106	4,325	4,472	396	3,929	5,676	1,664	71
FY90 AVG	9	360	373	33	327	473	139	6
FY91 TOT	77	4,331	4,511	380	3,951	5,666	1,656	74
FY91 AVG	6	361	376	32	329	472	138	6
FY92 TOT	75	4,318	4,502	395	3,923	5,818	1,858	59
FY92 AVG	6	360	375	33	327	485	155	5
FY93 TOT	104	4,254	4,470	349	3,905	6,057	2,145	60
FY93 AVG	9	355	373	29	325	505	179	5
FY94 TOT	94	4,378	4,571	297	4,081	6,220	2,158	66
FY94 AVG	8	365	381	25	340	518	180	6
FY95 TOT	83	4,511	4,672	314	4,197	6,519	2,322	62
FY95 AVG	7	376	389	26	350	543	194	5
FY96 TOT	60	4,484	4,630	269	4,215	2,271	879	20
FY96 AVG	5	374	386	22	351	568	220	5
FY97 TOT	50	4,499	4,653	269	4,230	7,091	2,843	
FY97 AVG	4	375	388	22	353	591	237	
FY98 TOT	59	4,518	4,712	263	4,255	7,319	3,008	
FY98 AVG	5	377	393	22	355	610	251	
FY99 TOT	62	4,667	4,839	252	4,415	7,870	3,381	
FY99 AVG	5	389	403	21	368	656	282	
FY00 TOT	60	4,138	3,956	188	3,950			
FY00 AVG	5	345	330	16	329			
FY01 TOT	70	3,661	4,386	210	3,451			
FY01 AVG	6	305	366	18	288			

NOTES: Retro through FY01 from WL80737A one year after year end.
AGCF not available from U.S. Treasury Department starting FY97
SSI not available from U.S. Treasury Department starting FY00.

**BLIND CASELOAD REPORT - ANNUAL SUMMARY
FY02 - FY14**

Year	(1) Total XIX Cases	(2) MPP Retro Cases	(3) NSWD Inst Cases	(4) Non Inst Cases
FY02 TOT	3,662	4,492	210	3,452
FY02 AVG	305	374	18	288
FY03 TOT	3,902	3,976	184	3,718
FY03 AVG	325	331	15	310
FY04 TOT	4,072	4,211	195	3,877
FY04 AVG	339	351	16	323
FY05 TOT	4,128	4,239	186	3,942
FY05 AVG	344	353	16	329
FY06 TOT	4,253	4,334	177	4,076
FY06 AVG	354	361	15	340
FY07 TOT	4,439	4,507	172	4,267
FY07 AVG	370	376	14	356
FY08 TOT	4,387	4,455	187	4,200
FY08 AVG	366	371	16	350
FY09 TOT	4,568	4,620	207	4,361
FY09 AVG	381	385	17	363
FY10 TOT*	3,924	3,994	177	3,747
FY10 AVG*	327	333	15	312
FY11 TOT	4,031	4,076	182	3,849
FY11 AVG	336	340	15	321
FY12 TOT	4,132	4,226	172	3,960
FY12 AVG	344	352	14	330
FY13 TOT	4,028	4,112	166	3,862
FY13 AVG	336	343	14	322
FY14 TOT	4,057	4,167	144	3,913
FY14 AVG	338	347	12	326

NOTES: Retro through FY13 from WL80737A one year after year end. FY14 is R&S estimate.
Applications not tracked starting FY02.

***NOTE:** Blind HCBW cases have been removed and will be tracked as a separate category starting with FY10.
This explains steep decline in FY10 totals and averages.

DISABLED CASELOAD REPORT - ANNUAL SUMMARY
FY83 - FY01

Year	(1) Apps Rec	(2) Total XIX Cases	(3) MPP Retro Cases	(4) NSWD Inst Cases	(5) Non Inst Cases	(6) SSI Cases	(7) Potential XIX SSI Cases
FY83 TOT	4,161	31,709		4,972	26,737	35,640	6,703
FY83 AVG	347	2,642		414	2,228	2,970	559
FY84 TOT	3,620	34,117	39,024	4,983	29,134	39,379	8,000
FY84 AVG	302	2,843	3,252	415	2,428	3,282	667
FY85 TOT	3,371	38,838	43,077	4,888	33,950	43,802	7,673
FY85 AVG	281	3,237	3,590	407	2,829	3,650	639
FY86 TOT	3,175	42,955	47,962	5,159	37,796	47,953	8,067
FY86 AVG	265	3,580	3,997	430	3,150	3,996	672
FY87 TOT	3,520	46,966	52,187	5,252	41,714	52,128	8,126
FY87 AVG	293	3,914	4,349	438	3,476	4,344	677
FY88 TOT	3,512	51,199	57,409	5,337	45,862	57,431	9,888
FY88 AVG	293	4,267	4,784	445	3,822	4,786	824
FY89 TOT	4,265	56,370	63,630	5,540	50,830	61,829	9,021
FY89 AVG	355	4,698	5,303	462	4,236	5,152	752
FY90 TOT	6,348	62,631	71,864	5,840	56,572	69,002	10,513
FY90 AVG	529	5,219	5,989	487	4,714	5,750	876
FY91 TOT	7,456	70,028	82,149	5,910	64,118	76,779	11,562
FY91 AVG	621	5,836	6,846	493	5,343	6,398	964
FY92 TOT	9,342	82,729	98,745	6,286	76,443	89,587	12,776
FY92 AVG	779	6,894	8,229	524	6,370	7,466	1,065
FY93 TOT	10,480	99,492	115,898	6,303	93,189	108,955	16,853
FY93 AVG	873	8,291	9,658	525	7,766	9,080	1,404
FY94 TOT	12,271	115,579	134,126	5,895	109,684	130,334	22,471
FY94 AVG	1,023	9,632	11,177	491	9,140	10,861	1,873
FY95 TOT	15,107	135,409	155,782	5,872	129,537	151,100	23,953
FY95 AVG	1,259	11,284	12,982	489	10,795	12,592	1,996
FY96 TOT	15,183	154,364	175,091	6,154	148,210	54,275	7,766
FY96 AVG	1,265	12,864	14,591	513	12,351	13,569	1,942
FY97 TOT	15,047	163,275	181,434	6,380	156,895	179,586	25,888
FY97 AVG	1,254	13,606	15,120	532	13,075	14,966	2,157
FY98 TOT	15,199	167,738	188,430	6,554	161,184	184,676	27,397
FY98 AVG	1,267	13,978	15,703	546	13,432	15,390	2,283
FY99 TOT	15,690	180,310	201,304	6,789	173,521		
FY99 AVG	1,308	15,026	16,775	566	14,460		
FY00 TOT	13,870	191,794	212,482	7,400	184,394		
FY00 AVG	1,156	15,983	17,707	617	15,366		
FY01 TOT	13,099	209,579	232,224	7,394	202,185		
FY01 AVG	1,092	17,465	19,352	616	16,849		

NOTES: Retro through FY01 from WL80737A one year after year end.
SSI not available from U.S. Treasury Department starting FY99.

**DISABLED CASELOAD REPORT - ANNUAL SUMMARY
FY02 - FY14**

Year	(1) Total XIX Cases	(2) MPP Retro Cases	(3) NSWD Inst Cases	(4) Non Inst Cases
FY02 TOT	229,651	252,577	7,635	222,016
FY02 AVG	19,138	21,048	636	18,501
FY03 TOT	247,225	268,782	8,020	239,205
FY03 AVG	20,602	22,399	668	19,934
FY04 TOT	263,109	292,247	8,153	254,956
FY04 AVG	21,926	24,354	679	21,246
FY05 TOT	276,855	296,977	8,495	268,360
FY05 AVG	23,071	24,748	708	22,363
FY06 TOT	281,159	299,059	8,474	272,685
FY06 AVG	23,430	24,922	706	22,724
FY07 TOT	286,163	305,618	8,412	277,751
FY07 AVG	23,847	25,469	701	23,146
FY08 TOT	298,343	316,320	8,811	289,532
FY08 AVG	24,862	26,360	734	24,128
FY09 TOT	310,158	328,980	8,787	301,371
FY09 AVG	25,847	27,415	732	25,114
FY10 TOT*	307,439	330,737	8,287	298,488
FY10 AVG*	25,620	27,561	691	24,874
FY11 TOT	334,201	357,949	8,602	324,943
FY11 AVG	27,850	29,829	717	27,079
FY12 TOT	359,640	378,996	8,648	350,425
FY12 AVG	29,970	31,583	721	29,202
FY13 TOT	381,916	402,701	8,817	372,578
FY13 AVG	31,826	33,558	735	31,048
FY14 TOT	411,491	434,748	8,834	402,219
FY14 AVG	34,291	36,229	736	33,518

NOTES: Retro through FY13 from WL80737A one year after year end. FY14 is R&S estimate. Applications not tracked starting FY02.

***NOTE:** Disabled HCBW cases have been removed and will be tracked as a separate category starting with FY10. This explains steep decline in FY10 totals and averages.

MAABD CASELOAD REPORT - ANNUAL SUMMARY
FY83 - FY01

Year	(1) Apps Rec	(2) Total XIX Cases	(3) MPP Retro Cases	(4) NSWD Inst Cases	(5) Non Inst Cases	(6) SSI Cases	(7) Potential XIX SSI Cases	(8) Aged AGCF
FY83 TOT	6,496	88,070		22,319	65,751	80,259	13,242	3,009
FY83 AVG	542	7,339		1,860	5,479	6,688	1,104	251
FY84 TOT	5,717	89,842	99,426	21,801	68,041	83,924	14,119	2,916
FY84 AVG	477	7,486	8,286	1,817	5,670	6,995	1,177	243
FY85 TOT	5,160	95,355	103,924	21,347	74,008	90,335	14,461	3,052
FY85 AVG	430	7,947	8,661	1,779	6,167	7,528	1,204	255
FY86 TOT	4,813	100,746	110,652	21,128	79,618	96,557	15,276	3,108
FY86 AVG	402	8,396	9,221	1,761	6,635	8,047	1,273	259
FY87 TOT	5,219	106,117	117,074	21,969	84,148	102,698	16,466	3,154
FY87 AVG	434	8,843	9,756	1,832	7,012	8,558	1,372	263
FY88 TOT	5,270	112,126	121,029	21,977	90,149	109,055	17,368	3,385
FY88 AVG	440	9,344	10,086	1,831	7,513	9,088	1,447	282
FY89 TOT	6,446	120,671	131,186	22,317	98,354	112,433	13,409	3,572
FY89 AVG	537	10,056	10,933	1,860	8,197	9,369	1,118	298
FY90 TOT	9,105	130,399	144,891	21,957	106,559	122,199	14,748	3,623
FY90 AVG	759	10,866	12,075	1,830	8,879	10,183	1,229	302
FY91 TOT	10,091	142,099	158,699	23,263	118,836	132,484	15,943	3,545
FY91 AVG	840	11,842	13,225	1,939	9,903	11,040	1,329	295
FY92 TOT	12,035	157,534	177,594	24,234	133,300	148,151	18,190	3,445
FY92 AVG	1,003	13,128	14,800	2,020	11,108	12,347	1,516	287
FY93 TOT	13,744	177,926	199,619	23,571	154,355	171,645	23,475	3,620
FY93 AVG	1,145	14,828	16,635	1,964	12,863	14,304	1,956	302
FY94 TOT	15,348	200,575	223,803	22,755	177,820	197,992	28,648	4,026
FY94 AVG	1,280	16,715	18,650	1,896	14,818	16,499	2,388	336
FY95 TOT	18,325	226,066	251,256	22,088	203,978	223,620	29,623	4,184
FY95 AVG	1,527	18,839	20,938	1,841	16,998	18,635	2,469	349
FY96 TOT	18,319	249,246	274,970	22,817	226,429	79,337	9,588	1,416
FY96 AVG	1,527	20,771	22,914	1,904	18,869	19,834	2,397	354
FY97 TOT	18,348	259,725	282,454	21,933	237,792	262,500	35,437	
FY97 AVG	1,529	21,644	23,538	1,828	19,816	21,875	2,953	
FY98 TOT	18,885	264,754	289,643	21,834	242,920	268,917	37,613	
FY98 AVG	1,574	22,063	24,137	1,820	20,243	22,410	3,134	
FY99 TOT	19,996	279,687	305,701	21,284	258,403			
FY99 AVG	1,666	23,307	25,475	1,774	21,534			
FY00 TOT	18,418	293,757	319,130	22,272	271,485			
FY00 AVG	1,535	24,480	26,594	1,856	22,624			
FY01 TOT	18,239	311,847	339,789	22,604	289,243			
FY01 AVG	1,520	25,987	28,316	1,884	24,104			

NOTES: Retro through FY01 from WL80737A one year after year end.
AGCF not available from U.S. Treasury Department starting FY97.
SSI not available from U.S. Treasury Department starting FY99 for Aged & Blind.
SSI not available from U.S. Treasury Department starting FY00 for Disabled.

**MAABD CASELOAD REPORT - ANNUAL SUMMARY
FY02 - FY14**

Year	(1) Total XIX Cases	(2) MPP Retro Cases	(3) NSWD Inst Cases	(4) Non Inst Cases
FY02 TOT	336,483	364,093	23,506	312,977
FY02 AVG	28,040	30,341	1,959	26,081
FY03 TOT	359,300	384,249	23,580	335,720
FY03 AVG	29,942	32,021	1,965	27,977
FY04 TOT	380,726	414,318	23,613	357,113
FY04 AVG	31,727	34,527	1,968	29,759
FY05 TOT	399,309	422,718	24,052	375,257
FY05 AVG	33,276	35,227	2,004	31,271
FY06 TOT	408,297	428,729	23,681	384,616
FY06 AVG	34,025	35,727	1,973	32,051
FY07 TOT	417,598	439,880	23,048	394,550
FY07 AVG	34,800	36,659	1,921	32,879
FY08 TOT	434,685	454,219	24,211	410,474
FY08 AVG	36,224	37,852	2,018	34,206
FY09 TOT	448,710	469,764	24,677	424,033
FY09 AVG	37,393	39,147	2,056	35,336
FY10 TOT*	428,972	455,088	23,638	403,489
FY10 AVG*	35,748	37,924	1,970	33,624
FY11 TOT	460,190	486,310	24,149	434,229
FY11 AVG	38,349	40,526	2,012	36,186
FY12 TOT	488,543	509,771	22,557	464,491
FY12 AVG	40,712	42,481	1,880	38,708
FY13 TOT	513,825	537,637	22,126	490,385
FY13 AVG	42,819	44,803	1,844	40,865
FY14 TOT	547,233	572,550	21,673	524,444
FY14 AVG	45,603	47,713	1,806	43,704

NOTES:

Retro through FY13 from WL80737A one year after year end. FY14 is R&S estimate.
Applications not tracked starting FY02.

***NOTE:**

Aged, Blind & Disabled HCBW cases have been removed and will be tracked as a separate category starting with FY10. This explains steep decline in FY10 totals and averages.

HCBW (HOME & COMMUNITY BASED WAIVER) CASELOAD - ANNUAL SUMMARY

FY 10 - FY 14

	DWSS WIN HD1, HD3, HD9	DWSS CHIP HC1	DWSS WEARC HG1, HG3	DWSS AL AL1	DWSS MR/RC HR1, HR3, HR9	DWSS HCBW TOTAL	DWSS MPP Retro
FY	Cases	Cases	Cases	Cases	Cases	Cases	Cases
FY10 TOT	7,124	14,410	4,280	431	18,112	44,357	45,036
FY10 AVG	594	1,201	357	36	1,509	3,696	3,753
FY11 TOT	7,168	15,610	5,082	382	18,934	47,176	47,725
FY11 AVG	597	1,301	424	32	1,578	3,931	3,977
FY12 TOT	7,357	18,891	1,864	360	19,441	47,913	48,188
FY12 AVG	613	1,574	466	30	1,620	3,993	4,016
FY13 TOT	7,024	20,567		389	19,539	47,519	48,081
FY13 AVG	585	1,714		32	1,628	3,960	4,007
FY14 TOT	7,585	21,427		472	20,749	50,233	50,786
FY14 AVG	632	1,786		39	1,729	4,186	4,232

NOTE: DWSS HCBW CASES ARE FROM AFR56A MONTHLY AID CODE REPORT FOR THE CURRENT MONTH.

SOURCE: AFR56A, Total Cases for Aid Codes HD1, HD3, HD9, HC1, HG1, HG3, AL1, HR1, HR3, HR9.

NOTE: Retro through FY13 from WL80737A one year after year end. FY14 is R&S estimate

NOTE: Starting November 2011 CHIP & WEARC were combined for a new CHIP program category

WIN = Persons with Physical Disabilities

CHIP = Frail Elderly

WEARC = Elderly in Adult Residential Care

New CHIP = Frail Elderly and Elderly in Adult Residential Care

AL = Assisted Living

MR/RC = Persons with Mental Retardation and Related Conditions

QMB CASELOAD REPORT - ANNUAL SUMMARY
FY89 - FY01

Year	(1) Aged		(2) Blind		(3) Disabled		(4) MAABD		(5) Retro
	Apps	Cases	Apps	Cases	Apps	Cases	Apps	Cases	Total
FY89 TOT	1,439	451	3	7	400	248	1,842	706	1,802
FY89 AVG	240	75	1	1	67	41	307	118	300
FY90 TOT	1,147	11,071	3	47	398	4,701	1,548	15,819	17,058
FY90 AVG	96	923	0	4	33	392	129	1,318	1,422
FY91 TOT	648	12,815	3	90	315	5,853	966	18,758	19,174
FY91 AVG	54	1,068	0	8	26	488	81	1,563	1,598
FY92 TOT	974	15,291	2	144	480	7,596	1,456	23,031	23,897
FY92 AVG	81	1,274	0	12	40	633	121	1,919	1,991
FY93 TOT	931	16,636	5	137	471	9,672	1,407	26,445	27,696
FY93 AVG	78	1,386	0	11	39	806	117	2,204	2,308
FY94 TOT	946	18,299	5	208	713	11,740	1,664	30,247	31,773
FY94 AVG	79	1,525	0	17	59	978	139	2,521	2,648
FY95 TOT	1,112	20,893	8	218	1,012	15,058	2,132	36,169	38,710
FY95 AVG	93	1,741	1	18	84	1,255	178	3,014	3,226
FY96 TOT	999	23,744	5	200	1,122	18,326	2,126	42,270	44,909
FY96 AVG	83	1,979	0	17	94	1,527	177	3,523	3,742
FY97 TOT	1,011	25,498	5	145	1,193	21,949	2,209	47,592	50,025
FY97 AVG	84	2,125	0	12	99	1,829	184	3,966	4,169
FY98 TOT	1,137	26,339	6	122	1,143	22,954	2,286	49,415	52,158
FY98 AVG	95	2,195	1	10	95	1,913	191	4,118	4,347
FY99 TOT	1,289	28,288	5	128	1,228	26,314	2,522	54,730	55,582
FY99 AVG	107	2,357	0	11	102	2,193	210	4,561	4,632
FY00 TOT	954	30,824	4	110	1,365	29,082	2,323	60,016	59,401
FY00 AVG	80	2,569	0	9	114	2,424	194	5,001	4,950
FY01 TOT	722	31,588	1	98	836	30,992	1,559	62,678	62,563
FY01 AVG	60	2,632	0	8	70	2,583	130	5,223	5,214

NOTES: Retro through FY01 from WL80737A one year after year end.

QMB CASELOAD REPORT - ANNUAL SUMMARY

FY02 - FY14

Year	(1) Aged Cases	(2) Blind Cases	(3) Disabled Cases	(4) MAABD Cases	(5) Retro Total
FY02 TOT	33,321	85	33,514	66,920	66,789
FY02 AVG	2,777	7	2,793	5,577	5,566
FY03 TOT	40,139	125	38,119	78,383	77,244
FY03 AVG	3,345	10	3,177	6,532	6,437
FY04 TOT	47,965	169	42,559	90,693	92,524
FY04 AVG	3,997	14	3,547	7,558	7,710
FY05 TOT	43,901	219	44,716	88,836	88,914
FY05 AVG	3,658	18	3,726	7,403	7,410
FY06 TOT	39,531	200	43,389	83,120	82,741
FY06 AVG	3,294	17	3,616	6,927	6,895
FY07 TOT	40,998	203	44,347	85,548	85,054
FY07 AVG	3,417	17	3,696	7,129	7,088
FY08 TOT	44,056	186	47,843	92,085	91,131
FY08 AVG	3,671	16	3,987	7,674	7,594
FY09 TOT	48,537	235	53,314	102,086	101,172
FY09 AVG	4,045	20	4,443	8,507	8,431
FY10 TOT	50,923	219	58,336	109,478	108,845
FY10 AVG	4,244	18	4,861	9,123	9,070
FY11 TOT	59,510	202	68,472	128,184	126,445
FY11 AVG	4,959	17	5,706	10,682	10,537
FY12 TOT	72,181	243	79,667	152,091	150,709
FY12 AVG	6,015	20	6,639	12,674	12,559
FY13 TOT	77,709	290	84,602	162,601	162,076
FY13 AVG	6,476	24	7,050	13,550	13,506
FY14 TOT	83,709	327	96,119	180,155	180,155
FY14 AVG	6,976	27	8,010	15,013	15,013

NOTES: Retro through FY13 from WL80737A one year after year end. FY14 is R&S estimate.
Applications not tracked starting FY02.

TOTAL SLMB WITH QI & QJ CASELOAD REPORT - ANNUAL SUMMARY
FY94 - 09

Year	AGED		BLIND		DISABLED		SLMB	
	Apps	Cases	Apps	Cases	Apps	Cases	Apps	Cases
FY94 TOT	195	1,460	1	24	89	644	285	2,128
FY94 AVG	16	122	0	2	7	54	24	177
FY95 TOT	346	3,422	0	43	151	1,557	497	5,022
FY95 AVG	29	285	0	4	13	130	41	419
FY96 TOT	420	7,237	2	58	250	4,094	672	11,389
FY96 AVG	35	603	0	5	21	341	56	949
FY97 TOT	321	9,425	3	82	201	5,828	525	15,335
FY97 AVG	27	785	0	7	17	486	44	1,278
FY98 TOT	267	11,270	1	81	182	7,189	450	18,540
FY98 AVG	22	939	0	7	15	599	38	1,545
FY99 TOT	369	14,447	3	114	197	9,297	569	23,858
FY99 AVG	31	1,204	0	10	16	775	47	1,988
FY00 TOT	876	16,666	6	130	365	11,111	1,247	27,907
FY00 AVG	73	1,389	1	11	30	926	104	2,326
FY01 TOT	697	22,030	2	131	593	16,340	1,292	38,501
FY01 AVG	58	1,836	0	11	49	1,362	108	3,208
FY02 TOT		25,541		136		19,867		45,544
FY02 AVG		2,128		11		1,657		3,796
FY03 TOT#		31,695		116		22,248		54,059
FY03 AVG#		2,641		10		1,854		4,505
FY04 TOT		36,166		103		23,410		59,679
FY04 AVG		3,014		9		1,951		4,973
FY05 TOT		37,862		95		25,323		63,280
FY05 AVG		3,155		8		2,110		5,273
FY06 TOT		40,564		134		26,865		67,563
FY06 AVG		3,380		11		2,239		5,630
FY07 TOT		44,161		166		29,725		74,052
FY07 AVG		3,680		14		2,477		6,171
FY08 TOT		46,108		197		32,887		79,192
FY08 AVG		3,842		16		2,741		6,599
FY09 TOT		48,583		195		36,074		84,852
FY09 AVG		4,049		16		3,006		7,071

Note: Applications not tracked starting FY02.

Note: QJ benefits terminated December 2002.

TOTAL SLMB WITH QI CASELOAD REPORT - ANNUAL SUMMARY

FY10 - 14

Year	AGED	BLIND	DISABLED	SLMB	MPP
	Cases	Cases	Cases	Cases	RETRO Cases
FY10 TOT	51,966	236	41,631	93,833	97,256
FY10 AVG	4,331	20	3,469	7,819	8,105
FY11 TOT	60,953	241	51,196	112,390	115,196
FY11 AVG	5,079	20	4,266	9,366	9,600
FY12 TOT	70,899	232	57,939	129,070	132,792
FY12 AVG	5,908	19	4,828	10,756	11,066
FY13 TOT	74,155	239	63,255	137,649	142,349
FY13 AVG	6,180	20	5,271	11,471	11,862
FY14 TOT	73,421	299	68,114	141,834	145,522
FY14 AVG	6,118	25	5,676	11,820	12,127

Note: Applications not tracked starting FY02.

Note: Effective FY10 MPP Retro applied to SLMB Medicaid

Note: Retro through FY13 from WL80737A one year after year end. FY14 is R&S estimate.

**HEALTH INSURANCE WORK ADVANCEMENT PROGRAM
CASELOAD REPORT - ANNUAL SUMMARY
AID CODE WY9
FY05 - FY14**

Year	Cases	Disabled WY9	MPP Retro
FY05 TOT		86	117
FY05 AVG		7	10
FY06 TOT		250	278
FY06 AVG		21	23
FY07 TOT		245	254
FY07 AVG		20	21
FY08 TOT		298	336
FY08 AVG		25	28
FY09 TOT		197	204
FY09 AVG		16	17
FY10 TOT		151	149
FY10 AVG		13	12
FY11 TOT		123	126
FY11 AVG		10	11
FY12 TOT		100	100
FY12 AVG		8	8
FY13 TOT		74	76
FY13 AVG		6	6
FY14 TOT		47	47
FY14 AVG		4	4

NOTE: New program; started in FY05.

Source: Retro through FY13 from WL80737A one year after year end. FY14 is R&S estimate.

**COUNTY MATCH CASELOAD REPORT - ANNUAL SUMMARY
FY90 - FY01**

Year	Aged		Blind		Disabled		MAABD		MPP
	Apps	Cases	Apps	Cases	Apps	Cases	Apps	Cases	Retro Total
FY90 TOT	473	1,664	2	0	51	219	526	1,883	2,226
FY90 AVG	68	238	0	0	7	31	75	269	318
FY91 TOT	338	3,728	0	0	39	429	3,777	4,157	5,075
FY91 AVG	28	3,111	0	0	3	36	31	346	423
FY92 TOT	453	5,251	1	5	55	564	509	5,820	7,320
FY92 AVG	38	438	0	0	5	47	42	485	610
FY93 TOT	439	6,701	0	2	64	777	503	7,480	9,129
FY93 AVG	37	558	0	0	5	65	42	623	761
FY94 TOT	545	8,296	0	12	76	1,000	621	9,308	11,114
FY94 AVG	45	691	0	1	6	83	52	776	926
FY95 TOT	676	9,829	1	10	87	1,078	764	10,917	12,685
FY95 AVG	56	819	0	1	7	90	64	910	1,057
FY96 TOT	754	9,131	1	5	112	967	867	10,103	12,086
FY96 AVG	63	761	0	0	9	81	72	842	1,007
FY97 TOT	715	9,952	0	8	94	989	809	10,949	13,171
FY97 AVG	60	829	0	1	8	82	67	912	1,098
FY98 TOT	593	9,728	0	0	65	1,065	658	10,793	12,858
FY98 AVG	49	811	0	0	5	89	55	899	1,072
FY99 TOT	706	10,351	1	7	102	1,081	809	11,439	13,742
FY99 AVG	59	863	0	1	9	90	67	953	1,145
FY00 TOT	736	10,791	1	15	83	1,155	820	11,961	14,379
FY00 AVG	61	899	0	1	7	96	68	997	1,198
FY01 TOT	440	11,783	0	11	38	1,250	478	13,044	15,706
FY01 AVG	37	982	0	1	3	104	40	1,087	1,309

Source: Retro through FY01 from WL80737A one year after year end.

COUNTY MATCH CASELOAD REPORT - ANNUAL SUMMARY

FY02 - FY14

Year	Aged	Blind	Disabled	MAABD	MPP
	Cases	Cases	Cases	Cases	Retro Total
FY02 TOT	12,598	0	1,335	13,933	16,076
FY02 AVG	1,050	0	111	1,161	1,340
FY03 TOT	12,970	0	1,439	14,409	16,477
FY03 AVG	1,081	0	120	1,201	1,373
FY04 TOT	12,480	0	1,685	14,165	16,750
FY04 AVG	1,040	0	140	1,180	1,396
FY05 TOT	12,858	0	1,887	14,745	16,906
FY05 AVG	1,072	0	157	1,229	1,409
FY06 TOT	13,300	0	1,949	15,256	17,795
FY06 AVG	1,108	0	162	1,271	1,483
FY07 TOT	13,276	26	2,113	15,415	17,616
FY07 AVG	1,106	2	176	1,285	1,468
FY08 TOT	12,812	25	2,289	15,126	17,023
FY08 AVG	1,068	2	191	1,261	1,419
FY09 TOT	13,037	35	2,269	15,341	17,100
FY09 AVG	1,086	3	189	1,278	1,425
FY10 TOT	12,326	26	2,212	14,564	16,761
FY10 AVG	1,027	2	184	1,214	1,397
FY11 TOT	12,216	24	2,304	14,544	16,479
FY11 AVG	1,018	2	192	1,212	1,373
FY12 TOT	13,124	25	3,087	16,236	18,253
FY12 AVG	1,094	2	257	1,353	1,521
FY13 TOT	12,597	16	2,980	15,593	18,160
FY13 AVG	1,050	1	248	1,299	1,513
FY14 TOT	12,614	0	2,978	15,592	17,681
FY14 AVG	1,051	0	248	1,299	1,473

Source: Retro through FY13 from WL80737A one year after year end. FY14 is R&S estimate.

Note: Applications not tracked starting FY02.

CHILD WELFARE CASELOAD REPORT - ANNUAL SUMMARY
FY 95 - FY14

	XIX							MPP	Non-XIX
	Aid Code 20s	Aid Code 50s	Aid Code 60s	Aid Code 61	NSWD Aid Code 60s w/o 61	Aid Code 85	Tot CW XIX	Retro	Aid Codes 68 + 70s
FY95 TOT	1,205	11,187	17,375	N/A	17,375	0	29,767	32,668	1,005
FY95 AVG	100	932	1,448	N/A	1,448	0	2,481	2,722	84
FY96 TOT	1,190	12,836	18,563	2,017	16,546	0	32,589	34,098	965
FY96 AVG	99	1,070	1,547	168	1,379	0	2,716	2,842	80
FY97 TOT	953	13,932	18,036	3,261	14,775	4	32,925	34,791	1,039
FY97 AVG	79	1,161	1,503	272	1,231	0	2,744	2,899	87
FY98 TOT	545	23,245	16,766	3,364	13,402	18	40,574	40,381	2,709
FY98 AVG	45	1,937	1,397	280	1,117	2	3,381	3,365	226
FY99 TOT	103	28,544	14,651	2,927	11,724	50	43,348	41,586	3,484
FY99 AVG	9	2,379	1,221	244	977	4	3,612	3,466	290
FY00 TOT	118	29,948	16,019	3,992	12,027	167	46,252	42,803	3,488
FY00 AVG	10	2,496	1,335	333	1,002	14	3,854	3,567	291
FY01 TOT	96	28,598	19,329	4,891	14,438	85	48,108	45,982	3,278
FY01 AVG	8	2,383	1,611	408	1,203	7	4,009	3,832	273
FY02 TOT	141	27,223	23,978	6,559	17,419	200	51,542	51,622	3,697
FY02 AVG	12	2,269	1,998	547	1,452	17	4,295	4,302	308
FY03 TOT	338	31,654	27,378	9,553	17,825	448	59,818	59,334	3,654
FY03 AVG	28	2,638	2,282	796	1,485	37	4,985	4,945	305
FY04 TOT	1,983	32,285	26,340	7,281	19,059	448	61,056	60,620	1,411
FY04 AVG	165	2,690	2,195	607	1,588	37	5,088	5,052	118
FY05 TOT	4,082	37,742	32,988	7,105	25,883	439	75,251	70,638	1,222
FY05 AVG	340	3,145	2,749	592	2,157	37	6,271	5,887	102
FY06 TOT	6,561	42,854	37,879	7,863	30,016	318	87,612	83,405	1,134
FY06 AVG	547	3,571	3,157	655	2,501	27	7,301	6,950	95
FY07 TOT	5,569	43,271	36,795	5,388	31,407	527	86,162	83,956	328
FY07 AVG	464	3,606	3,066	449	2,617	44	7,180	6,996	27
FY08 TOT	5,514	46,763	40,294	5,239	35,055	903	93,474	89,908	420
FY08 AVG	460	3,897	3,358	437	2,921	75	7,790	7,492	35
FY09 TOT	5,517	47,139	41,128	5,235	35,893	1,179	94,963	90,408	464
FY09 AVG	460	3,928	3,427	436	2,991	98	7,914	7,534	39
FY10 TOT	6,207	36,004	53,430	5,330	48,100	1,322	96,963	90,675	740
FY10 AVG	517	3,000	4,453	444	4,008	110	8,080	7,556	62

NOTES: Prior to 12/95, Aid Code 61 was counted as part of Aid Code 62.

Retro through FY10 from WL80737A one year after year end.

CHILD WELFARE CASELOAD REPORT - ANNUAL SUMMARY
FY 95 - FY14

12/10/2014

	XIX						MPP	Non-XIX	
	Aid Code 20s	Aid Code 50s	Aid Code 60s	Aid Code 61	NSWD Aid Code 60s w/o 61	Aid Code 85	Retire	Aid Codes 68+70s	
						Tot CW XIX			
FM95 TOT	1,205	11,187	17,375	N A	17,375	0	29,767	32,668	1,005
FM95 AVG	100	932	1,448	N A	1,448	0	2,481	2,722	84
FM96 TOT	1,190	12,836	18,563	2,017	16,546	0	32,589	34,098	965
FM96 AVG	99	1,070	1,547	168	1,379	0	2,716	2,842	80
FM97 TOT	953	13,932	18,036	3,261	14,775	4	32,925	34,791	1,039
FM97 AVG	79	1,161	1,503	272	1,231	0	2,744	2,899	87
FM98 TOT	545	23,245	16,766	3,364	13,402	18	40,574	40,382	2,709
FM98 AVG	45	1,937	1,397	280	1,117	2	3,381	3,365	226
FM99 TOT	103	28,544	14,651	2,927	11,724	50	43,348	41,586	3,484
FM99 AVG	9	2,379	1,221	244	977	4	3,612	3,466	290
FM00 TOT	118	29,948	16,019	3,992	12,027	167	46,252	42,803	3,488
FM00 AVG	10	2,496	1,335	333	1,002	14	3,854	3,567	291
FM01 TOT	96	28,598	19,329	4,891	14,438	85	48,108	45,982	3,278
FM01 AVG	8	2,383	1,611	408	1,203	7	4,009	3,832	273
FM02 TOT	141	27,223	23,978	6,559	17,419	200	51,542	51,622	3,697
FM02 AVG	12	2,269	1,998	547	1,452	17	4,295	4,302	308
FM03 TOT	338	31,654	27,378	9,553	17,825	448	59,818	59,334	3,654
FM03 AVG	28	2,638	2,282	796	1,485	37	4,985	4,945	305
FM04 TOT	1,983	32,285	26,340	7,281	19,059	448	61,056	60,620	1,411
FM04 AVG	165	2,690	2,195	607	1,588	37	5,088	5,052	118
FM05 TOT	4,082	37,742	32,988	7,105	25,883	439	75,251	70,638	1,222
FM05 AVG	340	3,145	2,749	592	2,157	37	6,271	5,887	102
FM06 TOT	6,561	42,854	37,879	7,863	30,016	338	87,612	83,405	1,134
FM06 AVG	547	3,571	3,157	655	2,501	27	7,301	6,950	95
FM07 TOT	5,569	43,271	36,795	5,388	31,407	527	86,162	83,956	328
FM07 AVG	464	3,606	3,066	449	2,617	44	7,180	6,996	27
FM08 TOT	5,514	46,763	40,294	5,239	35,055	903	93,474	89,908	420
FM08 AVG	460	3,897	3,358	437	2,921	75	7,790	7,492	35
FM09 TOT	5,517	47,139	41,128	5,235	35,893	1,179	94,963	90,408	464
FM09 AVG	460	3,928	3,427	436	2,991	98	7,914	7,534	39
FM10 TOT	6,207	36,004	53,430	5,330	48,100	1,322	96,963	90,675	740
FM10 AVG	517	3,000	4,453	444	4,008	110	8,080	7,556	62

NOTES: Prior to 12/95, Aid Code 61 was counted as part of Aid Code 62.

Retire through FY10 from WLS0737A one year after year end.

CHILD WELFARE CASELOAD HISTORY

FY11-FY14

FY	Aid Code 20s		Aid Code 50s		Aid Code 60s (No 61)		Total Aid Code 20s, 50s & 60s (No 61)		Total Aid Code 61 (Includes ROP)		Total Aid Code 61 MPP Retro		Total CW XIX MPP Retro		Non-XIX Aid Codes 66, 68 + 70s		Total Title XIX & Non-XIX W/Retro	
	7,007	584	39,168	3,264	48,564	4,047	94,739	7,895	83,967	4,795	1,205	6,000	5,473	100,739	89,440	718	90,158	
FY11 TOT																		
FY11 AVG																		
FY12 TOT	581	48	46,791	3,899	34,499	2,875	81,871	6,823	83,134	3,514	894	4,408	4,639	86,279	87,773	704	88,477	
FY12 AVG																		
FY13 TOT	68	6	55,067	4,589	39,269	3,272	94,404	7,867	95,882	3,267	397	3,664	3,880	98,068	99,762	605	100,367	
FY13 AVG																		
FY14 TOT	43	4	67,418	5,618	37,225	3,102	104,686	8,724	106,361	2,865	296	3,161	3,332	107,847	109,693	532	110,225	
FY14 AVG																		

NOTES: Retro through FY13 from WL80737A one year after year end. SFY 14 is R&S estimate.

SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) REPORT - ANNUAL SUMMARY
AFTER RECONCILIATION
FY88- FY01

Year	(1) APPS RECEIVED		(2) APPS PROCESSED		(3) AUTHORIZED CASES		(4) PARTICIPATING CASES		(5) PARTICIPATING PERSONS		(6) AVG FAMILY SIZE		(7) VALUE	(8) AVG PER CASE	(9) AVG PER PERSON	(10) DMI RET	(11) DIR RET	(12) TOT RET
	PA	NA	PA	NA	PA	NA	PA	NA	PA	NA	PA	NA						
FY85 TOT	4,187	43,412	47,599	28,975	155,370	183,745	27,531	145,325	172,856	84,434	302,813	387,247	\$21,028,093	\$121.65	\$54.30	5,441	541	5,441
FY85 AVG	349	3,618	3,907	2,365	12,948	15,513	2,294	12,110	14,404	7,036	25,234	32,270	\$17,523,341	\$121.65	\$54.30	453	453	453
FY86 TOT	3,909	42,669	46,578	33,015	158,135	191,150	31,822	147,807	179,629	97,723	302,656	400,379	\$21,824,575	\$121.50	\$54.51	6,542	654	6,542
FY86 AVG	326	3,556	3,882	2,751	13,178	15,929	2,652	12,317	14,909	8,144	25,221	33,365	\$18,187,715	\$121.50	\$54.51	545	545	545
FY87 TOT	4,227	42,615	46,842	35,812	168,119	203,931	34,876	158,430	193,306	107,824	320,541	428,365	\$23,265,589	\$120.36	\$54.31	6,546	656	6,546
FY87 AVG	352	3,551	3,903	2,984	14,010	16,994	2,906	13,203	16,109	8,985	26,172	35,697	\$19,987,799	\$120.36	\$54.31	546	546	546
FY88 TOT	4,122	42,940	47,062	38,773	167,842	206,015	37,129	159,677	196,806	115,788	313,056	428,844	\$24,503,975	\$124.51	\$57.14	6,985	698	6,985
FY88 AVG	344	3,578	3,922	3,181	13,987	17,168	3,094	13,306	16,400	9,649	26,088	35,737	\$2,041,998	\$124.51	\$57.14	582	582	582
FY89 TOT	4,952	43,941	48,893	47,802	182,819	230,621	45,764	173,734	219,498	142,152	333,707	475,859	\$28,674,711	\$130.64	\$60.26	11,135	928	11,135
FY89 AVG	413	3,662	4,075	3,984	15,235	19,219	3,814	14,478	18,292	11,846	27,809	39,655	\$2,389,559	\$130.64	\$60.26	928	928	928
FY90 TOT	8,038	56,091	64,129	59,145	214,005	273,150	54,791	205,092	259,883	169,735	409,892	579,627	\$37,979,998	\$146.14	\$65.52	12,912	1,076	12,912
FY90 AVG	670	4,674	5,344	4,929	17,834	22,763	4,566	17,091	21,657	14,145	34,158	48,303	\$3,164,999	\$146.14	\$65.52	1,076	1,076	1,076
FY91 TOT	9,360	74,849	84,209	65,913	262,819	328,732	60,770	250,934	311,704	188,311	518,485	706,796	\$50,903,549	\$163.31	\$72.02	12,988	1,082	12,988
FY91 AVG	780	6,237	7,017	5,603	21,902	27,395	5,064	20,911	25,975	15,693	43,207	58,900	\$4,241,962	\$163.31	\$72.02	1,082	1,082	1,082
FY92 TOT	11,550	94,181	105,731	81,504	348,906	430,410	74,593	329,706	404,239	227,868	684,074	911,942	\$70,370,210	\$174.05	\$77.17	11,870	971	11,870
FY92 AVG	963	7,848	8,811	6,792	29,076	35,868	6,216	27,476	33,692	18,989	57,006	75,995	\$5,864,184	\$174.05	\$77.17	989	971	989
FY93 TOT	11,376	104,925	116,301	86,945	421,905	508,850	81,136	410,068	491,204	245,532	842,609	1,088,141	\$83,730,380	\$170.46	\$76.95	4,421	3,085	7,506
FY93 AVG	948	8,744	9,692	7,245	35,159	42,404	6,761	34,172	40,933	20,461	70,217	90,678	\$6,977,532	\$170.46	\$76.95	368	257	625
FY94 TOT	12,989	111,855	124,844	91,805	457,085	548,890	85,605	444,904	530,509	259,735	897,899	1,157,634	\$90,839,028	\$171.23	\$78.47	2,427	471	2,898
FY94 AVG	1,082	9,321	10,403	7,660	38,090	45,740	7,134	37,075	44,209	21,645	74,825	96,470	\$7,569,919	\$171.23	\$78.47	202	39	241
FY95 TOT	14,059	112,218	126,277	94,677	470,912	565,589	79,817	466,387	546,204	241,840	935,633	1,177,473	\$94,591,541	\$173.18	\$80.33	2,070	541	2,611
FY95 AVG	1,172	9,352	10,523	7,890	39,243	47,132	6,651	38,866	45,517	20,153	77,969	98,123	\$7,885,628	\$173.18	\$80.33	173	45	218
FY96 TOT	13,800	113,983	127,783	90,286	481,804	572,090	75,133	477,407	552,540	225,911	946,466	1,172,377	\$95,575,952	\$172.98	\$81.52	1,963	431	2,394
FY96 AVG	1,150	9,499	10,649	7,524	40,150	47,674	6,261	39,784	46,945	18,526	78,872	97,698	\$7,964,663	\$172.98	\$81.52	164	36	200
FY97 TOT	8,747	87,834	94,493	66,591	318,691	386,866	53,007	318,691	386,866	164,498	877,273	1,041,771	\$82,010,465	\$166.59	\$78.72	2,028	391	2,419
FY97 AVG	555	7,320	7,874	5,563	26,762	31,348	4,467	26,762	31,348	13,708	41,025	48,614	\$6,834,205	\$166.59	\$78.72	169	33	202
FY98 TOT	6,555	82,094	88,649	65,812	267,672	313,348	35,712	317,243	352,955	112,731	649,323	762,054	\$67,216,808	\$166.39	\$75.82	1,762	264	2,026
FY98 AVG	546	6,841	7,387	5,486	22,672	26,003	2,976	26,437	29,413	9,394	54,110	63,505	\$4,921,987	\$166.39	\$75.82	147	22	169
FY99 TOT	8,977	88,148	97,125	76,613	328,058	376,175	35,712	317,243	352,955	112,731	649,323	762,054	\$69,063,848	\$167.34	\$77.51	1,887	219	2,106
FY99 AVG	748	7,346	8,094	6,376	27,672	31,348	2,976	26,437	29,413	9,394	54,110	63,505	\$4,921,987	\$167.34	\$77.51	157	18	176
FY00 TOT	6,213	76,613	82,826	60,787	267,672	313,348	35,712	317,243	352,955	112,731	649,323	762,054	\$67,216,808	\$167.71	\$77.79	1,664	434	2,098
FY00 AVG	518	6,384	6,902	5,065	22,276	26,003	2,013	26,509	28,522	6,257	55,233	61,490	\$5,740,692	\$167.71	\$77.79	139	362	501
FY01 TOT	2,619	53,352	55,971	43,74	171,683	208,188	29,802	352,065	381,853	91,844	748,347	800,191	\$64,127,521	\$167.94	\$76.32	2,107	17,600	19,707
FY01 AVG	218	4,446	4,664	3,645	14,483	16,698	2,484	29,338	31,821	7,654	62,562	70,016	\$5,343,960	\$167.94	\$76.32	176	1,467	1,642

SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) REPORT - ANNUAL SUMMARY
FY02 - FY14

12/10/2014

PA	(1) AUTHORIZED CASES		(2) PARTICIPATING CASES			(3) PARTICIPATING PERSONS			(4) AVG FAMILY SIZE			(5) VALUE	(6) AVG PER CASE	(7) AVG PER PERSON	(8) DMI RET	(9) DIR RET	(10) TOT RET
	PA	NA	TOTAL	PA	NA	TOTAL	PA	NA	TOTAL	PA	NA						
182,389	346,597	528,986	52,644	441,515	494,159	162,686	931,906	1,094,592	3.1	2.1	2.2	\$88,811,716	\$179.72	\$81.14	2,137	17,062	19,199
15,199	28,883	44,082	4,387	36,793	41,180	13,557	77,659	91,216	2.6	2.3	2.3	\$7,400,976	\$191.87	\$84.96	178	1,422	1,600
194,712	386,978	581,690	104,035	464,299	568,334	236,151	1,047,440	1,283,591	2.6	2.3	2.3	\$109,047,479	\$185.99	\$82.56			
16,226	32,248	48,474	8,670	38,692	47,361	19,679	87,287	106,966	1.7	2.5	2.3	\$9,886,049	\$192.50	\$86.33			
189,489	461,350	650,839	188,642	449,189	637,831	312,971	1,124,024	1,436,995	1.6	2.5	2.2	\$126,436,277	\$190.52	\$87.64			
15,791	38,446	54,237	15,720	37,432	53,153	26,081	93,669	119,750	1.5	2.4	2.2	\$10,373,877	\$190.52	\$87.64			
184,263	482,075	666,338	184,162	472,665	656,827	287,168	1,177,330	1,464,498	1.4	2.4	2.1	\$129,249,045	\$193.28	\$90.06			
15,355	40,173	55,528	15,347	39,389	54,736	23,931	98,111	122,042	1.5	2.4	2.2	\$10,536,356	\$204.86	\$95.69			
186,903	476,069	662,972	186,157	467,240	653,397	278,027	1,142,407	1,420,434	1.5	2.4	2.2	\$124,486,526	\$241.46	\$112.16			
15,575	39,672	55,248	15,513	38,937	54,450	23,169	95,201	118,370	1.5	2.4	2.2	\$10,373,877	\$241.46	\$112.16			
189,339	490,118	679,457	187,778	480,929	668,707	269,346	1,165,809	1,435,155	1.4	2.4	2.1	\$129,249,045	\$193.28	\$90.06			
15,778	40,843	56,621	15,648	40,077	55,726	22,446	97,151	119,596	1.4	2.4	2.1	\$10,770,754	\$193.28	\$90.06			
207,956	575,206	783,162	206,410	564,788	771,198	305,150	1,345,921	1,651,071	1.5	2.4	2.1	\$157,984,295	\$204.86	\$95.69			
17,330	47,934	65,264	17,201	47,066	64,267	25,429	112,160	137,589	1.5	2.4	2.1	\$13,165,358	\$204.86	\$95.69			
227,210	793,977	1,021,187	224,511	777,666	1,002,177	330,645	1,826,833	2,157,478	1.5	2.4	2.2	\$241,986,318	\$241.46	\$112.16			
18,934	66,165	85,099	18,709	64,806	83,515	27,554	152,236	179,790	1.5	2.4	2.2	\$20,165,527	\$241.46	\$112.16			
252,445	1,226,103	1,478,548	249,873	1,198,669	1,448,512	383,044	2,741,963	3,125,007	1.5	2.3	2.2	\$381,588,683	\$263.43	\$122.11			
21,037	102,175	123,212	20,820	99,889	120,709	31,920	228,497	260,417	1.5	2.3	2.2	\$31,799,057	\$263.43	\$122.11			
269,051	1,578,160	1,847,211	266,469	1,547,529	1,813,998	409,907	3,469,568	3,879,475	1.5	2.2	2.1	\$477,682,415	\$263.33	\$123.13			
22,421	131,513	153,934	22,206	128,961	151,167	34,159	289,131	323,290	1.5	2.2	2.1	\$39,806,868	\$263.33	\$123.13			
285,783	1,754,307	2,040,090	282,843	1,723,411	2,006,254	417,618	3,808,252	4,225,870	1.5	2.2	2.1	\$518,493,663	\$258.44	\$122.70			
23,815	146,192	170,008	23,570	143,618	167,188	34,802	317,354	352,156	1.5	2.2	2.1	\$43,207,805	\$258.44	\$122.70			
301,179	1,812,349	2,113,528	297,233	1,778,640	2,075,873	431,291	3,871,813	4,303,104	1.5	2.2	2.1	\$524,977,396	\$252.89	\$122.00			
25,098	151,029	176,127	24,769	148,220	172,989	35,941	322,651	358,592	1.5	2.2	2.1	\$43,748,116	\$252.89	\$122.00			
328,240	1,907,119	2,235,359	323,166	1,881,427	2,204,593	480,669	4,025,404	4,506,073	1.5	2.1	2.0	\$527,560,395	\$239.30	\$117.08			
27,353	158,927	186,280	26,931	156,786	183,716	40,056	335,450	375,506	1.5	2.1	2.0	\$43,963,366	\$239.30	\$117.08			

Applications not tracked starting FY02.
EBT starts FY2003 - DMI and DIR returns no longer used.
In March 2003, federal mandated changes for definitions of "PA" and "NA" for Participating Cases and Persons implemented. This has affected the average family size for both in FY2003.
In April 2003, the issuance cycle was changed from a fiscal month to a calendar month.

**NEVADA CHECK UP PROGRAM
CASELOAD REPORT - ANNUAL SUMMARY
AID CODE NC
FY14**

Year	CHECK UP (NC) CASES	CHECK UP (NC) RECIPIENTS	MPP RETRO	AVERAGE FAMILY SIZE
FY14 TOT	148,319	261,248	261,248	
FY14 AVG	12,360	21,771	21,771	1.76

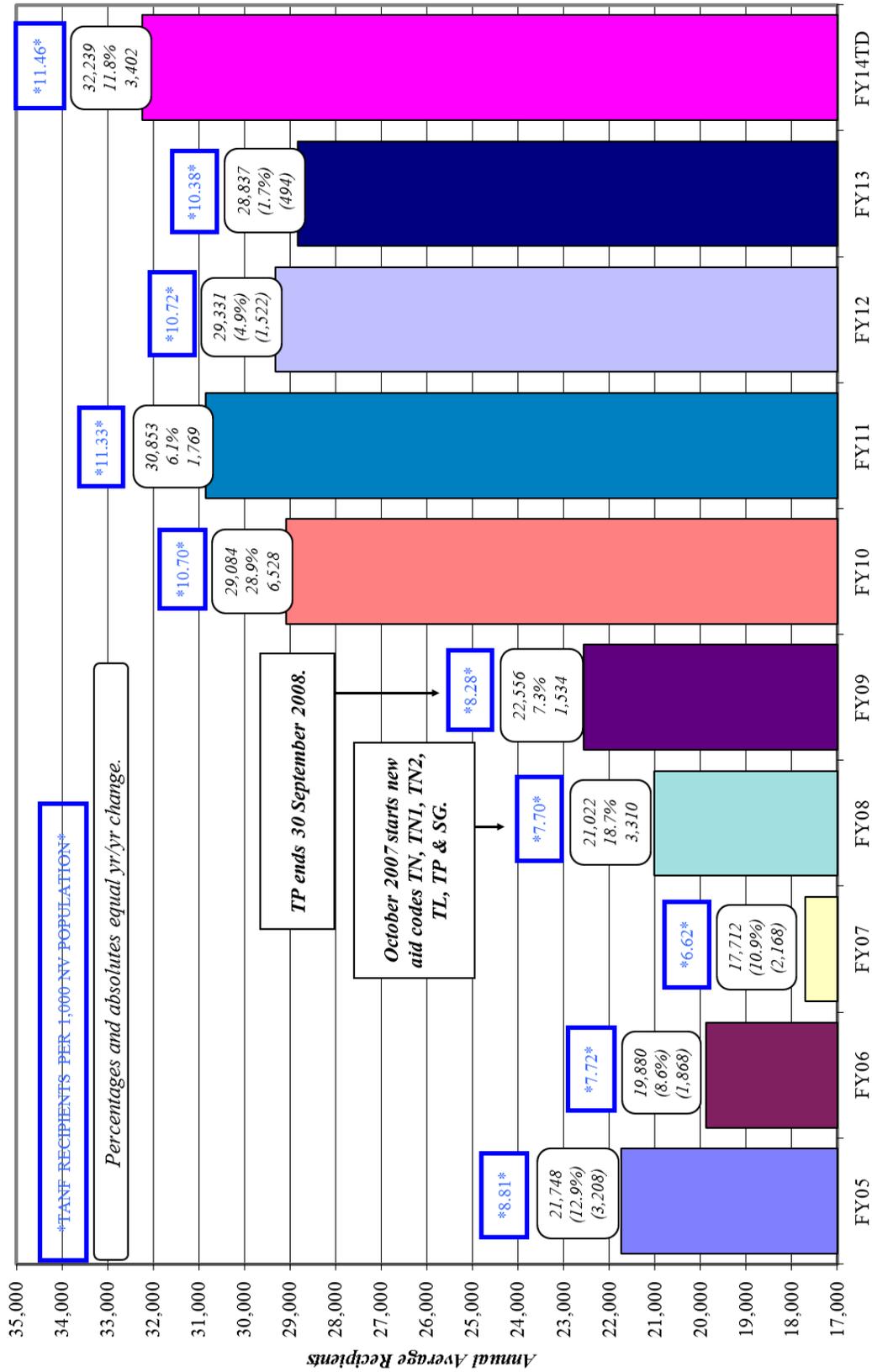
NOTE: *NEVADA CHECK UP/CHIP WAS TRANSFERRED FROM DHC FP TO DWSS EFFECTIVE SFY14*

NOTE: MPP RETRO IS R&S ESTIMATE; FY14 = 0.0%

NEVADA DIVISION OF WELFARE & SUPPORTIVE SERVICES

TANF Grants: FY05-FY14YTD

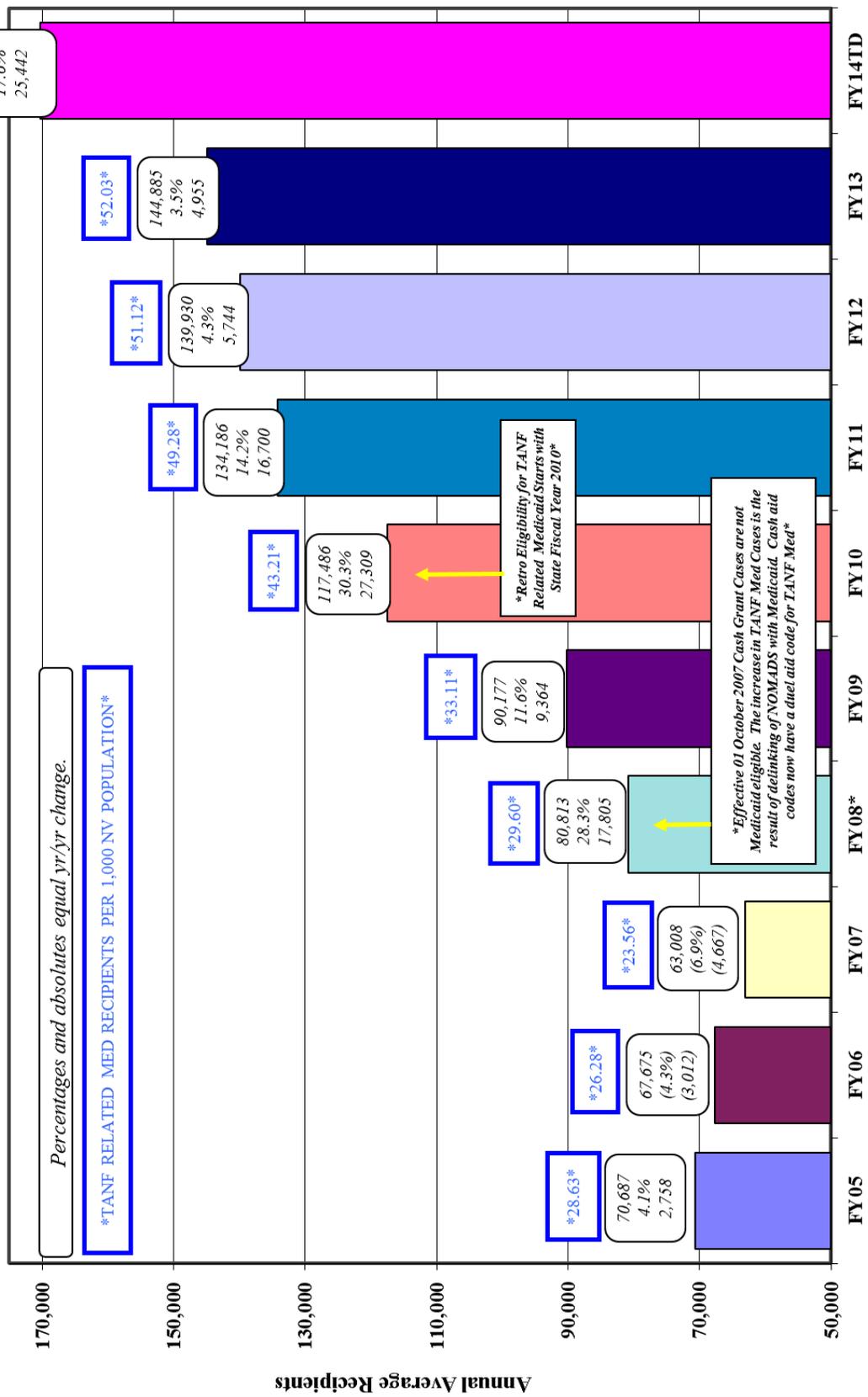
FYTD = June 2014



NEVADA DIVISION OF WELFARE & SUPPORTIVE SERVICES

TANF RELATED MED (with Retros): FY05 - FY14YTD

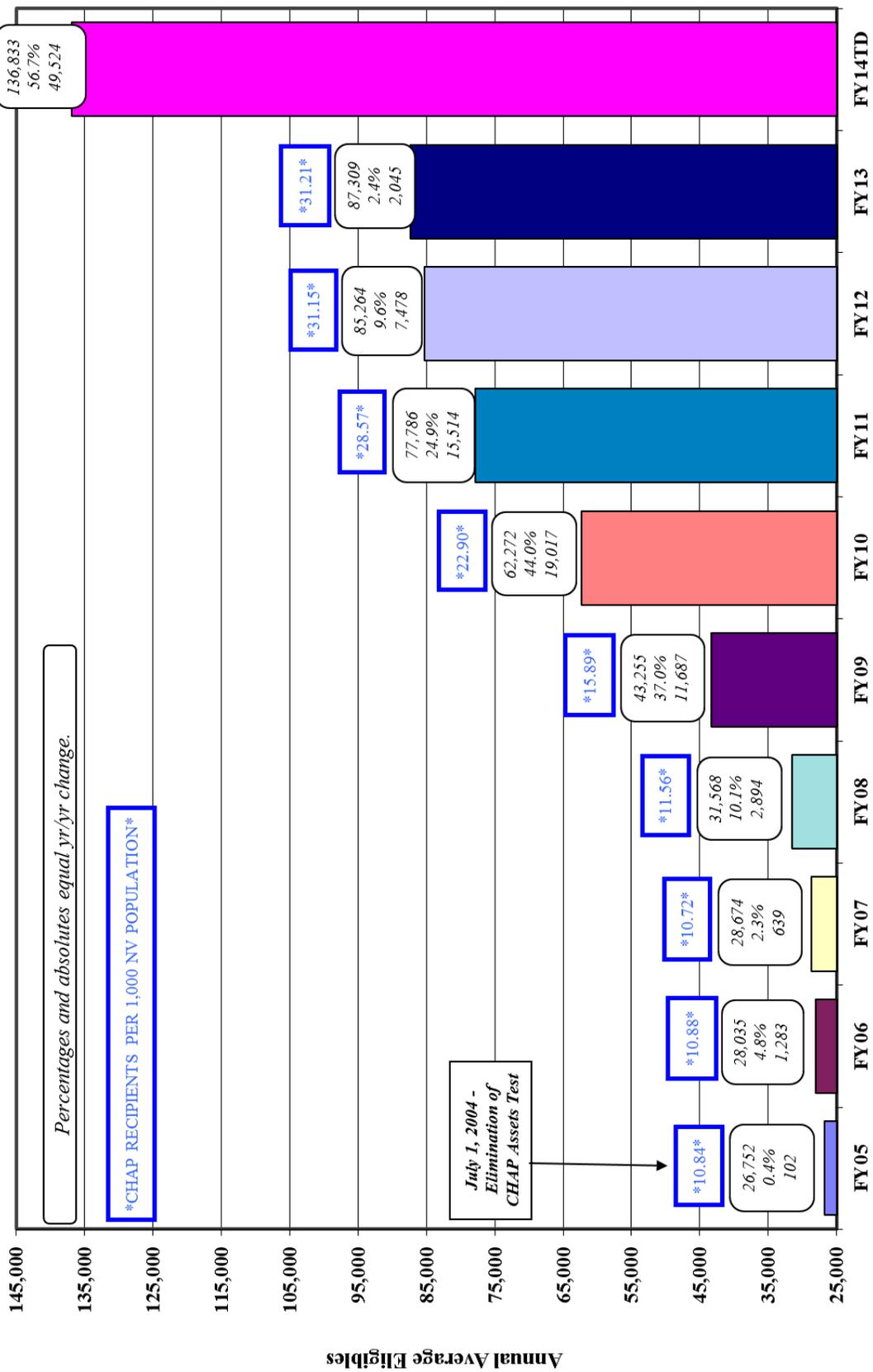
FYTD = June 2014



NEVADA DIVISION OF WELFARE & SUPPORTIVE SERVICES

CHAP Recipients (with Retros): FY05 - FY14YTD

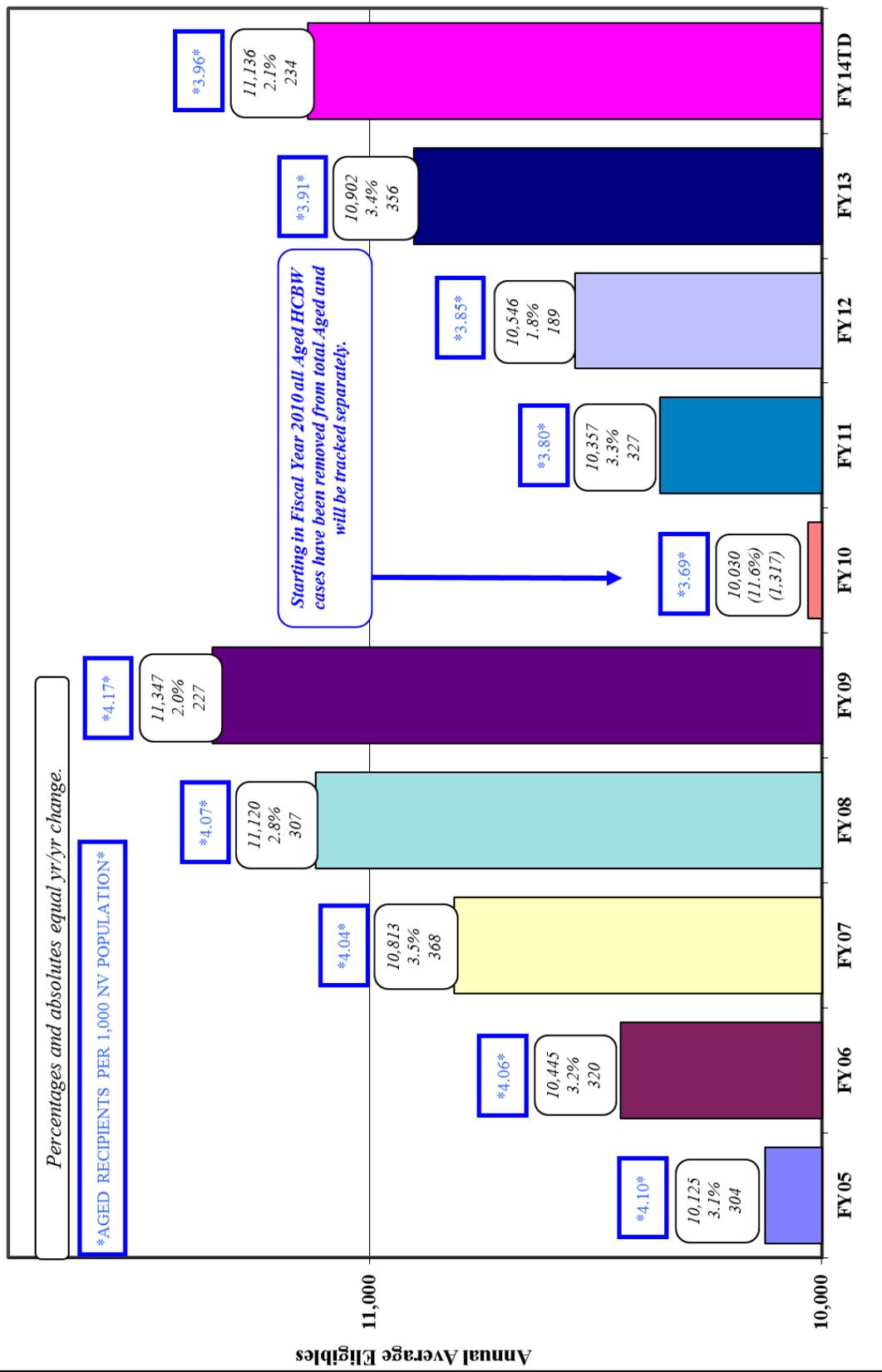
FYTD = June 2014



NEVADA DIVISION OF WELFARE & SUPPORTIVE SERVICES

Aged Recipients (with Retros): FY05 - FY14YTD

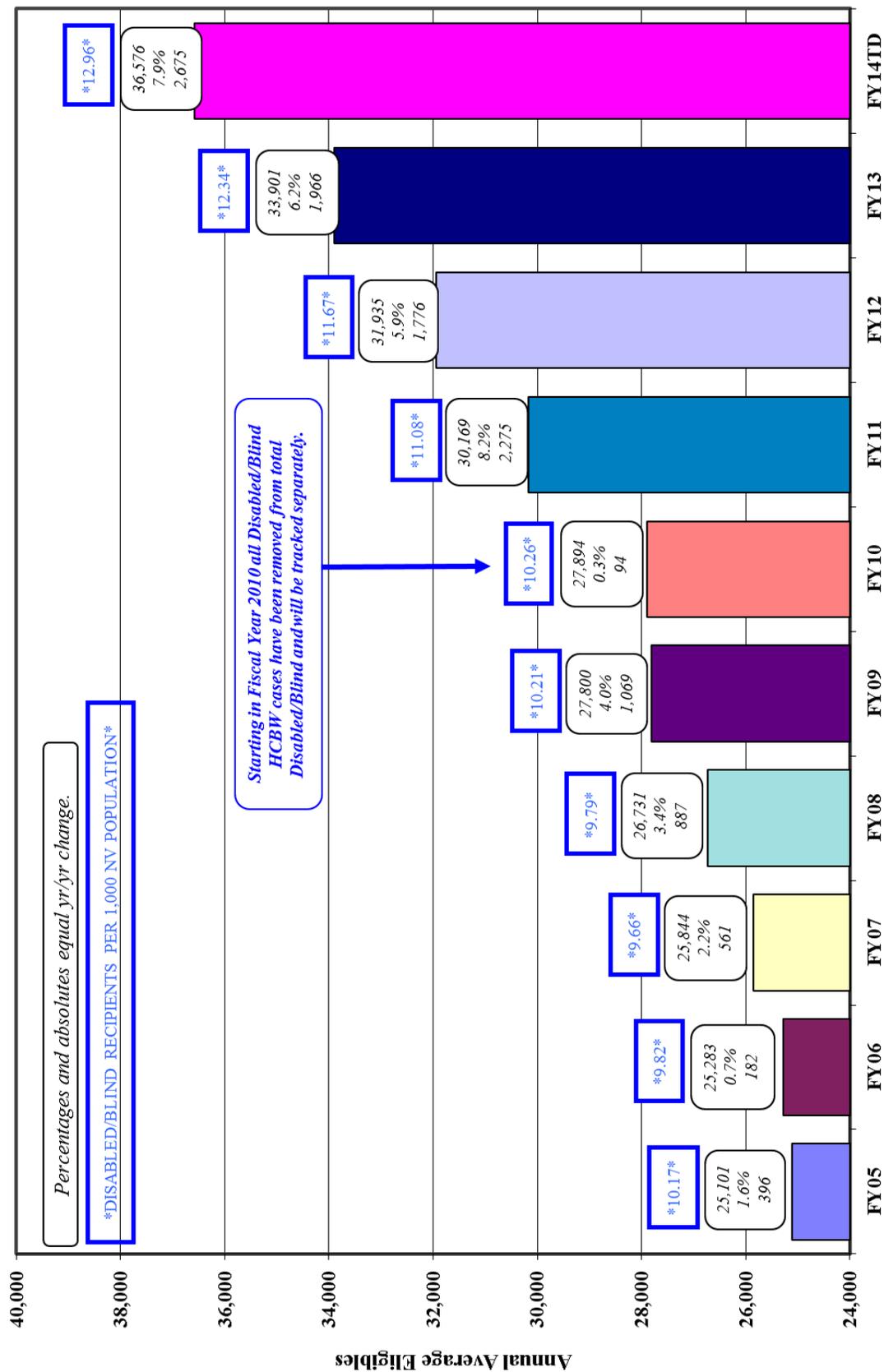
FYTD = June 2014



NEVADA DIVISION OF WELFARE & SUPPORTIVE SERVICES

Disabled/Blind Recipients (with Retros): FY05-FY14YTD

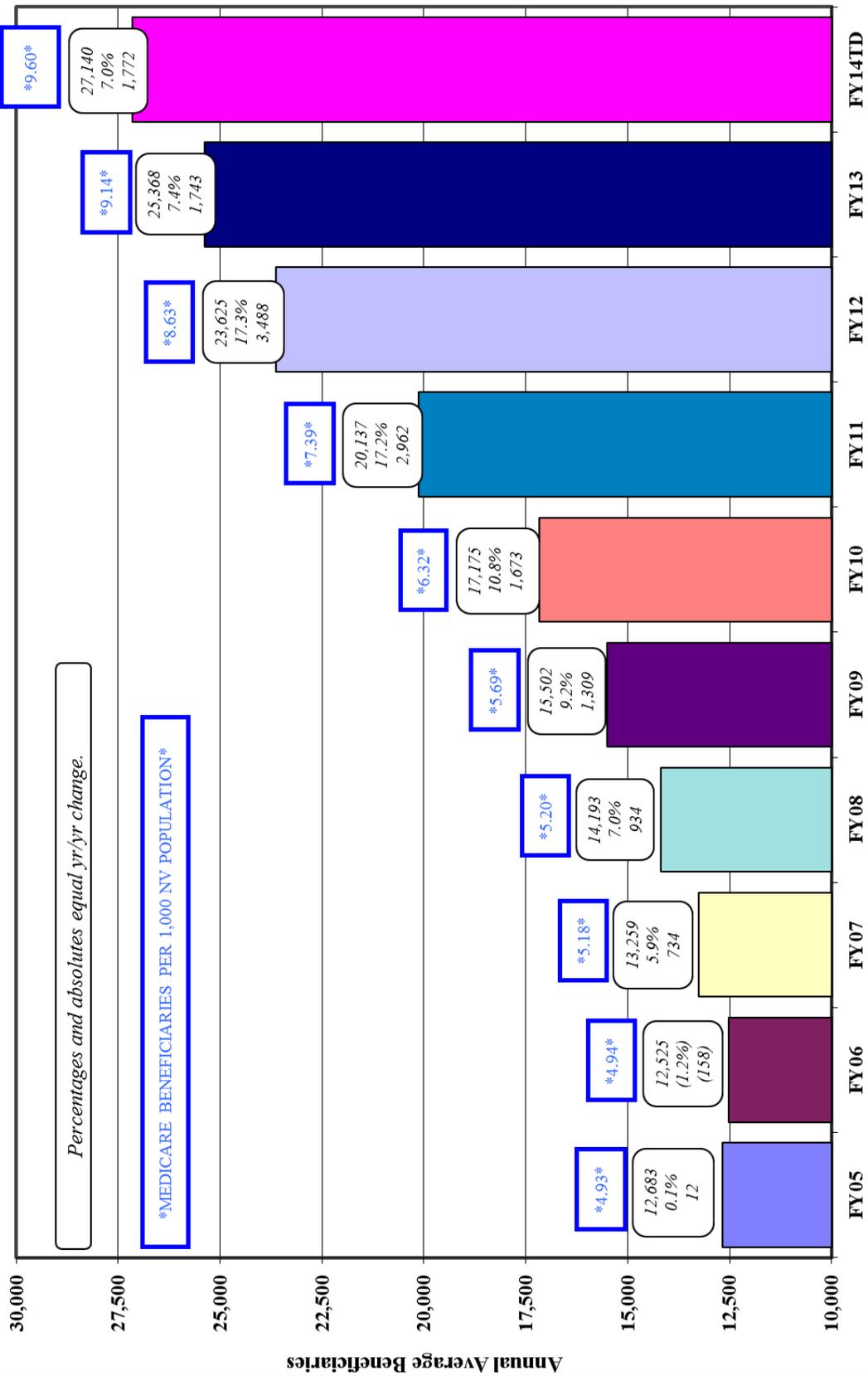
FYTD = June 2014



NEVADA DIVISION OF WELFARE & SUPPORTIVE SERVICES

Medicare Beneficiaries (with Retros): FY05 - FY14YTD

FYTD = June 2014



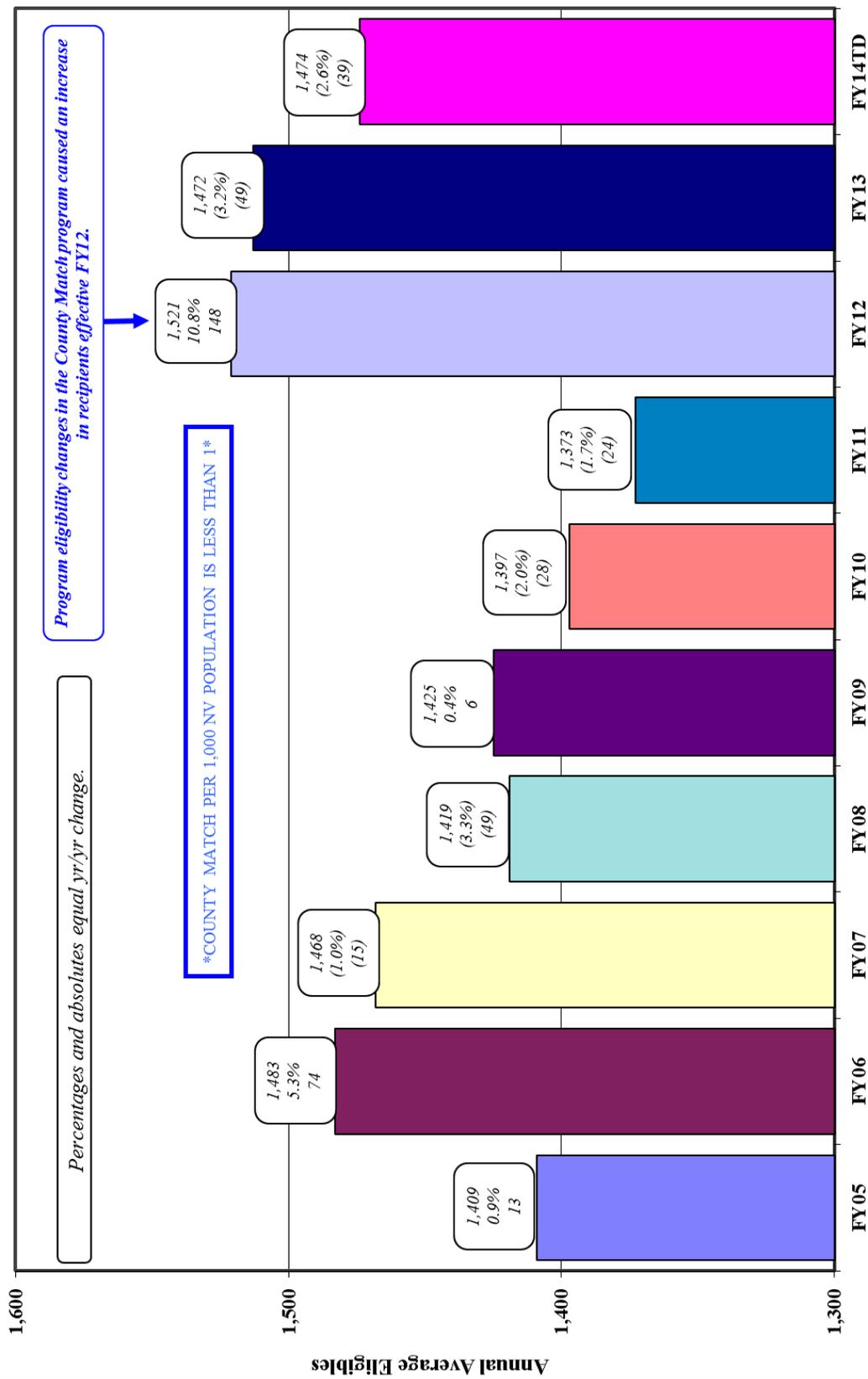
Percentages and absolutes equal yr./yr change.

MEDICARE BENEFICIARIES PER 1,000 NV POPULATION

NEVADA DIVISION OF WELFARE & SUPPORTIVE SERVICES

County Match Recipients (with Retros): FY05-FY14YTD

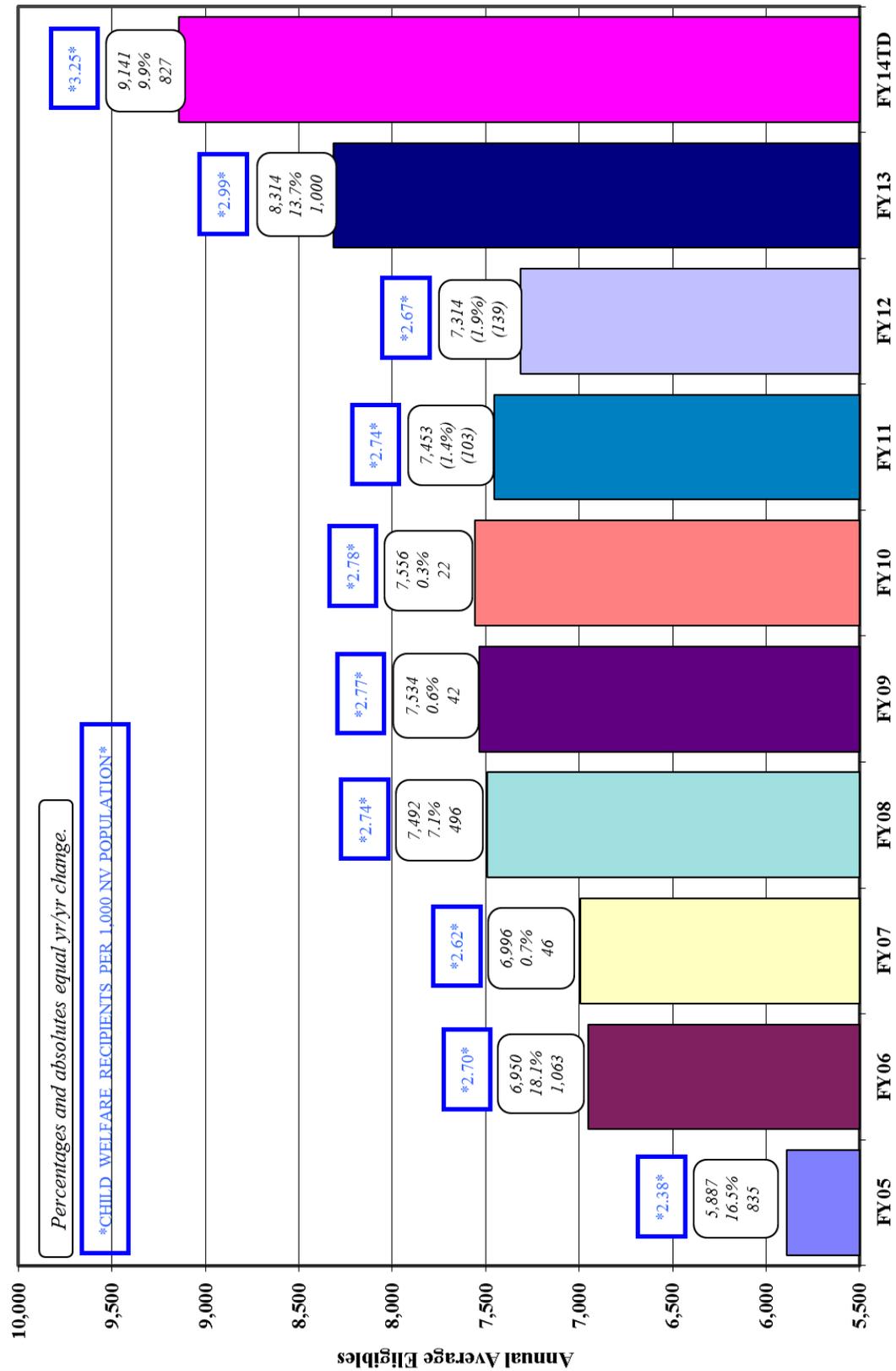
FYTD = June 2014



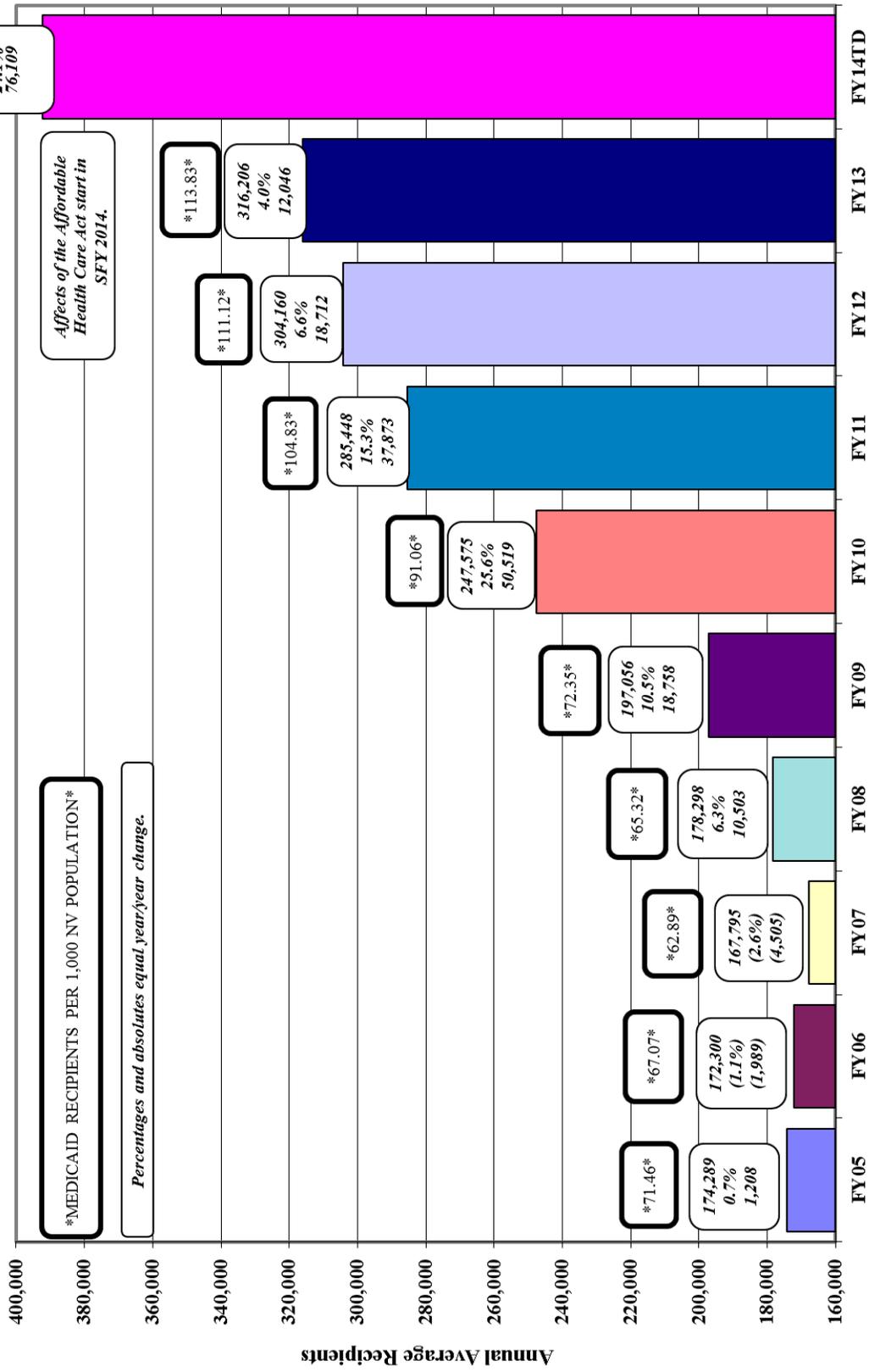
NEVADA DIVISION OF WELFARE & SUPPORTIVE SERVICES

Child Welfare Recipients (with Retros): FY05-FY14YTD

FYTD = June 2014



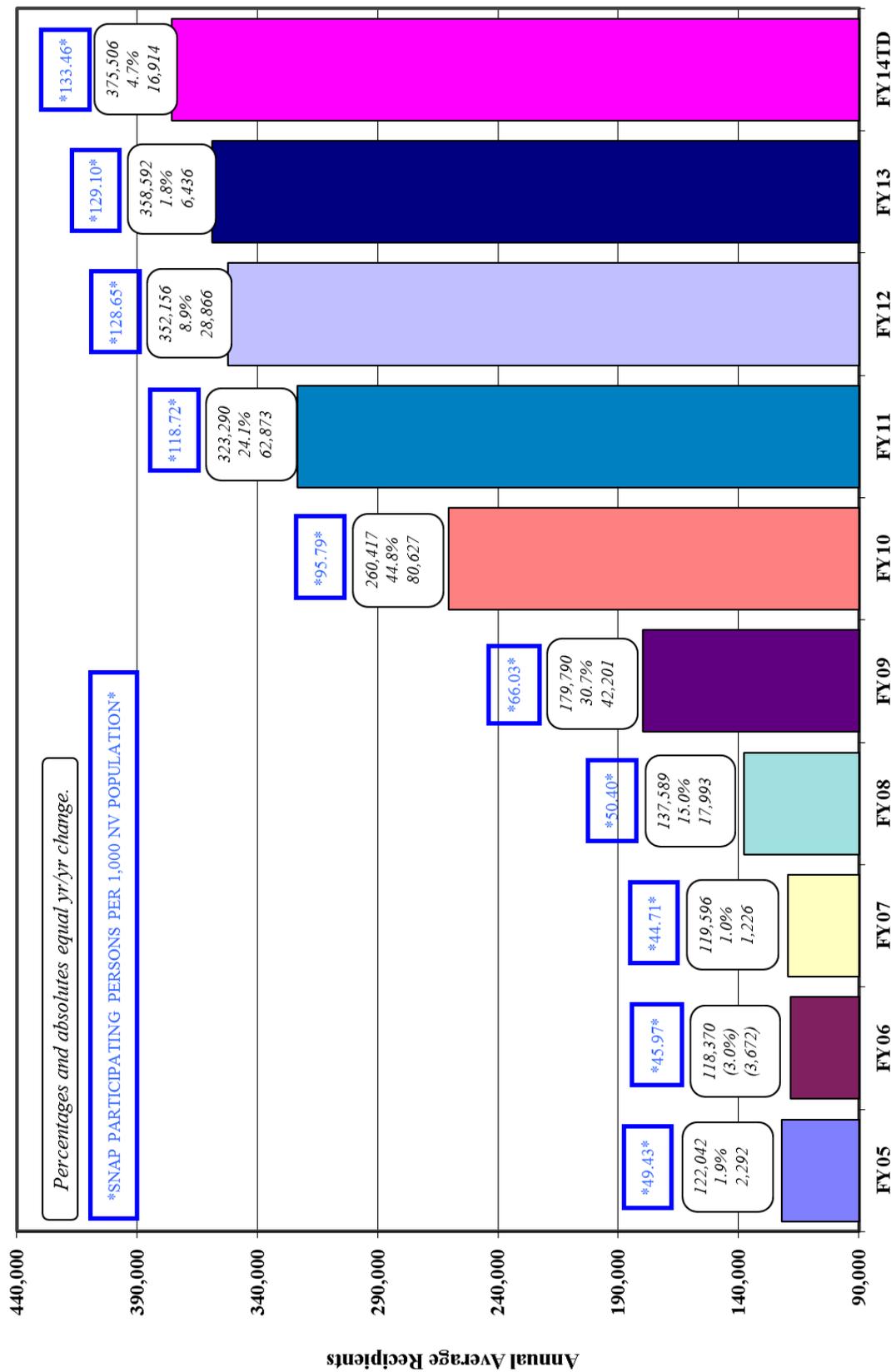
NEVADA STATE WELFARE DIVISION
Total Medicaid Recipients (w/retro): FY05-FYTD14
FYTD = June 2014



NEVADA DIVISION OF WELFARE & SUPPORTIVE SERVICES

Supplemental Nutrition Assistance Program (SNAP) Participating Persons: FY05-FYTD14

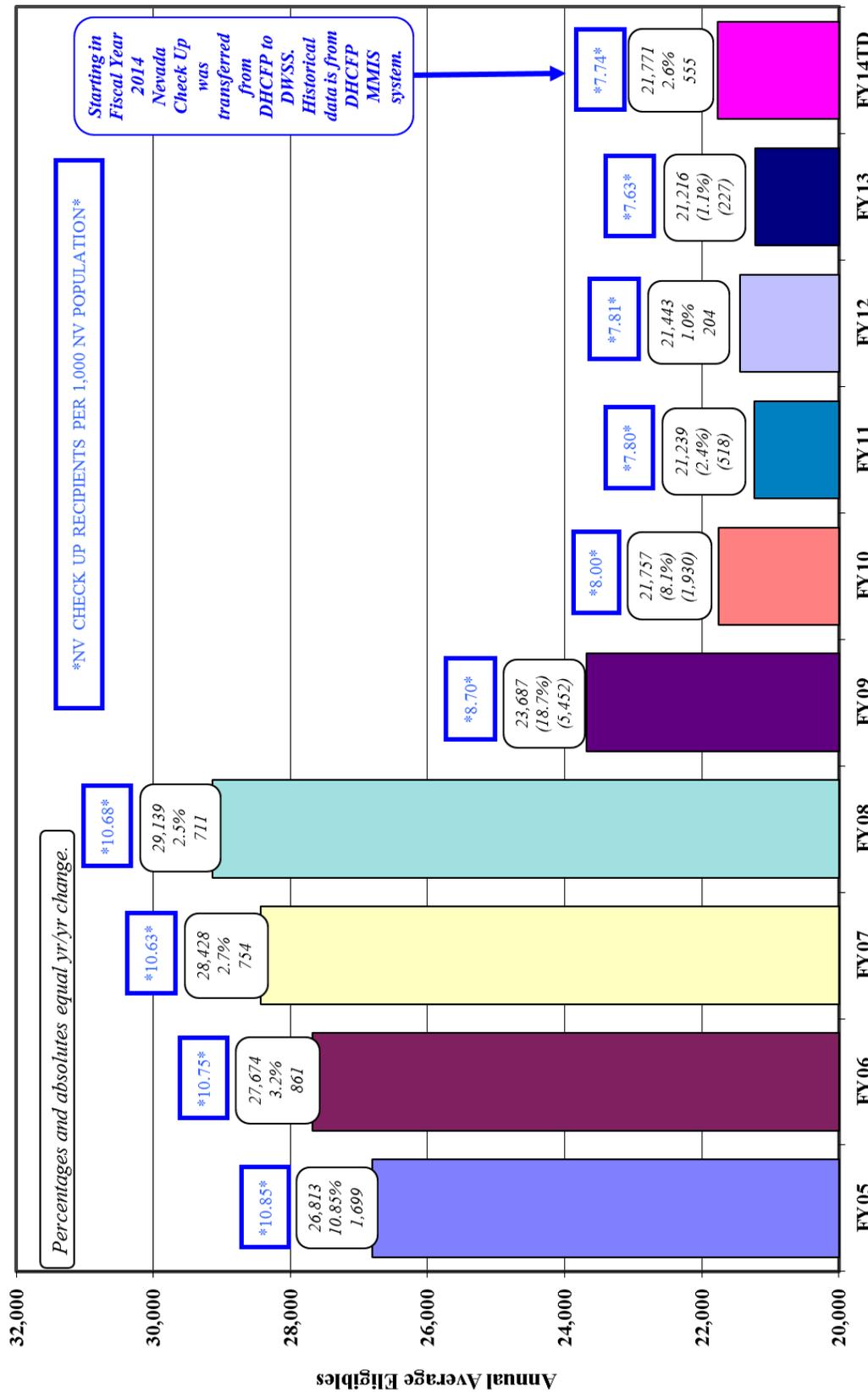
FYTD = June 2014



NEVADA DIVISION OF WELFARE & SUPPORTIVE SERVICES

Nevada Check Up: FY05-FY14YTD

FYTD = June 2014



CHILD CARE AND DEVELOPMENT PROGRAM



Child Care and Development Program

Child care is a necessity that enables parents to work. However, the high price of child care in America strains household budgets and in many cases forces parents to not only make compromises about the quality and safety of care they choose for their children, but also whether or not they can afford to work. In 2009, for families making 200 percent of the federal poverty level (\$36,620) the average cost of center-based child care for an infant would cost more than a quarter of the family income. For single parents the situation was worse; center-based care for an infant or young child could easily consume over 40 percent of the household income, resulting in many families relying on public assistance benefits. In recent decades policymakers have recognized this issue and understand that helping parents on welfare pay for child care services is essential to enabling them to move from welfare to work.

The Child Care and Development Fund (CCDF) is a federal block grant that provides funding to states, territories and tribes. The CCDF provides child care subsidy and quality improvement activities through the coordination of federal funds, state funds, as well as collaboration with Head Start, pre-k, and other early childhood programs. The program assists low-income families, families receiving public assistance, and those transitioning from public assistance in obtaining child care so they can work or attend training or educational programs. In addition, the CCDF requires four percent of funds to be used to improve the quality of child care. In Nevada, the Division of Welfare and Supportive Services (DWSS) is the designated lead agency responsible for administering the CCDF Subsidy.

PROGRAM PURPOSE

The purpose of the Child Care and Development Program in Nevada is to provide child care subsidies for low income families who are working, searching for work or participating in the TANF NEON (New Employees of Nevada) program.

BACKGROUND

In Nevada, Welfare related child care assistance programs began in 1988 with state general funds. By 1996 with the passage of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), multiple state and federal funds were consolidated into the Child Care and Development Program within the Division of Welfare and Supportive Services. The purpose was to centralize child care subsidy and quality activities within one organization. Since this time the program has functioned to ensure working families receive services that allow them to gain and maintain employment as well as work to improve the quality of child care statewide.

CURRENT ACTIVITIES

FUNDING AND PROGRAM ADMINISTRATION

The Child Care and Development program operates through both state and federal funding. In 2014 the program received \$38,568,840; \$4,580,421 in State funds and \$33,988,419 in federal funds.

Subsidy activities are provided by state and contract staff. Program administration is the responsibility of state staff and eligibility activities are the responsibility of program contractors. In northern Nevada eligibility and child care provider enrollment services are provided through the Children's Cabinet, which covers Reno and the surrounding rural areas, and in Clark and Nye Counties services are provided by the Las Vegas Urban League.

ELIGIBILITY CRITERIA

Families who need child care to continue working and have income at or below 75% of the State’s Median Income for their household size may be eligible for child care subsidy benefits. The child must meet citizenship criteria and be under the age of 13, or 19 if they are physically or mentally incapable of caring for themselves. The subsidy percentage the household may be eligible for is based upon the household size and the family’s gross monthly income as follows:

STATE OF NEVADA CHILD CARE & DEVELOPMENT/SUBSIDY PROGRAM HOUSEHOLD SIZE & MONTHLY INCOME CHART Effective October 1, 2013									
ONE			TWO			THREE			Subsidy %
\$ -	-	\$ 958 (P)	\$ -	-	\$ 1,293 (P)	\$ -	-	\$ 1,628 (P)	95-100% **
\$ 959	-	\$ 1,121	\$ 1,294	-	\$ 1,501	\$ 1,629	-	\$ 1,881	90%
\$ 1,122	1,245	\$ 1,285	\$ 1,502	1,680	\$ 1,710	\$ 1,882	2,116	\$ 2,135	80%
\$ 1,286	-	\$ 1,448	\$ 1,711	-	\$ 1,918	\$ 2,136	-	\$ 2,388	70%
\$ 1,449	-	\$ 1,612	\$ 1,919	-	\$ 2,127	\$ 2,389	-	\$ 2,642	60%
\$ 1,613	-	\$ 1,775	\$ 2,128	-	\$ 2,335	\$ 2,643	-	\$ 2,895	50%
\$ 1,776	-	\$ 1,939	\$ 2,336	-	\$ 2,544	\$ 2,896	-	\$ 3,149	40%
\$ 1,940	-	\$ 2,102	\$ 2,545	-	\$ 2,752	\$ 3,150	-	\$ 3,402	30%
\$ 2,103	-	\$ 2,258 *	\$ 2,753	-	\$ 2,953 *	\$ 3,403	-	\$ 3,647 *	20%
\$ 2,259	+		\$ 2,954	+		\$ 3,648	+		0%
FOUR			FIVE			SIX			Subsidy %
\$ -	-	\$ 1,963 (P)	\$ -	-	\$ 2,298 (P)	\$ -	-	\$ 2,633 (P)	95-100% **
\$ 1,964	-	\$ 2,261	\$ 2,299	-	\$ 2,641	\$ 2,634	-	\$ 3,021	90%
\$ 2,262	2,551	\$ 2,560	\$ 2,642	-	\$ 2,985	\$ 3,022	-	\$ 3,410	80%
\$ 2,561	-	\$ 2,858	\$ 2,986	2,987	\$ 3,328	\$ 3,411	3,422	\$ 3,798	70%
\$ 2,859	-	\$ 3,157	\$ 3,329	-	\$ 3,671	\$ 3,799	-	\$ 4,186	60%
\$ 3,158	-	\$ 3,455	\$ 3,672	-	\$ 4,015	\$ 4,187	-	\$ 4,575	50%
\$ 3,456	-	\$ 3,753	\$ 4,016	-	\$ 4,358	\$ 4,576	-	\$ 4,963	40%
\$ 3,754	-	\$ 4,052	\$ 4,359	-	\$ 4,702	\$ 4,964	-	\$ 5,351	30%
\$ 4,053	-	\$ 4,342 *	\$ 4,703	-	\$ 5,037 *	\$ 5,352	-	\$ 5,732 *	20%
\$ 4,343	+		\$ 5,038	+		\$ 5,733	+		0%
SEVEN			EIGHT			NINE			Subsidy %
\$ -	-	\$ 2,968 (P)	\$ -	-	\$ 3,303 (P)	\$ -	-	\$ 3,638 (P)	95-100% **
\$ 2,969	-	\$ 3,331	\$ 3,304	-	\$ 3,640	\$ 3,639	-	\$ 3,950	90%
\$ 3,332	-	\$ 3,693	\$ 3,641	-	\$ 3,977	\$ 3,951	-	\$ 4,261	80%
\$ 3,694	3,858	\$ 4,056	\$ 3,978	4,293	\$ 4,314	\$ 4,262	-	\$ 4,573	70%
\$ 4,057	-	\$ 4,419	\$ 4,315	-	\$ 4,652	\$ 4,574	4,728	\$ 4,884	60%
\$ 4,420	-	\$ 4,782	\$ 4,653	-	\$ 4,989	\$ 4,885	-	\$ 5,196	50%
\$ 4,783	-	\$ 5,144	\$ 4,990	-	\$ 5,326	\$ 5,197	-	\$ 5,507	40%
\$ 5,145	-	\$ 5,507	\$ 5,327	-	\$ 5,663	\$ 5,508	-	\$ 5,819	30%
\$ 5,508	-	\$ 5,862 *	\$ 5,664	-	\$ 5,992 *	\$ 5,820	-	\$ 6,122 *	20%
\$ 5,863	+		\$ 5,993	+		\$ 6,123	+		0%
TEN			ELEVEN			TWELVE			Subsidy %
\$ -	-	\$ 3,973 (P)	\$ -	-	\$ 4,308 (P)	\$ -	-	\$ 4,643 (P)	95-100% **
\$ 3,974	-	\$ 4,259	\$ 4,309	-	\$ 4,568	\$ 4,644	-	\$ 4,878	90%
\$ 4,260	-	\$ 4,545	\$ 4,569	-	\$ 4,829	\$ 4,879	-	\$ 5,113	80%
\$ 4,546	-	\$ 4,831	\$ 4,830	-	\$ 5,089	\$ 5,114	-	\$ 5,347	70%
\$ 4,832	-	\$ 5,117	\$ 5,090	-	\$ 5,350	\$ 5,348	-	\$ 5,582	60%
\$ 5,118	5,163	\$ 5,403	\$ 5,351	5,598	\$ 5,610	\$ 5,583	-	\$ 5,817	50%
\$ 5,404	-	\$ 5,689	\$ 5,611	-	\$ 5,870	\$ 5,818	6,033	\$ 6,052	40%
\$ 5,690	-	\$ 5,975	\$ 5,871	-	\$ 6,131	\$ 6,053	-	\$ 6,286	30%
\$ 5,976	-	\$ 6,253 *	\$ 6,132	-	\$ 6,383 *	\$ 6,287	-	\$ 6,513 *	20%
\$ 6,254	+		\$ 6,384	+		\$ 6,514	+		0%

(P) Indicates poverty level.
 * Indicates that the figure to the left is 75% of Nevada's median income.
 **100% subsidies are reserved for NEON activity participants and certain CPS/Foster parent households. All other households are required to participate in the cost of their child care and may qualify for a maximum of 95% subsidy.
Bold figures in center indicate 130% of poverty level and is the cut-off between At-Risk and Discretionary Funding.

Eligible families that meet the above income guidelines may choose from one of these provider types:

Certificate – Provides a Certificate to an eligible provider for qualified households which details the level of benefits, the child’s approved schedule, and the effective dates of coverage

Contracted Slots – Before and after school programs such as Boys & Girls Clubs which have a certain number of slots available for subsidy families

Wraparound Services – Head Start or similar agencies that provide services to eligible children who require child care services before or after the early learning programs

APPLICATION PROCESS

Requests for an application for child care subsidy may be made verbally, in writing, in person, or through a representative. Upon request, every person will be mailed or given an Application for Child Care Subsidy. Every person must be provided the opportunity to apply for subsidy benefits.

Individuals applying for or receiving TANF NEON assistance will be authorized subsidized child care benefits through a NEON referral. At this time child care services are provided at 100% of the state maximum rate for that individual while they are participating in an approved work activity including but not limited to employment.

Individuals who meet the child care subsidy eligibility criteria may be eligible in one of the categories listed below:

NEON (New Employees of Nevada)

Households who are pending TANF and participating in Pre-Eligibility Work Activities, TANF recipients who are participating in NEON activities and recipients eligible for the DWSS Temporary Program.

At-Risk

Households who are not participating in the DWSS NEON pre-eligibility activities, Temporary Program or NEON program and have countable income at or below 130% of the Federal Poverty Level for their household size.

Discretionary

Households who are not participating in the DWSS NEON program, NEON pre-eligibility activities or Temporary Program and have countable income exceeding 130% of the Federal Poverty Level but are below 75% state median income for their household size.

Waiting List

If sufficient funds are not available, the DWSS Child Care & Development Chief may implement a waiting list. As of 01/01/2012 a wait list is imposed for all new At-Risk applications. To be placed on the waiting list, the parent/caretaker must complete an Application for Child Care Subsidy and be prescreened for eligibility. If funding becomes available, households placed on the waiting list will be categorized by potential funding category and subsidy level and served based upon the date of application with oldest applications served first.

CHILD CARE PAYMENT REQUIREMENTS

All program participants must make at least a 5% co-payment to the provider. The actual co-payment is based on the household's countable income. The only exceptions are for those families participating in the NEON Program, applying for foster child(ren) or applying for child(ren) placed in a home by a child protective agency. Subsidized child care will be paid at 100% of the state maximum rate for these families.

Child care payments may be made to child care providers who are licensed by the state or a local licensing entity or registered with the contractors of the Child Care and Development Program. Child care payments made to the provider are the actual rates charged by the

provider or the state maximum rate established for that type of care, whichever is less. The state maximum rates are evaluated by DWSS every two years. The current rates were established in 2004 and are as follows:

AREA MARKET LIMITS BY PROVIDER CODE – Daily Rate

Market Area	Provider Type	Infants (0 to 1 yr)	Toddlers (1 yr to 3 yrs)	Preschool (3 yrs to 6 yrs)	School Age (6 yrs and older)
CLARK COUNTY:					
	Provider 1	31.00	28.00	23.00	19.00
	Provider 2	28.00	24.00	21.00	21.00
	Provider 3	30.00	27.00	26.00	23.00
	Provider 4	23.00	20.00	19.00	18.00
	Provider 5	N/A	N/A	15.00	15.00
WASHOE COUNTY:					
	Provider 1	35.00	30.00	26.00	26.00
	Provider 2	28.00	24.00	21.00	23.00
	Provider 3	31.00	27.00	24.00	23.00
	Provider 4	23.00	20.00	18.00	17.00
	Provider 5	N/A	N/A	15.00	15.00
CARSON/DOUGLAS COUNTIES:					
	Provider 1	29.00	24.00	24.00	21.00
	Provider 2	24.00	23.00	21.00	21.00
	Provider 3	27.00	24.00	22.00	22.00
	Provider 4	20.00	18.00	17.00	15.00
	Provider 5	N/A	N/A	15.00	15.00
RURAL COUNTIES: <i>(Churchill, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, White Pine)</i>					
	Provider 1	27.00	24.00	22.00	19.00
	Provider 2	24.00	23.00	21.00	21.00
	Provider 3	24.00	22.00	21.00	21.00
	Provider 4	18.00	17.00	16.00	16.00
	Provider 5	N/A	N/A	15.00	15.00
PROVIDER TYPE CODES					
	1	= Licensed Child Care Center, Nursery School, Preschool. (Over 13 Children)			
	2	= Licensed Group Care Home. (7-12 Children)			
	3	= Licensed Family Care Home. (1-6 Children)			
	4	= Informal Care			
	5	= Before & After School Unlicensed Care Center			

QUALITY

States are required to use at least 4 percent of the aggregated funds expended excluding Maintenance of Effort (MOE) funds in a fiscal year for quality improvement activities that may include, but are not limited to, comprehensive consumer education to parents and the public, activities to increase parental choice, and activities designed to improve the quality and availability of care.

In addition to the 4 percent minimum investment in quality child care, States must spend additional earmarked funds for services such as programs for infants and toddlers, child care resource and referral and school-age child care, and quality expansion. These earmarked services are based on annual appropriation law, which may change from year to year.

The Office of Early Care and Education was established to oversee and coordinate the quality improvement funds.

The goals of the office are to:

- Improve and maintain the quality and quantity of early care and education programs and services.
- Increase the skills, education levels, and professionalism of early childhood professionals.
- Increase the compensation, wages, benefits, and working conditions for early childhood professionals through public awareness, policy, and funding efforts.
- Increase parents/guardians knowledge and ability to understand the importance of early care and education, to be involved in their child's learning, and to make informed child care choices.
- Improve the quality and availability of early care and education programs for children with special needs by supporting programs with strategies for successful inclusion.

In July of 2014 the Office of Early Care and Education was moved to the Nevada Department of Education. This move was done to comply with Executive Order 2013-16 and help expand and improve the system of early care and education throughout Nevada.

REGULATIONS AND LAWS

The Child Care Development Fund is governed by a variety of laws and regulations. The governing body is the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care. The following are the primary regulatory sources:

Title VI of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996

Part 45 of the Code of Federal Regulations, Parts 98 & 99.

**CHILD SUPPORT
ENFORCEMENT PROGRAM**



CHILD SUPPORT ENFORCEMENT PROGRAM

OVERVIEW

The Child Support Enforcement Program (CSEP) was established in 1975 pursuant to Title IV, Part D of the Social Security Act. The program is a federal, state, and local intergovernmental collaboration functioning in all 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam and the Virgin Islands. Additionally, there are 56 fully comprehensive tribal IV-D programs and six tribal programs in the startup phase. Currently, there are no tribal IV-D programs in Nevada. The Office of Child Support Enforcement (OCSE), in the Administration for Children and Families (ACF) of the U.S. Department of Health and Human Services (HHS), assists states develop, manage and operate child support programs effectively and according to federal law.

Each of the states, territories and tribes, operates a Title IV-D child support program under its own unique laws and procedures. Operating under state plans approved by OCSE, states receive federal financial and technical assistance to administer their programs.

Federal Financial Participation (FFP) in the program is provided for most necessary and approved expenditures at the rate of 66%. Additionally, federal incentive payments are awarded to qualifying states based on performance. In Nevada, the state and ten participating counties contribute 34% toward the cost of the program. A large portion of the incentive awards granted to the state is passed on to the participating county district attorney offices for future program enhancements. OCSE can also assess states penalties for failure to achieve minimum performance levels. Penalties are withheld from a state's TANF grant.

The Nevada CSEP provides five basic services: (1) locating parents who have an obligation to support their child(ren); (2) establishing paternity for children born outside of marriage; (3) establishing financial and medical support orders; (4) enforcing support orders; and (5) collecting and distributing support payments. The program works closely with officials of family courts and uses quasi-judicial processes to establish paternity, establish support orders and enforce support orders.

A variety of families are directly served by the CSEP, including those receiving Temporary Assistance for Needy Families (TANF) or public assistance, children receiving assistance under the foster care program, families receiving assistance under the Medicaid program and all other families who apply for services.

I. BACKGROUND

The Nevada CSEP is administered by the Nevada Division of Welfare and Supportive Services (DWSS) and operated by three state program area offices and ten county district attorney offices through cooperative agreements.

II. PURPOSE

The purpose of the Nevada Child Support Enforcement Program (CSEP) is to promote the well-being of children, strengthen families, and reduce the demand on public treasuries by securing financial and medical support from legally responsible parents.

III. FUNDING

Federal Financial Participation (FFP) is available at the rate of 66% for most necessary and approved expenditures under the state's IV-D plan. The state and counties contribute 34% toward the cost of the program. Child support collections on public assistance cases are retained by the state to reimburse the cost of grants paid to families.

IV. ORGANIZATION AND OPERATION

A. STATE IV-D OFFICES

The Child Support Enforcement Program consists of a central administrative office and three program area offices. The responsibilities of each state office include the following:

1. Central Office
 - a. Implementation of federal and state laws
 - b. Policy development
 - c. Interstate central registry services
 - d. State case registry
 - e. Federal and state locate services
 - f. Federal offset intercepts
 - g. Unemployment Insurance Benefit intercepts
 - h. Centralized statewide computer system
 - i. Accounting functions
 - j. Quality control
 - k. Statewide training
 - l. Oversight of centralized collection and disbursement of payments

2. Program Area Offices

The program area offices (PAOs) primarily provide locate, establishment and enforcement services for public assistance cases. Public assistance (PA) cases include: active assistance cases (TANF); child welfare cases; post-public assistance cases; recovery only (child support debt assigned to the state) cases; and medical assistance cases (those cases in which the family is receiving Medicaid program assistance). The PAOs also provide services to non-assistance (NA) residents of counties in which the district attorney does not participate in the IV-D program.

A breakdown of services provided by each PAO follows:

- a. The Reno PAO provides services for all categories of cases in Storey County and Carson City. It also provides services for PA cases in Churchill County, Douglas County (except medical assistance-only cases), Lyon County (except medical assistance-only cases) and Washoe County (except enforcement services for medical assistance-only cases).

- b. The Elko PAO provides services for all categories of cases in Eureka County, Lincoln County and White Pine County. It provides services for PA cases in Elko County and Lander County.
- c. The Las Vegas PAO, which is located in the Child Support Center of Southern Nevada in Las Vegas, provides locate, establishment and enforcement services for Esmeralda County. It also services the intergovernmental cases for the PAOs and Clark County in which the responsible parent resides in another state and that state's assistance is needed by Nevada CSEP.

B. DISTRICT ATTORNEYS' OFFICES

Ten Nevada county district attorney (DA) offices participate in the CSEP. Each DA office provides the following services:

1. Clark County DA provides locate, establishment and enforcement services for all PA and NA cases in Clark County;
2. Churchill County DA provides locate, establishment and enforcement services for NA cases in Churchill County;
3. Douglas County DA provides locate, establishment and enforcement services for NA and medical assistance-only cases in Douglas County;
4. Elko County DA provides locate, establishment and enforcement services for NA cases in Elko County and Lander County;
5. Humboldt County DA provides locate, establishment, and enforcement services for NA and PA cases in Humboldt County;
6. Lyon County DA provides locate, establishment and enforcement services for NA and medical assistance-only cases in Lyon County;
7. Mineral County DA provides locate, establishment and enforcement services for NA and PA cases in Mineral County;
8. Nye County DA provides locate, establishment, and enforcement services for NA and PA cases in Nye County;
9. Pershing County DA provides locate, establishment and enforcement services for NA and PA cases in Pershing County;
10. Washoe County DA provides locate, establishment and enforcement services for NA cases in Washoe County and enforcement services for medical assistance-only cases in the county.

V. AVAILABILITY OF SERVICES

A. PUBLIC ASSISTANCE

Child support cases for custodians who receive assistance under the Temporary Assistance for Needy Families (IV-A) program are automatically referred to CSEP. Public assistance custodians must assign support rights to the state and cooperate with the child support agency in all aspects of child support services, including locating the non-custodial parent, establishing paternity and support,

and enforcing child support. To offset public assistance payments the federal and state governments retain child support collected while families receive public assistance benefits. Child support services automatically continue whenever a family is no longer eligible for public assistance unless the custodian notifies CSEP that services are no longer desired.

B. NON-PUBLIC ASSISTANCE

Child support services are available to non-public assistance custodians who apply for IV-D services. Federal regulations (45 CFR 302.33) require the state charge an application fee for child support services. Nevada has elected to charge an application fee of one cent (1¢), which is paid by the state for every non-public assistance applicant.

Pursuant to federal^a and state^b law non-assistance custodians must pay a \$25 annual fee for each case in which the state has collected and disbursed more than \$500 during the federal fiscal year. This requirement only applies to those cases in which the custodian and child have never received TANF.

C. CHILD WELFARE CASES

The same services as listed in section A. above are provided to children in Title IV-E foster care.

D. MEDICAID ONLY CASES

Upon request from a custodian, child support services as described in Section A are provided for those cases in which the children are receiving Medicaid under Title XIX of the Social Security Act but are not currently receiving assistance under Title IV-A or IV-E.

E. INTERGOVERNMENTAL CASES

States are required to provide child support enforcement services regardless of whether one or both parents reside in the same state. Child support enforcement services are processed between states by the use of both administrative and court actions. Usually, the request for locating a non-custodial parent believed to reside in another state or the withholding of income is accomplished through a simple administrative procedure. The Uniform Interstate Family Support Act (UIFSA) allows states to initiate many actions without the necessity of setting up a two-state case, allowing expedited processing of services such as income withholding. If interstate assistance is required, an initiating state can request assistance in the establishment of paternity, the establishment of a child support order or the enforcement of an order by sending a UIFSA petition to the state in which the non-custodial parent resides. Nevada has the highest intergovernmental caseload in the country (31% of its cases in Federal Fiscal Year 2013 compared to the national average of 12.7%). Intergovernmental cases are among the most difficult and complex child support cases. Additionally, intergovernmental cases include international cases involving nations which have reciprocity with Nevada or OCSE. Custodians living in other countries may also

^a Deficit Reduction Act of 2005 (Public Law 109-171), 42 USC 654

^b NRS 425.3847

apply for child support services directly with the Nevada jurisdiction where the obligor resides.

VI. SERVICES PROVIDED

A. CENTRAL REGISTRY

All incoming intergovernmental requests are processed in a state central registry. The Central Registry reviews the UIFSA petition to ensure it is complete and meets Nevada statutory requirements. Central Registry then forwards the petition to the appropriate local child support office to initiate the action requested. Central Registry is located in the Carson City Central Office.

B. STATE COLLECTION and DISBURSEMENT UNIT

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 amended Title IV-D of the Social Security Act to include a requirement that all states develop centralized locations for the collection and disbursement of child support payments in all Title IV-D cases and collections obtained by wage garnishments in non-IV-D cases.

Title IV-D cases are those cases in which state child support enforcement (CSE) agencies establish and enforce support obligations for individuals requesting government assistance with child support issues. Non-IV-D, or private, cases are those child support cases which do not involve a state CSE agency.

All IV-D child support collections are processed through the State Collection and Distribution Unit (SCaDU) located in Las Vegas. Additionally, pursuant to federal law, all non-IV-D child support payments collected by a wage garnishment must be processed by SCaDU. The intent behind centralized state disbursement units is twofold:

1. Lessen the burden of income withholding for employers by providing only one location where employers remit payments; and,
2. Ensure income withholding is available as an enforcement tool to all custodians without the necessity of applying for Title IV-D services.

C. PARENT LOCATE

One of the primary functions of the Child Support Enforcement Program is locating non-custodial parents. A variety of sources are used to locate parents and/or their assets. Sources for locating non-custodial parents include, but are not limited, to the following:

1. Federal Parent Locate Service (FPLS) – obtains information from the Internal Revenue Service, Social Security Administration, Veterans Administration, National Personnel Records Center, U.S. Postal Service, National Security Agency and the National New Hire Registry;
2. Federal Case Registry (FCR) – contains information on all court orders in which child support is ordered;
3. State Parent Locator Service (SPLS);
4. State Directory of New Hires (SDNH);

5. Department of Motor Vehicles (DMV);
6. Employment Security Division (ESD);
7. Consumer reporting agencies;
8. Utility companies;
9. State agencies, boards and commissions (e.g., State Contractors Board, Department of Wildlife, etc.);
11. Law enforcement and corrections records;
12. Financial institutions.

D. PATERNITY ESTABLISHMENT

Paternity is the legal relationship between a child and the child's biological or adoptive father that grants and imposes rights, privileges, duties and obligations. To establish and enforce financial obligations, paternity must first be established. Nevada establishes paternity through voluntary acknowledgment or court determination including stipulated orders. Genetic (DNA) testing is used to determine paternity in contested cases or in cases when multiple fathers are named.

E. ESTABLISHMENT OF SUPPORT ORDERS

Child support obligations in Nevada are established by a judicial process which may include stipulated orders, court hearings and default orders. If the custodial parent is receiving public assistance, the court ordered support is retained by the Division of Welfare and Supportive Services to offset a portion of the monthly TANF grant. In some instances, the amount of child support enables the family to leave welfare rolls entirely. Court hearings are expedited by using court appointed hearing masters who make recommendations to the district court judges. The judges accept or reject the masters' recommendations. If an objection to the master's recommendation is not filed within 10 days the recommendation is deemed approved by the court.

Pursuant to state statute (NRS 125B.070 and 12B.080), child support obligations are established based on a percentage of the non-custodial parent's gross monthly income. Nevada statutes specify certain factors that allow the court to deviate from the prescribed formula increasing or decreasing the support award as appropriate.

F. ESTABLISHMENT OF MEDICAL SUPPORT

Medical support is requested in all petitions to establish new or modified orders through the CSEP. The National Medical Support Notice (NMSN) is sent to employers that maintain or contribute to group health plans and employ persons obligated by child support orders to provide medical support for their children. The federally mandated NMSN provides specific time frames for employers and health insurance plan administrators to adhere to when the court has ordered a parent to provide medical insurance for a dependent child.

One of the primary objectives of the CSEP is to secure health insurance coverage. However, it may be determined by the court that a specific dollar amount, referred to as cash medical support, in lieu of health insurance may be

the best alternative for medical support on behalf of the child.

G. COLLECTION AND ENFORCEMENT OF CHILD SUPPORT

A number of legal remedies are available for the collection of child support. The following are the most common:

1. Income Withholding

The Family Support Act of 1988 mandates using an immediate withholding of income (generally wages) for child support regardless of whether the obligor owes past-due support. Immediate income withholding is mandatory when a family is receiving public assistance, unless the court issues specific findings of fact to delay immediate withholding. In non-public assistance cases, immediate income withholding is ordered unless the parties agree in writing it should not be ordered. In all cases, income withholding is automatic when the obligor becomes delinquent in an amount equal to one month's support.

2. Federal Income Tax Refund Offset

All states must annually submit cases that meet the certification requirements for federal income tax refund offset to the Internal Revenue Service. The criteria for certification in public assistance cases are arrearages of at least \$150 and in non-public assistance cases, at least \$500.

3. Unemployment Compensation Intercept

State and federal statutes and regulations mandate Unemployment Insurance Benefits (UIB) be intercepted to satisfy child support obligations within five (5) days of identifying the availability of UIB when income withholding is court ordered.

4. Liens

A lien on real property is filed whenever a judgment is rendered in a child support enforcement case. Liens on real property must be satisfied before the property is sold, mortgaged or transferred.

5. Civil Contempt

Civil contempt of court may be found when the non-custodial parent (NCP) fails to pay court ordered child support, fails to keep a court-ordered genetic testing appointment, or if the NCP fails to appear at a scheduled court hearing. The court may order the NCP to show cause as to why he or she should not be held in contempt. Depending on the circumstances of the case, the court may also issue a bench warrant for the parent's arrest.

6. Criminal

Although used less often, state and federal statutes provide for criminal non-support charges to be brought against a parent willfully failing to provide support.

7. Driver's License Suspension

NRS 425.510 allows for driver's license suspension:

If a non-custodial parent (NCP) is in arrears more than \$1,000 and delinquent by two months or more; or

The NCP failed to provide medical insurance for a child as ordered by the court; or

The NCP failed to comply with a subpoena or warrant relating to a proceeding to determine the paternity of a child or establish, modify or enforce an obligation for the support of a child.

8. Professional/Occupational/Recreational Licenses

Pursuant to NRS 425.520, non-custodial parents owing past-due child support or failing to comply with subpoenas or warrants relating to paternity or child support proceedings are subject to suspension of occupational, professional, and recreational licenses, certificates or permits.

9. Financial Institution Data Match (FIDM)

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) requires every state to enter into agreements with financial institutions doing business within the state to conduct a quarterly data match for the purpose of collecting delinquent child support. This data match is intended to identify accounts belonging to parents who are delinquent in their child support obligations. When a match is identified, child support enforcement agencies may seize the accounts of delinquent obligors to collect the past-due child support.

10. Passport Denial

As part of the Deficit Reduction Act (DRA) of 2005 effective October 1, 2006, obligors with arrears exceeding \$2,500 are submitted to the Department of State (DoS) for passport denial.

11. Uniform Interstate Family Support Act (UIFSA)

On October 1, 2007, Nevada enacted the 2001 version of the Uniform Interstate Family Support Act (UIFSA). The purpose of UIFSA is to facilitate the enforcement of child support obligations where the parties live in different states. The statutes governing interstate establishment and enforcement commence at NRS 130.092 through NRS 130.802.

12. Child Support Lien Network (CSLN)

In 2013 CSEP joined the Child Support Lien Network, a multi-state consortium which exchanges data with the insurance industry to identify personal injury and workers compensation settlements due delinquent obligors. The information provided by CSLN allows CSEP to garnish settlement funds.

H. COLLECTION AND DISTRIBUTION

As a condition of TANF eligibility, child support due a public assistance family is assigned to the state. When collections are received on behalf of public assistance recipients, those collections are retained by the state to offset grant payments for as long as the family continues to receive TANF cash assistance. Once TANF cash assistance terminates, the CSEP forwards all ongoing child support payments to the family. Arrearages are paid first to the former assistance family and then to the state. Federal requirements for child support distribution are contained within Section 457 of the Social Security Act.

Non-public assistance collections are distributed directly to the family.

I. Family Mediation / Access and Visitation

The federal OCSE funds the Access and Visitation Grant in which Nevada is awarded \$100,000 annually. Funds pay for mediators who attempt to resolve custody and visitation issues between parents. The grant is divided between the Second Judicial District Court, Family Mediation Program that serves the Reno area and the Eighth Judicial District Court, Family Mediation Center that serves the Las Vegas area. Most referrals are made from child support hearing masters during court hearings for child support and paternity issues. Typically both parents voluntarily agree to explore family mediation services. The program has proven to be successful to those parents who choose to participate. Survey results suggest: (1) parent communication is enhanced through the mediation process; (2) most parents believe the parenting plans and agreements developed are adhered to over time by the other parent; and (3) a majority of the custodial parents indicate child support payments were paid regularly after mediation.

J. Central Case Registry

PRWORA requires states to develop and maintain a central registry to record all child support orders established or modified within the state and to receive incoming requests for assistance from other states. This centralized function is performed in the Carson City Central Office.

VII. REGULATIONS AND LAWS

As a condition for receiving federal funding, the CSEP has responsibilities under federal law defined in Title IV-D of the Social Security Act, Title 42 of the United States Code and Title 45 of the Code of Federal Regulations. The Nevada CSEP is also governed by Nevada Revised Statutes (NRS) Chapters 31A, 125B, 126, 130, 201 and 425 and the Child Support Enforcement Manual which contains State Regulations and State Policy.

VIII. PROGRAM ENHANCEMENTS

1. The CSEP is committed to providing services that ensure obligated parents provide regular and reliable financial and medical support for their children by strengthening the partnership between the state and county offices administering the program. The CSE Task Force established in 2009, comprised of eight members of the State of Nevada executive and county branches of government, is committed to providing direction and guidance to CSEP that leads to enhanced efficiencies in service delivery and achieving federal performance measures. This is accomplished by recommending strategic direction and guidance, tactical

direction, action steps with assignments and specific measurable expectations, and a decisive/innovative/proactive cultural environment.

2. Beginning as a 2012 pilot project in Elko County and expanded program-wide in 2013, CSEP now accepts debit and credit card payments telephonically and via the Internet. The State Collections and Disbursement Unit (SCaDU) is also exploring options for providing mobile payments and a network of retail establishments that will accept cash payments on behalf of CSEP. Offering alternate payment options is a proven strategy to increase child support collections. CSEP contracts with vendors to provide services such as credit card payments and federal incentive funds are used to cover the credit card fees so that obligors are not charged thereby further encouraging timely payments.
3. CSEP implemented a Business Intelligence System in 2010 to provide quick access to pertinent data for staff at various levels. The application includes an executive dashboard to present key performance measures from the latest federal performance report and operational metrics from seven management reports. Application enhancements (data warehouse and ad hoc universes) were completed in 2012 further enabling supervisory staffs' ability to manage caseloads.
4. In April 2014, CSEP initiated a feasibility study to investigate alternatives for replacing or modernizing the aged statewide child support enforcement computer system known as Nevada Operations of Multi-Automated Data Systems (NOMADS). DWSS secured a contract with MAXIMUS to assist in performing the feasibility study, a necessary first step for receiving federal financial participation in a replacement system.

Completed in 2001, NOMADS meets the requirements of a federally certifiable system as defined in the *Automated Systems for Child Support Enforcement: A Guide for States*, published in 1999 by the Federal Office of Child Support Enforcement (OCSE), and updated in 2009. However, it does so in a manner that is labor intensive, less detailed, and less focused on best practices than are now possible with a more robust technologically advanced system. This application is in need of modernization to better satisfy Federal and State processing mandates, upgrade aging software architectures, and offset and avoid expensive future maintenance costs. Most importantly, an improved child support computer system will result in improved services for Nevada's children and families.

An initial draft of the Feasibility Study's findings and recommendations is scheduled for October 2014. Assuming Legislative funding, the next phase will be publication of a request for proposal to select a vendor to implement the system replacement option indicated by the study.

4. Scheduled for implementation in Fall 2014, CSEP is working with the federal Office of Child Support Enforcement (OCSE) to offer employers electronic income withholding orders (e-IWO). Employers collect over 70 percent of all child support through income withholding orders (IWO). Using a secure portal operated by OCSE, employers and CSEP will be able to exchange income withholding order information electronically. The benefits of E-IWO include getting money to families faster, increased accuracy and reliability of data, reduction of time, money and resources for both employers and CSEP.

IX. STATISTICS

1. Caseload (see Exhibit 1)

Exhibit 1 reflects the total number of cases being served by the Nevada Child Support Enforcement Program. At the end of state fiscal year (SFY) 2014, there were 100,883 cases receiving IV-D program services, 49% of which were public assistance related. Approximately 60% of the program's total caseload is in Clark County.

2. Collections (see Exhibits 2, 3 and 4)

Exhibit 2 represents total collections and retained collections. PRWORA resulted in a reduction of TANF caseloads, a reduction of state/federal share of collections and more child support going to Nevada families. However, the continued successful results of PRWORA are linked to the local economic status. CSEP collected \$204,824,526 in child support payments during SFY 2014 compared to \$203,324,553 in SFY 2013.

Exhibit 3 reflects Federal Tax Offset amounts intercepted on behalf of child support enforcement cases enforced in Nevada for instate cases.

Exhibit 4 is the amount of Unemployment Insurance Benefits (UIB) intercepted on behalf of families where the court ordered direct income withholding.

EXHIBIT 1

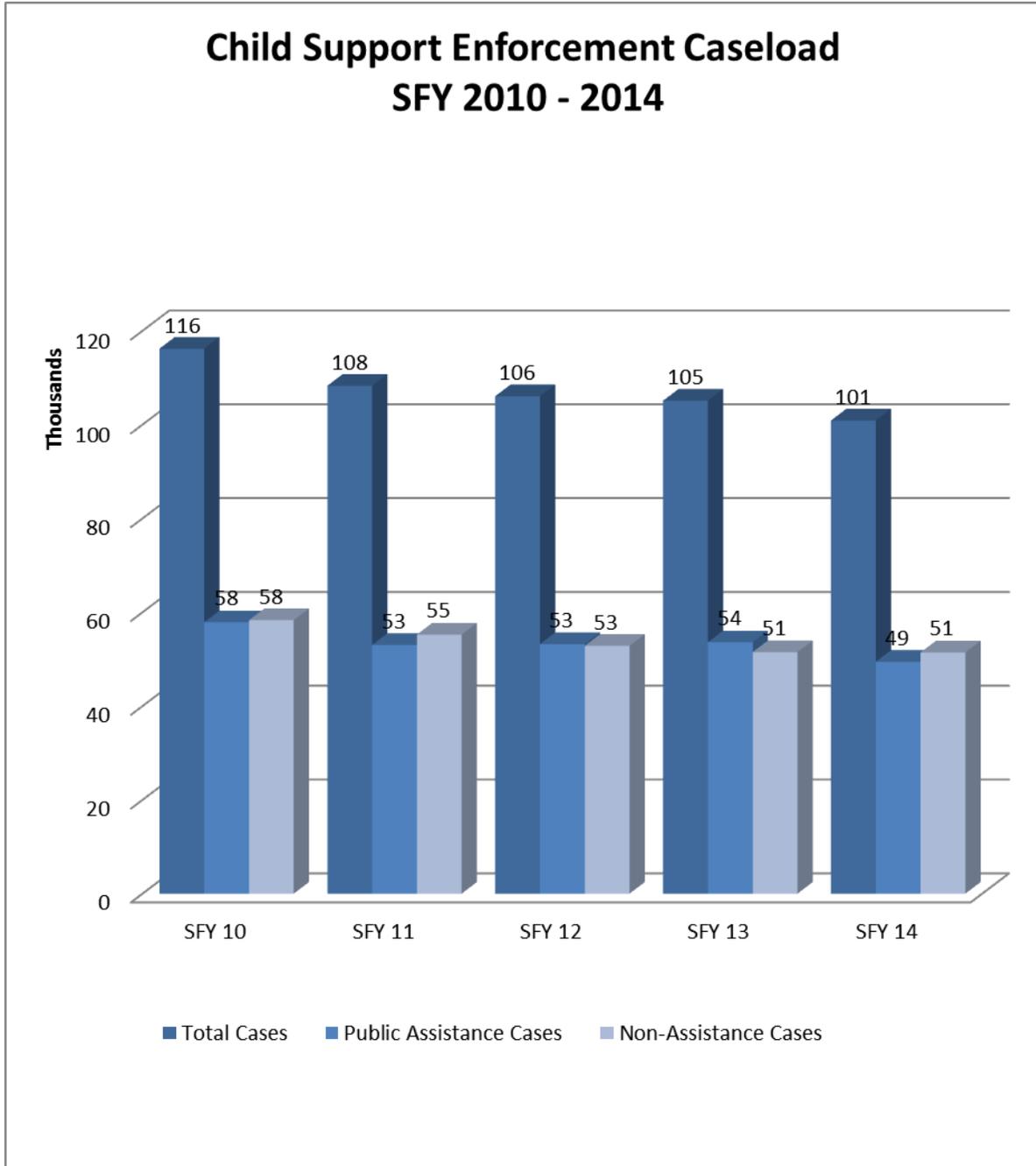


EXHIBIT 2

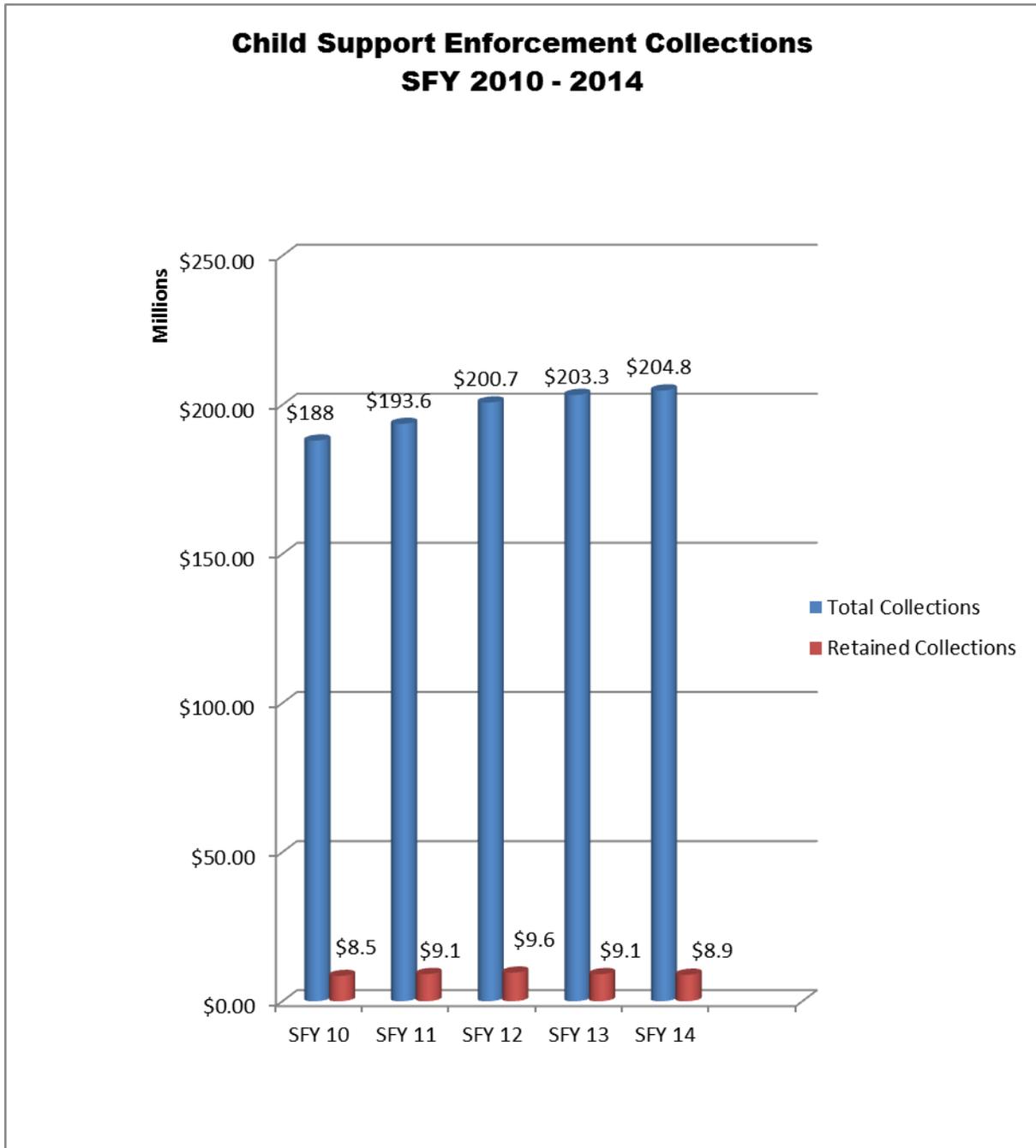


EXHIBIT 3

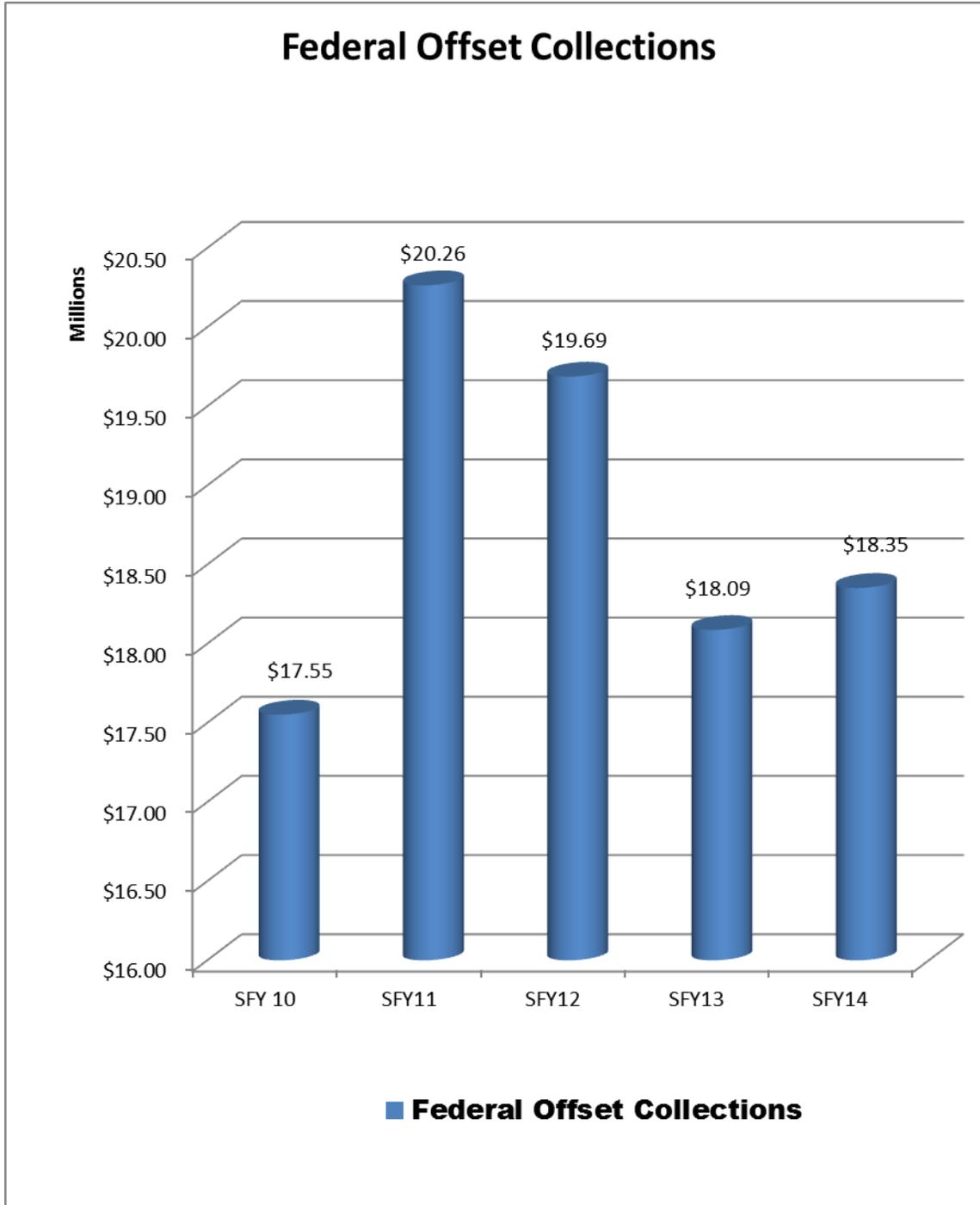
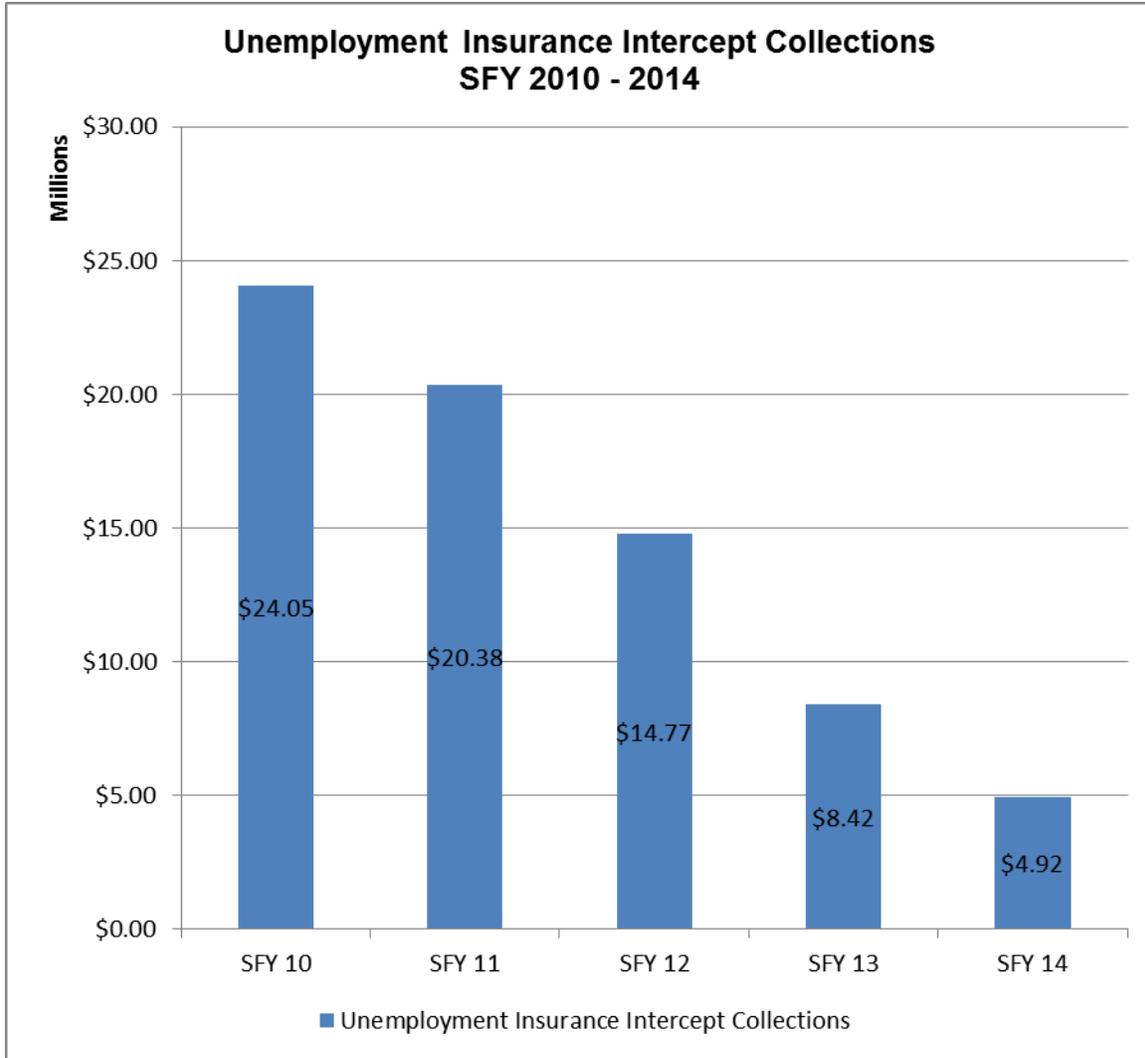


EXHIBIT 4



**EMPLOYMENT AND SUPPORT
SERVICES**

**SOCIAL
SERVICES**

EMPLOYMENT AND SUPPORT SERVICES - SOCIAL SERVICES

I. BACKGROUND

The Division of Welfare and Supportive Services (DWSS) re-introduced social workers to provide services to Temporary Assistance for Needy Families (TANF) in 1996. Social workers work closely with employment and training and eligibility staff to help move TANF families to economic and emotional self-sufficiency. Nevada currently has forty social workers and seven social worker supervisors statewide.

II. PURPOSE

The challenges of working with the hardest-to-employ (HtE) participants, who are also facing cash assistance time limits, are addressed by Welfare Division social workers. The HtE families experience a multitude of barriers/issues preventing them from being both emotionally and economically self-sufficient. Some issues addressed by social workers with the HtE family are domestic violence, substance abuse, mental health, health and/or caring for children with severe medical or emotional problems.

III. SOCIAL WORKER RESPONSIBILITIES

- ▶ Complete psycho-social assessments on the hardest-to-employ TANF participants, including home visits to determine the home environment, to ensure a comprehensive picture of the participant and his/her family are gathered before a detailed Personal Responsibility Plan (PRP) is developed with the participant. Tools used by social workers to identify participant barriers include the Substance Abuse Subtle Screening Inventory (SASSI), the Learning Disability Inventory, ecomaps, genograms, the South Oaks Gambling Screen (SOG), and the Domestic Violence screening tool. Social workers provide intensive case management services and follow up with the families on a monthly basis. Home visits are completed a minimum of every 90 days until the barriers/issue(s) are alleviated or resolved.
- ▶ Coordinate with the Substance Abuse Prevention and Treatment (SAPTA) providers and Domestic Violence providers to provide further evaluation and non-medical treatment for TANF participants in need of substance abuse and domestic violence services.
- ▶ Evaluate and determine whether alternative living situations for minor parents are appropriate when the minor parent is not living with their parents, legal guardian or in an approved adult-supervised setting and applying for cash assistance.
- ▶ Determine eligibility for "Good Cause" waivers for TANF clients when domestic violence affects their ability to participate in the Child Support Enforcement and/or NEON programs.
- ▶ Facilitate and participate in both Multi-Disciplinary Teams (MDTs) and Individual-Disciplinary Teams (IDTs) in their communities to help coordinate a continuum of services for participants (for example, a participant receiving a housing subsidy, training and vocational rehabilitation services). Each entity requires a service plan, and the MDT/IDT ensures the plans are coordinated.
- ▶ Provide guidance and field supervision to UNLV/UNR social work interns assigned to the Division's Supporting Teens Achieving Real-life Success (STARS) program.

- ▶ Collaborate with the Division of Mental Hygiene and Developmental Services and Vocational Rehabilitation to effectively address mental health issues with TANF clients through an established protocol.

IV. FUNDING

Social service programs are funded through the TANF Block Grant and the State General Fund.

V. CONTRACT COMMITMENTS FOR FY 2014

Service Amount

Substance Abuse	\$198,442
Domestic Violence	\$486,180
Statutory Rape	\$129,350

**EMPLOYMENT AND SUPPORT
SERVICES**

**NEW EMPLOYEES
OF NEVADA
(NEON)**

EMPLOYMENT AND SUPPORT SERVICES - NEW EMPLOYEES OF NEVADA (NEON)

I. PROGRAM STATEMENT

A. BACKGROUND

The Family Support Act of 1988 signed by the President October 13, 1988 required states to implement the JOBS Program. The JOBS Program replaced the Work Incentive (WIN) Program that had been in existence since 1970 as a mandatory employment and training program for Aid to Families with Dependent Children (AFDC) recipients. The Welfare Division changed its Employment and Training Program name from JOBS to New Employees of Nevada (NEON) in 1995. The JOBS Program was incorporated into a block grant with Aid to Families with Dependent Children (AFDC) when the President signed the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) on August 22, 1996. The PRWORA requires defined work activities for the cash assistance program now known as Temporary Assistance for Needy Families (TANF). The Deficit Reduction Act of 2005 legislation reauthorized the TANF program through fiscal year (FY) 2010 with a renewed focus on work, program integrity and strengthening families through healthy marriage promotion and responsible fatherhood. The final regulations were published in February 2008 and require states to establish and maintain a Work Verification Plan.

B. PURPOSE

The purpose of the NEON Program is to provide employment, education, training and support services to recipients of cash assistance, by promoting job preparation and work. These services assist clients to become self-sufficient, thereby reducing dependency on cash assistance.

C. FUNDING

The TANF block grant allows states to use federal and state matching funds for employment and training functions. The state must maintain a "Maintenance of Effort" level using state general funds to receive the TANF block grant.

D. PARTICIPATION REQUIREMENTS

NEON participation is mandatory as a condition of cash eligibility for all work-eligible, non-exempt TANF applicants and recipients. A work-eligible individual is anyone whose participation in work activities contributes to determining whether the family counts in the calculation of the work participation rate.

WORK-ELIGIBLE PARTICIPANTS INCLUDE:

- An adult less than sixty (60) years of age receiving assistance under TANF or a separate State program;
- A minor child head-of-household receiving assistance under TANF or a separate State program;
- A non-recipient parent living with a child receiving assistance unless
 - A minor parent who is not a head-of-household or spouse of the head-

of-household

- An alien who is ineligible to receive assistance due to their immigration status
- A recipient of Supplemental Security Income (SSI) benefits

EXEMPTION TO WORK PARTICIPATION

- Under age one exemption. States have the option of exempting individuals who are single custodial parents caring for a child under age one from the work requirement. A state may disregard these individuals from the denominator of the work participation rate calculation for all families. A parent may only receive this exemption for a total of 12 months, although the months need not be consecutive and can be divided among more than one child. Nevada has opted for this exception and allows only three (3) months of the exemption to be used per pregnancy.
- Caring for a disabled family member. Individuals required to care for a disabled family member are exempt.
- Individuals exempt from the five-year lifetime limit on federally funded benefits are not exempt from the work requirement. These individuals will be counted in the denominator of the work participation rate calculation.
- Nothing in the legislation prohibits states from exempting other individuals from the work requirement (i.e., individual's caring for a disabled family member), but these individuals will be counted in the denominator of the work participation rate calculation.

Automatic referrals for work-eligible clients are made to the Employment and Training Unit via the computer system.

Work-eligible individuals required to participate in NEON who fail to comply without good cause are sanctioned.

E. PROGRAM COMPONENTS/ACTIVITIES

The NEON Program includes:

1. An orientation, assessment and appraisal process.
2. Development of Personal Responsibility Plans (PRP).
3. Signing of an agency/participant contract (PRP) specifying the services the Division will provide and the role of the participant in achieving goals leading to employment within a certain time frame.
4. Employment and training job readiness workshops and network centers.
5. Structured job search requirements.
6. Educational development and vocational training.
7. Community Work Experience Program (CWEP).
8. Referrals to other agencies such as school districts and other educational programs, Career Enhancement Program (CEP), and Vocational Rehabilitation.

9. Counseling and support groups for victims of domestic violence, drug/alcohol screening and treatment, mental health counseling, and parenting classes.
10. Job development and job referrals.
11. Social services to help remove barriers to employment (i.e., domestic violence, substance abuse and mental health services).
12. Job retention counseling.

F. SUPPORT SERVICES

1. Types of Services

NEON participants are eligible to receive payments for childcare, transportation and special needs items (e.g., clothing, tools necessary to accept employment, vehicle repairs, and relocation expenses for employment and substance abuse treatment co-payment reimbursement). The cost of tuition and books is paid for some educational courses and for vocational training. Workers' compensation coverage is provided for CWEP workers.

Employed recipients receiving cash assistance may continue to receive transportation support services after the date of hire through the NEON Program. Childcare is available to cash assistance recipients who become employed. Childcare assistance is available from the Child Care Development Block Grant programs administered by non-profit community agencies.

2. Job Retention Bonus Payment

TANF participants, who obtain employment while a TANF participant and retain employment of 25 or more hours per week for six (6) continuous months, are eligible to receive a one-time payment of \$350.

G. REGULATIONS AND LAWS

The Employment and Training programs for cash assistance recipients are governed by a variety of laws and regulations. The governing body is the Office of Family Assistance, Administration for Children and Families, Department of Health and Human Services. Program changes and instructions are transmitted to the states through a variety of means such as Information Memorandums, Action Transmittals and Code of Federal Regulations updates.

Following are the primary regulatory sources:

1. Personal Responsibility and Work Opportunity Reconciliation Act of 1996
2. Deficit Reduction Act of 2005
3. Part 45 of the Code of Federal Regulations
4. Nevada Revised Statutes, Chapter 422A
5. Court Ordered Actions

II. WORK REQUIREMENTS IN THE TANF BLOCK GRANT

The DRA of 2005 “reauthorized” TANF, extending program funding through FY2010 and changed work requirements for families receiving cash welfare, among which were including families with an adult receiving assistance in a separate state program funded with qualified state maintenance-of-effort expenditures (SSP–MOE) in the work participation rates and revising the base year of the caseload reduction credit from FY 1995 to FY 2005.

The law also issued regulations to ensure consistent measurement of work participation rates, including defining work activities, determining the circumstances under which a parent who resides with a child who is a recipient of assistance should be required to participate in work activities, and requiring states to establish and maintain work participation verification procedures.

The Deficit Reduction Act retained nearly all of the TANF provisions enacted in the original welfare reform law. For example, the law retained the requirement that 50 percent of all families with an adult participate in the 12 allowable work activities for specified hours each week and that 90 percent of two-parent families similarly participate for certain, specified hours.

The hourly work participation requirements that adults must achieve to count in the state’s work participation rates also did not change.

III. ANNUAL WORK PARTICIPATION RATE REQUIREMENTS

States must meet the following annual work participation rates with respect to all families, which include an adult or minor child head of household receiving assistance.

Fiscal Year	ALL FAMILIES		TWO-PARENT FAMILIES	
	Participation Rate	Hours of Work Required Per Week to Count Toward Rate	Participation Rate	Hours of Work Required Per Week to Count Toward Rate
2001	45%	30	90%	35
2002	50%	30	90%	35
2003	50%	30	90%	35
2004	50%	30	90%	35
2005	50%	30	90%	35
2006	50%	30	90%	35
2007	50%	30	90%	35
2008	50%	30	90%	35
2009	50%	30	90%	35
2010	50%	30	90%	35
2011	50%	30	90%	35
2012	50%	30	90%	35
2013	50%	30	90%	35

- States may be allowed to meet a lower work participation rate if they experience a net caseload reduction compared to FY 2005. (See below.)
- Annual participation rate is the average of the participation rate for each month in the year.
- Individuals must meet the minimum numbers of hours (averaged over a month) to be counted toward meeting the work participation rate.
- States have the option to limit the required number of hours of work to 20 hours for those single custodial parents with a child under age six in every fiscal year.
- The hours of work activities of both parents in a two-parent family may be combined to reach 35 hours per week for the family to be considered to be meeting the participation requirement. In order to meet the All Family rate, one of the two parents must be engaged in countable work activities for a minimum of 30 hours per week.
- Two-parent families that receive federally funded childcare, both parents must work a combined 55 hours per week with one parent working 30 hours. 50 of the 55 hours must be in core work activities. Exceptions are allowed for parents of disabled children or if one parent is disabled.

PRO RATA REDUCTION OF WORK PARTICIPATION RATE DUE TO NET CASELOAD REDUCTION –

In some fiscal years, states may meet a lower work participation rate requirement than stated in the chart above. Under a provision in the law, a state with a caseload below FY 2005 levels will be "rewarded" by receiving a reduction in the work rate requirement in the next fiscal year.

The law requires the Secretary to establish regulations to grant states a reduction in their work participation rate by the percentage points equal to the percentage points (if any) the average monthly number of families receiving aid under the block grant in the state in the preceding fiscal year is less than the average monthly number of families that received aid under Title IV-A in the state in FY 2005. The participation rate may not be reduced to the extent the Secretary determines the reduction in the number of families leaving such assistance is required by federal law, or the Secretary proves families were diverted as a result of a state changing its eligibility criteria.

EXAMPLE: If the Secretary determines a state's average monthly caseload in FY 2005 was 4 percentage points lower than average monthly caseloads in FY 2006, rather than having to meet a 50% work participation rate requirement in FY2007 the rate would be lowered by 4 percentage points to 46%.

If a state's net caseload for a fiscal year should exceed the FY 2005 levels, then the state will face the full work participation rate requirement in the following fiscal year.

CALCULATION OF MONTHLY PARTICIPATION RATE FOR ALL FAMILIES:

NUMERATOR:	# of families receiving assistance that includes an adult or minor head of household who is engaged in work for the requisite hours.		
divided by			
DENOMINATOR:	# of families that include an adult or a minor child head of household receiving assistance.	less	# of families sanctioned in that month for failure to participate in work (for up to 3 months in preceding 12-month period).

- A similar calculation is made for two-parent families.
- At state option, families receiving assistance under a tribal family plan may be included in the work participation rate calculation.

Nevada's Finalized Participation Rate History

All Family

	Federal Mandated Rate	Federal Caseload Reduction Credit	Federal Mandated Adjusted Rate	Nevada Rate Achieved	Nevada Made Participation Rate
FFY2001	45%	51.2%	0%	35.1%	Yes
FFY2002	50%	43.2%	6.8%	21.6%	Yes
FFY2003	50%	23.8%	26.2%	22.3%	No
FFY2004	50%	26.5%	23.5%	34.5%	Yes
FFY2005	50%	42.4%	7.6%	42.8%	Yes
FFY2006	50%	48.2%	1.8%	47.8%	Yes
FFY2007	50%	11.40%	38.6%	33.7%	No
FFY2008	50%	15.5%	34.5%	42.1%	Yes
FFY2009	50%	18.8%	31.2%	38.96%	Yes
FFY2010	50%	38.6%	11.4%	37.6%	Yes
FFY2011	50%	20.9%	29.1%	37.8%	Yes
FFY2012	50%	3.4%	46.6%	35.07%	No
FFY2013	50%	4.5%	45.5%	35.4%	No

Two Parent

	Federal Mandated Rate	Federal Caseload Reduction Credit	Federal Mandated Adjusted Rate	Nevada Rate Achieved	Nevada Made Participation Rate
FFY2001	90%	51.2%	38.8%	69.3%	Yes
FFY2002	90%	43.2%	46.8%	26.5%	No
FFY2003	90%	23.8%	66.2%	24.1%	No
FFY2004	90%	26.5%	63.5%	29.6%	No
FFY2005	90%	42.4%	47.6%	39.6%	No
FFY2006	90%	48.2%	41.8%	44.6%	Yes
FFY2007	90%	11.40%	78.6%	44%	No
FFY2008	90%	15.6%	73.4%	51.4%	No
FFY2009	90%	18.8%	63.7%	46.38%	No
FFY2010	90%	38.6%	51.4%	45.2%	No
FFY2011	90%	20.9%	69.1%	46.3%	No
FFY2012	90%	3.4%	86.6%	42.09%	No
FFY2013	90%	4.5%	85.5%	36.0%	No

* Data reported for FFY2011 has been finalized and updated. FFY2012 & 13 has not been finalized by ACF and is not final. Preliminary data was provided where available.

IV. ALLOWABLE WORK ACTIVITIES

Allowable work activities, which count toward the work participation rate, are divided into two groups. A minimum of 20 hours a week must be spent on the activities in the first list below. After that, recipients can meet the work requirement with additional hours from the second list.

ALLOWABLE WORK ACTIVITIES FOR FIRST 20 HOURS - To count toward the work participation rate requirement for all-families, an individual must participate in one or more of the following activities for at least 20 hours a week (or 35 hours per week combined for both parents in two-parent families).

1. Unsubsidized employment.
2. Subsidized private sector employment.
3. Subsidized public sector employment.
4. Work experience (including work associated with refurbishing publicly assisted housing), only if sufficient private sector employment is not available.
5. On-the-job-training.
6. Job search and job readiness assistance for up to 240 hours (no more than 4 weeks may be consecutive). On not more than one occasion, the state may count an individual as having participated in job search for a week if the individual participated for three or four days.
7. Community service programs.
8. Vocational educational training (not to exceed 12 months for any individual).
9. Provision of child care services to an individual who is participating in a community service program.

ACTIVITIES THAT COUNT AFTER 20 HOURS - For the all-families rate, participation in the following activities count after 20 hours have been completed in the above activities (30 hours for two-parent rate).

10. Job skills training directly related to employment
11. Education directly related to employment, in the case of a recipient who has not received a high school diploma or certificate of high school equivalency. (See special rule for teens.)
12. Satisfactory attendance at secondary school or course of study leading to GED in the case of a recipient who has not completed secondary school. (See special rule for teens.)

SPECIAL RULE FOR TEENS - Married or single teens, under age 20, will count toward meeting the rate if the recipient maintains satisfactory attendance at secondary school or the equivalent; or, participates at least 20 hours per week in education directly related to employment. The law requires unmarried teen parents under age 18 who have not completed a high school education must, as a condition of receiving assistance, participate in educational activities directed toward attaining a high school diploma or GED.

PENALTIES ON INDIVIDUAL FOR REFUSAL TO WORK - If an individual refuses to engage in work as required under TANF, a sanction will be imposed against the household's TANF benefits, as appropriate. If the household chooses not to comply during the conciliatory period, cash assistance terminates. Once terminated, all household members are disqualified for TANF for three (3) months and until compliance.

A state may withhold penalties subject to good cause or other exceptions established by the state.

A state may not penalize a single, custodial parent with a child under age six if the individual proves she/he has a demonstrated inability (as determined by the state) to obtain needed child care.

A state may also terminate Medicaid coverage for adults whose benefits are terminated for refusal to work. Nevada has chosen to allow pregnant women and children in the family remain eligible for the Child's Health Assurance Program (CHAP).

**EMPLOYMENT AND SUPPORT
SERVICES**

**SNAP
EMPLOYMENT
AND TRAINING**

EMPLOYMENT AND SUPPORT SERVICES - SNAP EMPLOYMENT AND TRAINING PROGRAM

I. MISSION STATEMENT

The SNAP Employment and Training Program promotes the employment of participants through job search activities and group or individual programs which provide a self-directed placement philosophy, allowing the participant to be responsible for his/her own development by providing job skills and the confidence to obtain employment.

A. BACKGROUND

Up until April 1986, states had the option to operate an independent job search program for SNAP recipients. Until October 1986, Nevada contracted with the Employment Security Department (ESD) to operate such a program. Effective October 1986, the Division of Welfare and Supportive Services (DWSS) assumed responsibility for administration of the program.

In April 1987, PL 99 -10 mandated states to implement a Comprehensive Employment and Training program incorporating job readiness activities beyond individual job search. In response, DWSS developed and implemented a SNAP E&T Program including several job readiness components emphasizing a self-directed philosophy. One of the activities/components was a Workshop/Network Center modeled after those operated in the State of Nebraska. Curtis and Associates, a consulting firm from Nebraska, was contracted to provide training to DWSS Employment and Training staff in Reno and Las Vegas during July 1988. The first workshop and network centers began operation in August 1988. By April 1991, due to increased caseloads and poor attendance, which jeopardized the state in meeting its federal performance standards, the workshop was decreased from five days to one day and the network terminated.

Since June 1994, the Food and Nutrition Service (FNS) has encouraged states to plan future SNAP E&T efforts for clients needing more intensive employment related services. To comply with FNS instructions, Nevada's SNAP E&T Program has added limited skills training classes and special needs assistance to improve client's employability.

Prior to December 1, 2008 in accordance with the American Recovery and Reinvestment Act of 2009 the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) established SNAP Program work requirements and participation time limits for non-exempt, able-bodied adults without dependents (ABAWDs). All ABAWD individuals aged 18 through 49 are ineligible to continue receiving SNAP benefits after receiving three (3) issuances if, during a 36-month period, they did not:

- Work at least 20 hours per week (averaged monthly); or
- Participate in and comply with a Workforce Investment Act (WIA) program or Trade Adjustment Assistance Act (TAAA) program at least 20 hours per week; or
- Participate in and comply with an ABAWD work/training program.

ABAWD individuals who reside in an area with unemployment rate over 10% or in a labor surplus area may be exempt from the ABAWD provisions.

A provision of the Balanced Budget Act of 1997 permits states to exempt up to 15 percent of their unwaived, unemployed, childless ABAWD population from the PRWORA three-month time limit. Nevada will provide this exemption to ABAWD individuals who are:

- Physically or mentally unfit for employment and who are unable to provide medical certification from a physician or a professionally qualified person in the field of psychiatric mental health; or
- Residing in rural Nevada (non-waiver areas) when employment opportunities become, or are limited, as determined by the office manager (i.e., mining closures).

Because the State of Nevada has been experiencing very high levels of unemployment statewide, in September 2008, the U.S. Department of Labor determined Nevada qualified for extended UIB benefits due to insufficient jobs in the state under the provisions of 26 U.S.C. 3304 (P.L. 102-318). This designation also qualified the State of Nevada to apply for a waiver from the Food and Nutrition Service to exempt the entire state from the SNAP provision limiting ABAWD individuals 3 months of SNAP benefits in a 36-month period. FNS approved the waiver request exempting the entire state from the ABAWD limitations effective December 1, 2008 and until further notice.

B. FUNDING

Federal funding for the SNAP E&T Program is allocated based on a state's population and program requirements. Each fiscal year, Nevada receives a federal grant administered through Food and Nutrition Service of the U.S. Department of Agriculture to operate the program. Each state agency's grant is comprised of 100% SNAP E&T funds authorized for administration and operations of the program and 50% match funds for participant support services. Nevada's total SNAP E&T funding for Federal Fiscal Year (FFY) 2014 was \$707,295 and for 2015 is \$774,368.

C. REGISTRATION/PARTICIPATION REQUIREMENTS

Registration and participation in employment and training activities is mandatory and is a condition of SNAP eligibility for all non-exempt SNAP recipients. Persons who are exempt may volunteer. Persons are exempt when they are under age 16, age 60 or older, disabled, caring for young children (under age six) or disabled family members, employed at least 20 hours per week, homeless, complying with the NEON program, living outside the metropolitan areas of Clark and Washoe Counties, an eligible student, or are temporarily laid off from a job.

Registration occurs at initial approval, recertification or when changes occur. Referrals are made to the Employment and Training Unit.

If a household member fails to comply with the work program requirements, that member is disqualified as follows:

- First violation - a minimum of one month and until compliance;
- Second violation - three months minimum and until compliance;

- Third or subsequent violations - six months minimum and until compliance.

D. PROGRAM COMPONENTS/ACTIVITIES

The SNAP E&T Program Includes:

- Signing of agency/participant agreements to participation requirements.
- Employment and training job readiness workshops.
- Structured individual and/or group job search requirements.
- Referrals to other agencies such as Department of Education, Workforce Investment Act (WIA) and Vocational Rehabilitation.
- Assessment of employment goals.
- Job development and job referrals.
- Requests for special needs assistance.
- Job Retention support services for the first 30-days of employment.

E. SUPPORT SERVICES

1. Types of Services

Employment and Training mandatory participants may receive an allowance for transportation and support services while participating in the program.

2. Payment Amounts

Transportation is provided either on a reimbursement basis up to a maximum of \$50 per month, for no more than 2 months, in a 12 month period or the individual may receive a bus pass for the period of time they are required to participate.

3. Special Needs

Program history has shown a number of the SNAP E&T population would be able to immediately go to paid employment if the program provided payment of employment-related expenses necessary to accept or maintain employment (such as uniforms, shoes, work permits, health cards, tools, etc.). Up to \$200 per participant for reimbursement of these types of expenses is allowed prior to employment. Any transportation expense provided would not be deducted.

F. REGULATIONS AND LAWS

The Food and Nutrition Service, United States Department of Agriculture governs the Employment and Training Program for SNAP recipients. Program changes and instructions are transmitted to the states through such means as Administrative Notices and Code of Federal Regulations updates. Following are the primary regulatory sources:

- The Food and Nutrition Act of 2008
- Part 7 of the Code of Federal Regulations
- Nevada Revised Statutes, Chapters 422A and 207
- Personal Responsibility and Work Reconciliation Act of 1996

- The Balanced Budget Act of 1997
- Farm Bill of 2002

II. SNAP EMPLOYMENT AND TRAINING PROGRAM STATISTICS

(July 2013 through May 2014 Caseload Reports)

A. GENERAL SNAP PROGRAM DATA

- Monthly average authorized cases 185,369
- (Public Assistance* 27,300
Non-Public Assistance**158,069)
- Monthly average recipients 374,023
(Public Assistance*39,904
Non-Public Assistance**334,119)
- Average family size 2.0
(Public Assistance* – 1.5
Non-Public Assistance** –2.1)

* Public Assistance = Households (all members receiving both SNAP benefits and Public Assistance - TANF or SSI).

** Non-Public Assistance = Households receiving SNAP benefits only or mixed households (receiving SNAP benefits and some, but not all, household members are receiving TANF or SSI).

B. REGISTRATIONS

There were 43,852 SNAP Employment and Training Program registrations completed from July 2012 through June 2013 and 57,076 SNAP Employment and Training Program registrations completed from July 2013 through June 30, 2014.

C. SNAP EMPLOYMENT AND TRAINING PARTICIPANTS

Mandatory participants engaged in the program (monthly field reports):

- July 2012 through June 2013 6,544
- July 2013 through June 2014 9,224

D. SNAP E&T WORK REQUIREMENTS

1. DWSS Employment and Training Workshop
SNAP Family Service Specialists (FSS) will hold a Job Readiness Workshop at least once a month for mandatory participants who are required to complete the job search requirement. Under the Workforce Investment Act (WIA), services such as assessments, career exploration, job search workshops, guided job search assistance and ongoing coaching and monitoring are provided to participants to upgrade their skills in order to obtain and sustain self-sufficient employment.

2. Structured Work Requirements

Participants are required to make at least 10 employer contacts in each of two thirty-day periods. The number of contacts may be reduced in areas experiencing high unemployment or labor surplus.

3. Educational Development

Nevada State Welfare has coordinated efforts with the school districts, community colleges, WIA and the Literacy Council for pre-GED/literacy testing and classes, as well as actual GED testing. Thus far, the participants have primarily been TANF (NEON) recipients. More SNAP recipients are starting to attend pre-GED/GED classes.

4. Job Readiness

DWSS has added Job Readiness for the first 30 days of employment. When participants obtain employment the Division may assist with transportation and other work related needs for the first 30-days.

E. SUPPORT SERVICES

Support service payments and gas reimbursements to participants can be given after completion of a component. Participants who fail to complete components do not receive support services or reimbursements. Participants who obtain employment or have need of a health card, sheriff's card, tools or clothing to be hired are provided funds to obtain these items up to \$200 prior to being hired and/or up to 30 days after being hired. Costs may be shared with other organizations.

Bus passes can be provided in advance to participants in lieu of gas reimbursements when they have no money and public transportation is available.

F. EMPLOYMENT DATA

Of those who began a work component during July 2012 - June 2014 (monthly field reports):

- Average Hourly Rate in 2013 \$10.37
- Average Hourly Rate in 2014 \$10.06
- Average Hours Worked in 2013 29 hours per week
- Average Hourly Rate in 2014 28 hours per week

**ENERGY ASSISTANCE
PROGRAM
(EAP)**



ENERGY ASSISTANCE PROGRAM (EAP)

I. BACKGROUND

The Energy Assistance Program (EAP) assists low-income Nevadans with the high cost of home energy. Funding is provided from the Low Income Home Energy Assistance Program (LIHEAP) block grant through the U.S. Department of Health and Human Services, and from Universal Energy Charge (UEC) monies distributed through the Nevada Fund for Energy Assistance and Conservation.

II. PURPOSE

The program is designed to help eligible Nevadans maintain essential heating and cooling in their homes during the winter and summer seasons.

III. FUNDING

The Welfare Division first assumed responsibility for the energy assistance program in 1989 and the sole source of funding was from the LIHEAP block grant. In 2001, the Nevada Legislature adopted NRS 702, which established a universal energy charge on the utility bills of certain customers who receive natural gas and electricity services from specified utilities. The universal energy charge is derived through a mill tax assessment based on the amount of electricity and natural gas used by the customer.

IV. APPLICATION PROCESS

Persons seeking assistance may apply for and be awarded a benefit once each program year. The program year begins July 1st and applications are accepted through June 30th of the following year. Applications are submitted to, and processed by, staff at two EAP offices, one located in Las Vegas and the other in Carson City. Contracted Application Intake sites such as Family Resource Centers, Senior Citizen Centers and County Social Services agencies, assist households in completing the application process and are compensated a nominal fee of \$10 per completed application. Completed applications are forwarded to one of the aforementioned EAP offices for the determination of eligibility. Prior year recipients are not eligible to apply for energy assistance until 11 months after they received their last annual benefit. Prior year recipients are mailed a reminder notice when they are eligible to reapply.

Applications are generally processed in the order in which they are received. Policy requires applications to be processed within sixty (60) days of receipt for 'non-targeted' households and thirty (30) days of receipt for 'targeted households'. Targeted households are defined by federal regulation as households with an elderly, disabled and/or child under the age of six (6) member. Applicants are mailed an eligibility determination notice on the next regular working day following certification. Applicants who meet specific criteria may have their applications/payments expedited to alleviate their energy-related crisis.

V. ELIGIBILITY CRITERIA

Eligibility is based on an annual projection of all gross income for the 30-90 days prior to the date of application or application review. The total gross income of all

members of a household may not exceed 150 percent of the federal Poverty Income Guidelines established by the Office of Management and Budget, as follows for SFY 2014:

Number in Household	Average Monthly Income
1	\$1,436
2	1,939
3	2,441
4	2,944
5	3,446
6	3,949
7	4,451
8	4,954

Households, with annual income in excess of 150 percent of poverty, may qualify if special circumstances exist and allowable qualifying expenses reduce their countable annual income to 150 percent of poverty or less. Qualifying expenses include unreimbursed medical expenses for a long-term or chronic medical condition, unreimbursed compulsory and necessary home repairs, and certain automobile repairs only if transportation is required for ongoing medical care.

A household is defined as an individual or group of individuals, related or not, who are living together and sharing a primary heating or electric source.

The household must be at least partly responsible for home heating or cooling costs by paying a utility company, fuel supplier, or landlord directly.

The benefit is based on the household's gross income and annual energy usage.

The Arrearage Payment Component assists households in eliminating debt owed to an energy vendor for prior energy usage at the household's current address, excluding deposits, reconnection fees, and penalties assessed by the utility for improper or fraudulent activities related to obtaining or using energy. An applicant may receive an arrearage benefit only once in a lifetime.

VI. PAYMENTS

Eligible households receive an annual, one-time per year benefit paid directly to their energy provider(s). The benefit shows as a credit on the household's energy bill. Households are encouraged to spread the benefit over a 12-month period by dividing the benefit amount by 12 months. Households then pay the difference between their monthly energy bill and the monthly amount of their energy assistance. By paying towards their energy bill each month and allowing the benefit credit to slowly reduce to zero over 12 months, the benefit is intended to allow the household to meet their annual energy needs. Eligible households who do not use participating energy suppliers are paid directly. Benefit amounts vary depending on the household's size, gross annual income and the total annual energy usage. The minimum assistance payment for an eligible household is \$180.

To ensure all eligible applicants could be served with the funding available, benefit caps were established on July 1, 2008. The caps were set based on household size, energy type and average Fixed Annual Credit (FAC) benefit using a household size of four as the standard. Households utilizing heating oil or propane as their energy source have an established benefit cap separate and distinct from all other energy source users in consideration of the higher cost per British Thermal Unit (BTU) of heating oil and propane. A flat \$50 increase to the cap applies to households with members who are elderly, disabled or a child under 6 years of age. An additional \$200 to those households using propane and/or oil as a sole energy source. Due to the volatility and unpredictability of the annual LIHEAP Block Grant funding, the UEC and LIHEAP State Plans were amended in SFY10 to provide the administrator with the authority to equitably increase the caps. This flexibility allows the Division to maximize the benefits distributed based on current revenue and caseload projections.

VII. REGULATIONS AND LAW

1. Omnibus Budget Reconciliation Act of 1981 (Public Law 97-35)
2. 45 CFR Part 96 Federal Regulations
3. Nevada Revised Statutes, Chapter 702

FY 2014 ENERGY ASSISTANCE PROGRAM STATISTICS

*** CATEGORIES	STATEWIDE	
	TOTAL	PERCENT
# HOUSEHOLDS SERVED	24,348	
*Households with ELDERLY	9,406	38.6%
*Households with DISABLED	10,636	43.7%
*Households with CHILDREN UNDER 6	4,842	19.9%
TOTAL FAC Benefits Paid	\$16,472,373	
Average Payment	\$677	
# HOUSEHOLDS WITH ARREAGES PAID	2,972	
Total Arrearages Paid	\$1,003,474	
Average Arrearage Paid	\$338	

- *These characteristics may include duplicate counts when appropriate (i.e. if a household member is elderly and disabled they are counted in both categories).
- ***Information for this chart was pulled from the DWSS EAP Program Year Statistics Report with information for July 1, 2013-July 31, 2014.

INFORMATION SYSTEMS



INFORMATION SYSTEMS

BACKGROUND

The Department of Human Resources, Division of Welfare and Supportive Services Information Systems Unit (ISU) continues to engage in progressive projects to ensure that Nevada's families are served by the most revolutionary technology and user-friendly processes.

The following project activities have been undertaken to fulfill the needs of the division:

I. ELIGIBILITY ENGINE – Medicaid

As part of the Affordable Care Act implementation in the State, DWSS hired Deloitte Consulting to implement the new Modified Adjusted Gross Income (MAGI) eligibility rules for Medicaid in an external eligibility engine, and remove them from the legacy NOMADS system.

In the next few months DWSS expects to;

- Add the Presumptive Eligibility module, both in the Eligibility Engine and in NOMADS.
- Add SNAP and TANF to the Eligibility Engine and remove them from NOMADS

II. SUPPORTED STATE BASED MARKETPLACE (SSBM) - Medicaid

In May of 2014, the Silver State Health Insurance Exchange Board voted to end the current contract with Xerox and become a Supported State Based Market Place or SSBM. This means that in plan year 2015, the Nevada citizens shopping for insurance will be directed to the Federal Facilitated Marketplace, and Medicaid and Chip components moved into Access Nevada.

Listed below are some of the high level activities associated with this project;

- Created three new development environments to support SSBM
- Built new virtual servers for Access NV in two environments to support SSBM
- Move the Single Streamlined Application in Access Nevada
- Associated modifications to AMPS and Access Nevada
- Integration with the Federal Marketplace
- Call Center build-out
- Security Provisioning Expansion

III. CORRESPONDENCE MANAGEMENT SOLUTION - Medicaid

The Correspondence Management Solution integrates all varieties of paper and electronic correspondence into a unified customizable solution to improve quality, reliability and accountability and increase compliance with regulatory requirements. The system should increase efficiencies and reduce costs by streamlining processes and providing electronic options.

Though the RFP process, DWSS chose the Thunderhead forms and noticing software and has contracted with Chase Global Services to perform the initial setup and deployment. As this project was financed using Medicaid dollars, the project focus is

solely on Medicaid at this time. Future expansions will need to be cost allocated to the appropriate program(s).

This project began in April 2014. In the initial phase, all outgoing correspondence related to the Medicaid program are being migrated to the new system. An automated redetermination (RD) form will be fully implemented in September 2014. Other Medicaid related forms will be implemented in three (3) phases between September 2014 and November 2014. The new Notice of Decision (NOD) is scheduled for release in late 2014 or early 2015.

Other related activities;

- Deployed new correspondence processing server, Thunderhead, in four new environments
- Electronic forms (SB236) – This software will enable the Division to address the issues surrounding the enactment of this bill.
- Electronic noticing – This software will allow DWSS to correspond electronically with any clientele that wish utilize this feature. It is hoped that by providing electronic versions of correspondence to the client, that this will reduce printing and mailing costs incurred by the Division.

IV. SECURITY - Medicaid

DWSS has had to build out many different security related technologies in order to be compliant with the Affordable Care Act security regulations. DWSS has been working closely with EITS to ensure integration/augmentation of existing toolsets and methodologies.

Multi-Factor Authentication

Multifactor authentication is an advanced method of authenticating administrators and users to IT resources. Currently the state does not have a multifactor authentication capability. This capability is required and this line item meets that identified need.

Enterprise Logging

This item is to provide and support the logging, continuous monitoring and incident response (event correlation and incident investigation) required by CMS. The pricing is based on an estimate of 200GB/day logging, derived from an analysis of our current load and environment, and adjusted to provide for a 25-30% increase in volume.

Tenable / Nessus Compliance Monitoring

Compliance for the HCREE is based on NIST standard 800-53. Nessus has the ability to track workstations and servers to verify and report on compliance levels, specifically NIST 800-53. This is enterprise direction for the state, for this purpose.

**Server Monitoring
Control Hardening
(Altiris - Symantec)**

This software product enforces a more effective security policy on computer servers to ensure that the server only allows the minimum necessary services and access. This solution also provides effective secure management of computer servers.

**System Penetration
Testing - Service**

A recommended methodology for determining the security of a system is to perform an independent evaluation of the controls of system to verify that security requirements are effective and appropriate. This test would be performed by a certified expert(s) capable of advanced penetration techniques.

**Network Traffic
Monitoring Service**

The state currently uses the Federal Department of Homeland Security sponsored security monitoring to track and alert on network security events globally. This line item would extend that service to the HCREE specifically.

**Incident Response
Training**

Federal compliance requires that the state have effective policy and personnel dedicated to responding effectively to a security incident/ compromise. This funding is to train a minimum of 5 individuals from Welfare and EITS to respond to security incidents.

**CPDR Plan Final
Development & Testing**

This would cover additional Deloitte consultant effort in assisting with drafting recovery procedures and facilitating the initial CPDR plan walkthrough. The first test walkthrough should be facilitated by a third party to better enable all participants to focus on the response rather than the testing process.

V. APPLICATION MODERNIZATION AND PRODUCTIVITY SERVICES (AMPS) - SNAP/TANF/Medicaid/CHIP

This project will provide automated tools to the case workers creating a more efficient client worker relationship. The combination of automated client and case worker tools will increase productivity in the division by a target of 20% and possibly as much as 30% while providing clients with the opportunity to complete applications, process changes and obtain valuable information from their own homes, the public library, community partners including neighborhood family resource centers in their neighborhood.

VI. ACCESS NEVADA - SNAP/TANF/Medicaid/CHIP

Access Nevada allows customers to electronically submit their benefit application without having to print the form and submit it to a DWSS district office. The data is then be processed by case workers using the new AMPS System. Prior to the implementation of the Affordable Care act, over 40% of all applications for SNAP/TANF and Medicaid were submitted electronically through Access Nevada, and the Division expects that by bringing the Medicaid application back into Access Nevada that the electronic submission should far exceed the previous 40% rate.

Plans for the Fiscal Year 16-17 biennium;

- Add customer self service module to Access Nevada
- Replace the HATS Macros with services
- Add EAP and Child Care applications to Access Nevada
- Add the Single Streamlined Application (Medicaid) into Access Nevada

VII. COMPASS – Child Support Enforcement

A recent legislatively sponsored audit recommended the Nevada Division of Welfare and Supportive Services (DWSS) clean up the filing systems and implement an imaging system.

Document imaging and document generation, combined with automated workflow, has improved the Child Support Enforcement Program's (CSEP's) ability to provide fair and equal child support services.

There currently over 20 million scanned images used by CSEP used in case management.

VIII. CHILD SUPPORT ENFORCEMENT DECISION SUPPORT/BUSINESS INTELLIGENCE SYSTEM – Child Support Enforcement

The Child Support Enforcement Program contracted Chase Global Services to build a data warehouse of all NOMADS child support tables and columns and build an executive dashboard to present the key performance measures from the redeveloped OCSE-157 and the OCSE-34A reports that measure program effectiveness and developed many management reports with drill down capability to allow the program staff to more effectively and efficiently manage caseload.

IX. NOMADS FEASIBILITY STUDY – Child Support Enforcement

The scope of this project is to:

- Comprehensively review the ability of the NOMADS software application to perform business responsibilities required by federal and state laws, regulations and policy.
- Examine the ability of the IV-D specific application modules within NOMADS to promote business efficiencies and cost-effective case management.
- Determine the long-term viability of the IV-D specific application modules within NOMADS to provide continued support of Divisional responsibilities and to integrate into the Department of Information Technology's global information technology plan.
- Analyze the cost-effectiveness and functionality of the IV-D specific application modules within NOMADS in comparison to other software applications used by other state or county governments engaged in similar business activities.
- Identify best practice software support options utilized by other states to promote business efficiencies and cost-effective operations.
- Recommend software application improvement or replacement options using provided high level system requirements, to include a preliminary cost analysis and implementation plan(s) and timelines of these options.

This project is estimated to complete in March of 2015.

X. INFRASTRUCTURE – All Programs

The following upgrades and modifications were performed by internal technical staff;

- Perforce was upgraded from 2007.3 to 2013.3.
- Migrated all applications from DB2 9.5 to 9.7
- Implemented LDAP database security for DB2 databases
- Implemented test reporting database with production size data
- Migrated 16 legacy applications from IBM WebSphere Application Server 6 to IBM WebSphere Application Server 7
- Migrated 75+ virtual WebSphere and database servers from legacy hardware to new hardware on the PureFlex hardware
- Help develop a DR site in Las Vegas
- XP Operating System/PC Replacement
- Pureflex Implementation
- Supported office moves and openings
- Migrated OASIS and EAP to WebSphere 7
- Migrated all Brio Reports in OASIS and EAP to Crystal
- Retired the Brio Server

Planned in the Next biennium:

- Migrate all of FileNet 3.5 to 5.1(2)
- Migrate all of FileNet 4.5 to 5.1(2)
- Upgrade to DB2 10 on distributed platforms
- Upgrade to DB2 10 on the mainframe
- Implement automated code checkout, build, deployment
- Migrate all legacy WAS 7 and WAS 8 to WAS 8.5
- Implement clustered IHS servers
- Migrate Process Server 7 to BPM 8.5
- Migrate WebSphere Portal server 6.1 to 8.5
- Update AMPS code to run on the new environments
- Complete migrating NCCS, PRISM and IRIS to WebSphere 7
- FileNet migration from P8 3.5 to 5.1 for NCCS and IRIS.
- Migrate ILog JRules 6 to WODM 8 for NCCS and Access NV SNAP/TANF

XI. IMAGING – All Programs

DWSS Utilizes the IBM FileNet software to store and index electronic images.

These images are electronic copies of documents, driver's licenses, and any other correspondence that is required to assist in case management.

DWSS has multiple applications utilizing FileNet including:

- Compass - IV-D
- Collections and Disbursement System (SDS) – IV-D
- Quality Control file Scanning
- Nevada Child Care System (NCCS)
- IRIS (Investigation and Recovery Information System)
- AMPS

DWSS converted the scanning software used to do the actual scanning and indexing from FileNet Capture Pro to FileNet DataCap. DWSS is still working on customizing DataCap to meet end user requirements and enabling some of the advanced features within DataCap that were not available with Capture Pro.

Other related activities;

- Modified Datacap to auto populate RD indexing properties from FileNet.
- Created Datacap reports for scanners and indexers.
- Migrated the entire CDS application to utilize DataCap.

DWSS has also entered into a contract for a third party vendor, VIATRON, to scan 140,000 active Medicaid/CHIP case jackets to virtualize more of the existing caseload.

XI. INTERFACES – All Programs

These interfaces were either added or modified

- Changed Banks from JP Morgan to Wells Fargo
- Death match interface with Vital Statistics
- Prisoner match interface with Department of Corrections
- Lifeline service for Phone providers
- Create Child Support Lien Network (CSLN) Interface
- Implemented e-payments and telephonic payments in SCaDU
- Print IV-D Checks at Controller's Office allowing EITS to retire their impact printer.

Planned in the Next biennium:

- EDRS interface with US Department of Agriculture for SNAP IPV from other states
- Move to new vendor for EBT of SNAP and TANF cash
- Modify TOP interface to remove fees

XII. PHONE SYSTEMS – All Programs

This project scope is to replace aging telephone systems and associated equipment. The Divisions telephone system is more than 12 years old and has limitations that reduce our ability to provide quality/timely customer service.

Included in the project scope is a replacement of customer services' Voice Response Unit, telephone switches in seven offices, 650 telephones, and ten conference phones.

The new VRU was put into service on August 4th.

The rest of the phone switch upgrades are scheduled to be completed by the end of Fiscal year 2015.

All switch and VRU equipment was leased.

XII. WEB PAGE – All Programs

DWSS’ WEB page was internally written and supported by internal technical staff.

Currently DWSS is beginning planning exercises in order to convert the WEB page to the Ektron platform.

XIV. BUGS/BREAK-FIX/HELP DESK TICKETS – All Programs

CSEP - In addition to working on projects in the work item queue, Information Systems developers resolved 4,621 helpdesk tickets related to CSE systems in the past year.

SNAP/TANF/Medicaid/CHIP- In addition to working on projects in the work item queue, Information Systems developers resolved 10,805 helpdesk tickets related to child support enforcement systems in the past year.

XV. INTERNAL DEVELOPMENT - SNAP/TANF/MEDICAID/CHIP

Work Items Completed

Title	Closed Date
Adjust Static Crystal Report Prompts for the Sparks Office	07/01/13
Create New District Office in Sparks - Mainframe	07/01/13
Create New District Offices in Reno - Mainframe	07/01/13
Create New District Offices in Reno - NCCS	07/01/13
Create New District Offices in Reno - OASIS	07/01/13
Create New District Offices in Sparks - OASIS	07/01/13
Reconfigure Direct Certification Data for Department of Education	07/01/13
Warranty for WI 1126 - MMIS Pend Process and Eligibility Code Assignment (Closure Issue)	07/05/13
Stale TANF, OASIS, and EAP Check Report	07/08/13
Caseload Report (Date Issued)	07/09/13
EAP - Invalid Area Numbers for SSNs	07/10/13
EAP - SQL Errors when creating Recipients	07/10/13
Transition NCCS Support from HCL to DWSS Staff	07/10/13
SNAP Households & Recipients in Washoe, Carson and Douglas Counties	07/12/13
Analyze and Repair IRIS Report - IR Case Disposition Recap	07/15/13
Fix the problem in report program AMN05A that prevented it from running on 6/30/2013.	07/15/13
Warranty Work Item - Implement Patch 307-4 , 307-5 and 307-6 for NCCS	07/15/13
Warranty for WI 1126 - MMIS Pend Process and Eligibility Code Assignment (CASE and DEMO)	07/19/13
MmisDemo and MmisCase	07/23/13
Create & Implement a New Method of Assigning Pseudo SSNs for PRISM Portlet	07/26/13
Outstanding AFDC Debt	07/29/13

Title	Closed Date
Caseload Report (Date Issued)	08/06/13
Warranty for WI 1126 - MMIS Pend Process and Eligibility Code Assignment (MBR in 2 Cases)	08/23/13
Provider Accreditation	09/04/13
Access NV batch Delete applications older than 3 months	09/12/13
MAABD Waiver Cases - Statewide	09/16/13
Match Against Vital Statistics Death Records	09/16/13
SNAPET Work Registrants	09/16/13
Energy Burden of Assisted EAP Households	09/19/13
Add Crisis Prevention and Benefits Restored Data to EAP	09/23/13
Energy Burden of Assisted EAP Households - Crystal Report	09/23/13
Federal Child Care Sample Pull is pulling cases w/o payment	09/23/13
Implement HCR-EE - NOMADS	09/23/13
Implement HCR-EE - NOMADS MBRE Screen Changes for NCU	09/23/13
Implement HCR-EE - NOMADS Stated Annual Income Screen	09/23/13
Implement HCR-EE- CRYSTAL REPORTS	09/23/13
Implement HCR-EE NOMADS APPL Screen Changes for NCU	09/23/13
Problem with EAP report 'EAP_CaseWorkerStatistical.rpt' in production.	09/23/13
RAD 7.5 Upgrade - EAP	09/23/13
Create Crystal Reports For HCR-EE Metrics	09/24/13
Warranty Work Item for Health Care Reform - AMPS (Patch 1)	09/24/13
Update Access Nevada Spanish Version for HCR	09/25/13
89104 residence zip cases assigned to Flamingo Office	09/26/13
Implement HCR-EE - ACCESS NEVADA	09/26/13
Implement HCR-EE - AMPS	09/26/13
Implement HCR-EE - BPM	09/26/13
Implement HCR-EE - BRE	09/26/13
Implement HCR-EE - Software Fix Packs and Upgrades	09/26/13
Implement HCR-EE - Audit and Logging	09/27/13
Warranty Work Item for Health Care Reform - AMPS (Patch 2 - Performance Enhancements)	09/27/13
Warranty Work Item for Health Care Reform - AMPS (Patch 3 - Special PreProd Promote)	09/27/13
Warranty Work Item for Health Care Reform-ACNV (Patch 3)	09/27/13
Implement HCR-EE - MMIS Interfaces	09/30/13
Warranty Work Item for HCR - HEAT Reports (WI 1947)	09/30/13
Warranty Work Item for HCR - Mainframe (Patch 2)	09/30/13
Warranty Work Item for Health Care Reform - ACNV (Patch 2)	09/30/13
Warranty Work Item for Health Care Reform - ACNV (Patch 4)	09/30/13
Warranty Work Item for Health Care Reform - AMPS (Patch 5)	09/30/13
Warranty Work Item for Health Care Reform - AMPS (Patch 6)	09/30/13

Title	Closed Date
Warranty Work Item for Health Care Reform - Mainframe (Patch 1)	09/30/13
Warranty Work Item for Health Care Reform - NOMADS (Patch 3)	09/30/13
Warranty Work Item for Health Care Reform- AMPS (Patch 4)	09/30/13
Warranty Work Item for Health Care Reform - NOMADS (Patch 4)	10/01/13
Warranty Work Item for Health Care Reform - AMPS (Patch 9)	10/02/13
Warranty Work Item for Health Care Reform - AMPS (Patch 7)	10/03/13
Warranty Work Item for Health Care Reform - Amps (Patch 10)	10/04/13
Warranty Work Item for Health Care Reform - AMPS (patch 11) - BPM / BRE locking cases in production	10/04/13
Warranty Work Item for Health Care Reform - BOS Batch Interfaces	10/04/13
Caseload Report (Date Issued)	10/08/13
Caseload Report (Date Issued)	10/08/13
Inmate Match	10/08/13
Match Against Vital Statistics Death Records	10/08/13
Warranty Work Item for Health Care Reform - AMPS (Patch 8)	10/08/13
Warranty Work Item for Health Care Reform - DIS and AMPS	10/08/13
Warranty Work Item for Health Care Reform- ACNV (patch 6)	10/08/13
Warranty Work Item for Health Care Reform- AMPS (Log 4J.properties)	10/08/13
Modify Access NV Batch Job to Include BOS Applications from HIX (Patch 1)	10/09/13
Warranty Work Item for Health Care Reform - ACNV (Patch 5)	10/09/13
Warranty Work Item for Health Care Reform NOMADS (Patch 5)	10/09/13
HCR-EE Access NV Batch is updating BOS application Status incorrectly	10/14/13
Limit hit for number of Assistance units in one case	10/14/13
Production HATS License Bug Fix	10/14/13
Warranty Work Item for Health Care Reform - (BPM to Resolve Blocker Bug 7450)	10/14/13
Warranty Work Item for Health Care Reform - ACNV (Patch 7)	10/14/13
Warranty Work Item for Health Care Reform - AMPS Portal	10/14/13
Warranty Work Item for Health Care Reform AMPS (ACNV autosubmit)	10/15/13
Debts Paid In Full - Past Three Years	10/17/13
HCR Ad-Hoc that summarizes the number of calls being made to Federal Hub	10/17/13
HCR Warranty - BOS batch interfaces	10/17/13
HCR Warranty - Fix ACNV Blank User ID (Security Issue)	10/17/13
SNAPET Work Registrants	10/17/13
SNAPET Work Registrants as of October 1, 2013	10/17/13
Warranty Work Item for Health Care Reform - BPM Server	10/17/13
Warranty Work Item for Health Care Reform (ACNV - includes DDL Change)	10/17/13
Warranty Work Item for Health Care Reform - AMPS Process Server	10/17/13

Title	Closed Date
EAP_EVALMemberHouseholdDetails report failing on age categories.	10/21/13
Implement Eligibility Engine for Health Care Reform (Project Master)	10/21/13
Update Medical Notices Text in Accordance With Health Care Reform (HCR) Requirements	10/21/13
DCFS Children By Aid Code	10/22/13
HCR Warranty NOMADS	10/24/13
Temporarily Suspend HCR Spanish Notices	10/24/13
Warranty Work Item for Health Care Reform - ACM15A - Main Frame	10/24/13
HCR Warranty - AMPS - Process Server	10/31/13
HCR Warranty - AMPS Portal	10/31/13
HCR Warranty - BPM	10/31/13
HCR Warranty - BRE	10/31/13
HCR Warranty - DDL change on Access NV	10/31/13
HCR Warranty - NOMADS	10/31/13
HCR Warranty-ACNV	10/31/13
Warranty Work Item for WI 1707 (TracFone)	10/31/13
HCR Warranty - BPM	11/05/13
HCR Warranty - BRE (Eligibility Engine)	11/05/13
HCR Warranty AMPS - Portal	11/05/13
HCR Warranty AMPS - Process Server	11/05/13
Lewis Complex SNAP Only Zip Code Breakdown	11/05/13
Match Against Prisoner Records	11/13/13
Match Against Vital Statistics Death Records	11/13/13
FFY 13 UEC Benefit total paid to Households with Child(ren) <18 years old	11/14/13
Fix AMPS Portal Components	11/14/13
HCR AMPS Portal 11-07-2013	11/14/13
HCR Warranty Acnv -10-31	11/14/13
HCR Warranty AMPS Process Server -10-31 Melissa Sano.	11/14/13
HCR Warranty BPM -10-31	11/14/13
HCR Warranty BRE -10-31	11/14/13
HCR Warranty NOMADS -10-31	11/14/13
Create SNAP Recertification Report	11/15/13
Federal Child Care Sample & Universe crystal reports are duplicating records with multiple applicant addresses.	11/15/13
WPS report Wps_WPSFSSReviewResults.rpt comments section too narrow.	11/15/13
NCCS Reapplication Notice	11/19/13
SCaDU Daily Recon	11/19/13
Warranty Issues for OASIS (293 Part 4)	11/19/13
Provide TracFone with the Ability to Check to See if a Client is Eligible for One of Our Programs	11/22/13
Caseload Report (Date Issued)	11/25/13

Title	Closed Date
MMIS Pend Process and Eligibility Code Assignment (Revisited)	11/25/13
HCR - BRE - Not Correctly Counting RSDI Income	11/27/13
HCR - AMPS Process Server -11-14	12/02/13
HCR-AMPS Portal - 11-14	12/02/13
HCR-BPM -11-14	12/02/13
HCR-BRE -11-14	12/02/13
HCR-Nomads - 11-14	12/02/13
Problem with date processing on the E-3 transaction	12/03/13
HCR Warranty BPM	12/04/13
HCR Warranty - AMPS Portal - Null pointer on case processing port let	12/05/13
insight policy research	12/05/13
Reports for Auditors	12/05/13
SNAPET Work Registrants	12/09/13
Mass Change for 01/2014	12/11/13
HCR - AMPS Process Server - Deployment issue with HCRBatchSchedulerEAR	12/16/13
Match against Inmate Records	12/16/13
Match Against Vital Statistics Death Records	12/16/13
FFY13 EAP Assisted Households	12/17/13
FFY13 EAP LIHEA Funds	12/17/13
Implement HCR-EE - BOS Batch Interfaces	12/17/13
Implement HCR-EE- NAM / NETWORK	12/17/13
TANF EBT Restrictions Mailing List	12/18/13
Create Edit for EFT Batch File Processing	12/23/13
Create Spanish Notices in NOMADS for TANF, SNAP & Medicaid	12/23/13
HCR - Added two name fields to the BOS CHIP file	12/23/13
HCR - Management Reports -11-14	12/23/13
HCR: NOMADS: Table to store CHIP premium interface changes.	12/23/13
HCR Warranty - NOMADS 12-5-2013	12/23/13
HCR Warranty - AMPS Portal 12-15-2013	12/23/13
HCR Warranty - BPM/BRE (Eligibility Engine) 12-5-2013	12/23/13
HCR Warranty - BPM/BRE (HIX) 12-5-2013	12/23/13
HCR Warranty Amps Process Server 12-4-2013	12/23/13
HCR-ACNV Batch - 11-14	12/23/13
Implement HCR Change Request 16 - Batch File for CHIP Premium Processing for BOS	12/23/13
Implement HCR Change Request 26 - Allow Primary Tax Filer/ Joint Tax Filer Entry on MBRO Screen	12/23/13
QC Labels Not Displaying Correct FFY	12/23/13
Revise Access Nevada Application to Meet New Federal Requirements for Medicaid	12/23/13
Warranty for 1755 - Change Cleared Check File Input	12/23/13
Warranty Work Item for Health Care Reform - PRISM	12/23/13

Title	Closed Date
WPS report Wps_WPSFSSReviewResults.rpt Problem Statement not displaying last record.	12/23/13
Administrative Fees	01/03/14
SNAPET Work Registrants	01/09/14
HCR - Fix ACNV To Upload End User Verifications	01/10/14
TANF NEON and Spanish Cases by Zip	01/10/14
FAME_All Other AidCodes_CountyCasePersonCountReport	01/13/14
HCR - BPM/BRE (Eligibility Engine) 12-20-2013	01/13/14
HCR - Management Report	01/13/14
HCR - NOMADS 12-20-2013	01/13/14
Inmate Match	01/14/14
Match Against Vital Statistics Death Records	01/14/14
Caseload Report (Date Issued)	01/15/14
MAGI Conversion – AM Cases	01/17/14
AMPS Process Server	01/28/14
Caseload Report (Date Issued)	01/28/14
IQC case reviews report.	01/28/14
1921	01/29/14
Create New District Office in Las Vegas - Spring Mountain Crystal Reports	01/29/14
Create New District Office in Las Vegas – Spring Mountain Mainframe	01/29/14
Create New District Office in Las Vegas - Spring Mountain AMPS	01/30/14
Create Client Tracker for Business Re-Engineering Project	01/31/14
Revise User Access to ACCESS Nevada to Coordinate With HCR	02/03/14
Alter NCU Notices and Correct Spanish Hearing Notice	02/05/14
AIF52A, DCFS Tanf Kinship Interface file	02/10/14
EAP_CaseWorkerStatistical report performance and cosmetic issues.	02/10/14
HCR - Access Nevada 12-20-2013	02/10/14
HCR - AMPS Portal 12-20-2013	02/10/14
HCR - AMPS Process Server 12-20-2013	02/10/14
HCR - BPM/BRE (HIX)	02/10/14
HCR -ACCESS NV: Changes to Medical Insurance Table in ACCESS NV	02/10/14
OASIS - Reduce the number of tasks in the task list.	02/10/14
Warranty for 281 - Fix Problems With AIN64A	02/10/14
Flamingo D.O. SNAP Only Zip Code Breakdown	02/11/14
SNAP Recertification's Auto-Closed Without Being Processed (To Reoccur Monthly for LC Caseload)	02/11/14
HCR Warranty - BOS Client Application Date must be used instead of Application Received Date	02/12/14
HCR Warranty Issues - NOMADS	02/18/14
HCR Warranty - BPM/BRE	02/19/14
Caseload Report (Date Issued)	02/20/14
Inmate Match	02/20/14

Title	Closed Date
Belrose Active Cases for Caseload AZZ99	02/21/14
Match Against Vital Statistics Death Records	02/24/14
HCR Warranty - Crystal Reports - 2-11-2014	02/26/14
HCR-EE - Warranty fix for AME44A (County Case/Person Count Report)	02/26/14
Create New District Office in Las Vegas - Administrative Office (Chandler Avenue PDS	02/27/14
Create New District Office in Las Vegas - Administrative Office (Chandler Avenue) Mainframe	03/04/14
Flamingo Cases for Caseload AZZ99	03/05/14
Create New District Office in Las Vegas - Craig Road Mainframe	03/06/14
Inmate Match	03/06/14
IQC case reviews report	03/06/14
Match Against Vital Statistics Death Records	03/06/14
Intake programs by Zip Code	03/07/14
Activate Notices That Were Part of the TANF Obsolete Project	03/08/14
Assist SSA to Implement New SOLQ Process	03/08/14
HCR - DDL for the new table for the Case delete batch in AMPS	03/08/14
HCR - HCR Warranty Issues – NOMADS 2-18-2014	03/08/14
HCR Warranty - BPM/BRE - 2-18-2014	03/08/14
HCR Warranty - HIX - 2-18-2014	03/08/14
HCR Warranty - PENDING CASES STATEWIDE LEVEL REPORT – AME13A	03/08/14
HCR Warranty - STAT Background Messages	03/08/14
HCR Warranty AMPS Process Server - 2-10-2014	03/08/14
HCR Warranty BPM/BRE (Eligibility Engine) - 2-10-2014	03/08/14
HCR Warranty BPM/BRE (HIX) - 2-10-2014	03/08/14
HCR Warranty for AMPS Portal 2-10-2014	03/08/14
HCR Warranty NOMADS 2-10-2014	03/08/14
Implement Theme Changes to AMPS BAPs	03/08/14
Create New District Office in Las Vegas - Administrative Office (Chandler Avenue) OASIS	03/10/14
Include Non-Nevada Residents in HCR-EE for Calculation of the APTC	03/10/14
Promote SQL for Administrative Office (Chandler Avenue) Office WPS	03/10/14
Promote SQL for Craig Road Office WPS	03/10/14
Update ACCESS Nevada For TANF Restricted Usage	03/10/14
SNAP Applications Approved in the Nellis District Office in February 2014	03/11/14
SNAP Applications Denied in the Nellis DO between February 1, 2014 and February 28, 2014.	03/11/14
SNAP Cases Terminated in the Nellis DO between February 1, 2014 and February 28, 2014.	03/11/14
HCR Warranty - APTC FPL - (BPM/BRE HIX)	03/13/14
HCR Warranty - APTC FPI-NOMADS	03/13/14

Title	Closed Date
Active Cases by Zip Code for Craig DO	03/17/14
Caseload Report (Date Issued)	03/18/14
IQC case reviews report	03/24/14
SNAPET Work Registrants	03/24/14
Notice ID 25900 & 25901 HIX referrals	03/27/14
SNAPET Work Registrants	03/27/14
TANF/NEON Participants Pending SSI	03/28/14
Inmate Match	04/03/14
SNAP Cases Terminated in the Nellis DO between February 1, 2014 and February 28, 2014.	04/03/14
ADHOC NEEDED FOR FEDERAL ACF-4125 REPORT DONE IN COMBINATION WITH DCFS	04/04/14
Match Against Vital Statistics Death Records	04/04/14
Caseload Report (Date Issued)	04/07/14
HCR Warranty - BPM BRE (HIX) "isApplicant" Flag	04/08/14
SNAPET Work Registrants	04/09/14
Convert the Social Worker Expenditure Report - BADA from Brio to Crystal	04/11/14
Convert the Social Worker Expenditure Report - Domestic Violence from Brio to Crystal	04/11/14
Food Stamp Participant Nutrition Education Mailing.	04/11/14
Repair FAME Denials Report	04/11/14
Repair FAME Termination Report	04/11/14
Warranty Cosmetic Fixes for NEON Participant Expenditures Report (WI 1492)	04/11/14
AME44A DO CHAP & TANF MED	04/14/14
Benefit Issuance Expungments	04/14/14
Change FACT Alert Display	04/14/14
Change RFI Timeframes in EAP System to Calendar Days	04/14/14
Correct Spanish disclaimer from printing in nightly batch	04/14/14
Create New District Office in Las Vegas - Craig Road AMPS	04/14/14
Create New District Office in Las Vegas - Craig Road PDS	04/14/14
HCR - Warranty NOMADS - 3-17-2014	04/14/14
HCR- Mainframe Table for Crystal Reports	04/14/14
HCR Warranty - AMPS Portal 3-17-2014	04/14/14
HCR Warranty - AMPS Process server - 3-17-2014	04/14/14
HCR Warranty - BPM/BRE (Eligibility Engine) - 3-17-2014	04/14/14
HCR Warranty - BPM/BRE (HIX) 3-17-2014	04/14/14
HCR Warranty-Correct the User ID in HATS Shelter Macro	04/14/14
WNM01M38 - AME46A batch failure 2/28/2014	04/14/14
Lewis Complex Cases for Caseload 5ZZ98	04/15/14
HCR Warranty - HCRBatchSchedulerEAR.ear	04/16/14

Title	Closed Date
Reschedule DHHS FAME Extract - Person_Stats_Monthly to the 26th of every month	04/25/14
2011- 2012 Debts with a Balance	04/30/14
Active Cases by Zip Code for Elko DO	05/05/14
Archive FAME & IV-D Data	05/07/14
Caseload Report (Date Issued)	05/07/14
DWSS IS Hardware, Software, Lease and Contracts Management	05/07/14
SNAPET Work Registrants	05/08/14
ACNV Apps Should Only Create AMPS Tasks For Only One Correct Case	05/10/14
Inmate Match	05/12/14
Match Against Vital Statistics Death Records	05/12/14
Owens D.O. Cases for Caseload AZZ99	05/15/14
FAME Demographic Adult Education Report By Statewide(AMN37A)	05/19/14
FAME DEMOGRAPHIC RECIPIENT REPORT AMN26A	05/19/14
FAME DEMOGRAPHIC RECIPIENT REPORT BY COUNTY AMN28A	05/19/14
Add IRIS to Lewis Complex	05/19/14
AIF52A DCFS KINSHIP	05/19/14
AME13A Daily Pending Report	05/19/14
Budget and Statistic Defect from WI 2191	05/19/14
Budget and Statistic defectFAME MAABD Demographic Months Participating Report By District Office(AMN45A)	05/19/14
Convert the Social Worker Expenditure Report - Mental Health from Brio to Crystal	05/19/14
Create BOS PDF Registration Cheat Sheet	05/19/14
Create Death Match Report - Crystal	05/19/14
Create Death Match Report - NOMADS	05/19/14
Create New District Office in Las Vegas - Craig Road IRIS	05/19/14
Create New District Office in Las Vegas - Craig Road OASIS	05/19/14
Create New District Office in Las Vegas - Spring Mtn IRIS	05/19/14
Create New District Office in Sparks - IRIS	05/19/14
DemographicAdult EducationReportByCounty AMN36A	05/19/14
FAME Demographic Adult Education Report By District Office(AMN35A)	05/19/14
FAME Demographic Months Participating Report By County And Recipient(AMN43A)	05/19/14
FAME Demographic Recipient Report By County (AMN32A)	05/19/14
FAME Demographic Recipient Report By District Office(AMN31A)	05/19/14
FAME Demographic Recipient Report By Statewide (AMN33A)	05/19/14
FAME DEMOGRAPHIC RECIPIENTS REPORT BY STATEWIDE AMN29A	05/19/14
FAME MAABD Demographic Adult Education Report By County(AMN39A)	05/19/14
FAME MAABD Demographic Adult Education Report By District Office(AMN38A)	05/19/14
FAME MAABD Demographic Adult Education Report By Statewide(AMN40A)	05/19/14

Title	Closed Date
FAME MAABD Demographic Months Participating Report By County(AMN46A)	05/19/14
FAME MAABD Demographic Months Participating Report By Statewide(AMN47A)	05/19/14
HCR Warranty - NOMADS (April 2014)	05/19/14
Implement Changes to NCCS for the ACF 801 Report	05/19/14
Intake Application Count	05/19/14
IQC case reviews report.	05/19/14
RAD 7.5 Upgrade - OASIS	05/19/14
Add code table for Sparks office	05/21/14
BPM/BRE HIX (April 2014)	05/21/14
Create a Hyperlink for new Cheater PDF	05/21/14
HCR Warranty - AMPS Portal (April 2014)	05/21/14
HCR Warranty - AMPS Process Server (April 2014)	05/21/14
HCR Warranty - BPM/BRE Eligibility Engine (April 2014)	05/21/14
Rebuild & Recompile CDS Scanning for Windows 7	05/21/14
REPORT TITLE: Overdue SNAP Cases as of May 21, 2014	05/21/14
REPORT TITLE: Administrative Fees Charged to TOP Debts	05/22/14
Active Waiver cases by office	05/27/14
REPORT TITLE: IQC case reviews report	05/27/14
PERM CheckUp Supplemental Cases	06/02/14
Cycler abending in Production (Bug 8479)	06/04/14
Address DB2 9.x issue with DECIMAL conversion	06/06/14
Caseload Report (Date Issued)	06/09/14
Inmate Match	06/09/14
Title: SNAPET Work Registrants	06/10/14
Convert OASIS Caseload Reminder Reports from Brio to Crystal	06/16/14
Convert OASIS Supervisor Caseload Reminder Report from Brio to Crystal	06/16/14
Convert the OASIS OfficeParticipation Report from Brio to Crystal	06/16/14
Convert the Participation Indicator Report from Brio to Crystal	06/16/14
Create New District Office in Las Vegas - Administrative Office (Chandler Avenue) IRIS	06/16/14
Demographic Months Participating Report by District Office and Recipient AMN42A	06/16/14
NCCS - Update Job Search Weeks Parameter	06/16/14
NCCS Update NCCS Group Set and Activity Parameters	06/16/14
Oasis_NeonParticipantsAndExpenditures.rpt correction for Direct payments.	06/16/14
Use OASIS Left Household Date in Determining Household	06/16/14
Match Against Vital Statistics Death Records	06/17/14
Pending MAABD with Open Foodstamps	06/17/14
Termination and Denial Reports for TANF Cash, TANF MED, CHAP, MAABD and SNAP	06/23/14

Title	Closed Date
Active Cases by Zip Code for Craig DO	06/25/14
FAME VRU Sending Duplicate Medical SSNs	06/27/14

WORK ITEMS IN REQUIREMENTS

Work Item #	Title
1200	SSA Interface for All EAP Social Security Numbers
1358	AMPS Phase 2 - Enhancements
1424	Use UPIs Instead of SSNs on all OASIS Forms and Update all OASIS Forms to the Current Version
1428	Retrieval of CDS Archived Records
1567	Provide Medicaid Data to MHDS
1632	Upgrade IRIS to FileNet 5.1
1659	Provide Workforce Connections, Inc. with Access to SNAP and TANF Eligibility Data
1705	Modify EAP Demographic Address Screen
1737	Return File From AIN49A for DCFS
1798	Provide Access to IPV Disqualification Database at Application/Redetermination
1811	Convert Hearings Database and Add ACA Elements
1930	SNAPET Work Registrants
2018	Provide HCR Performance Indicators to CMS
2139	Construct Sampling Frame for Medicaid & CHIP Eligibility Review Pilot
2155	Produce the Correct Duplicate Assistance Notice Text for the Appropriate Situation - NOMADS
2216	Add NEON to DIS
2217	Create Interface Between Barcode Readers and the Inventory Database
2221	Include Equifax Workforce Solutions (EWS) from the Federal Hub as Income in the Determination of Eligibility
2225	AMPS Conflict Resolution
2243	Implement DataCap Enhancements - Phase II
2267	Produce the Correct Duplicate Assistance Notice Text for the Appropriate Situation - AMPS
2277	Disable NOMADS Print Functions For the Notice of Decision (NOD)
2315	Verify Lawful Presence (Nomads)
2322	Verify Lawful Presence (Server)
2329	Prevent Issuance of TANF Benefits for Ineligible Months
2330	Update Notices Associated with NEON Non-Compliance (NOMADS)
2331	Update Notices Associated with NEON Non-Compliance (OASIS)
2352	Implement New Redetermination Form
2353	Implement New Case Registration VRU Notice
2354	Implement New Notice of Decision (NOD)

Work Item #	Title
2363	Correspondence Management Solution - Custom Web Application utilizing Thunderhead
2384	Expand Individual Level Data to Include Income and Other Variables
2385	Make Fields Mandatory in IRIS
2386	Debt Program Classification for Restitution and Misc Fee Payments
2387	2387 - Reporting CHIP Substitution
2389	Generate RD Completion Notice for FMC & MAABD Cases
2392	Household Designation for NODs
2397	Disable Print Functionality on VSUM (NOMADS Component)
2398	Disable Print Functionality on VSUM (AMPS Component)
2401	Disable Print Functionality on JINC Screen
2402	Disable Print Functionality on RENT Screen
2403	Disable Print Functionality on BANK Screen
2404	Disable Print Functionality on UNIN Screen
2408	Automate VRU PIN Notification
2412	Transition to the SSBM
2415	Security Management for SSBM
2446	Access NV - Add New Single Streamlined Application for SSBM
2447	Access NV - Portal Screen Modifications for SSBM
2449	Eligible Childless Adult (CA) cases with member over age 65 or had Medicare
2452	Death Match File - Format Changes
2462	SSBM - Call Center Expansion
2466	Modify IQC Case Reviews Report
2467	Access Nevada - Migrate the Static Access NV Verification Forms to the Thunderhead Forms Server

WORK ITEMS IN DESIGN

Work Item #	Title
1195	Warranty Work Item - EAP Universe - Corrections & Enhancements
2103	Complete Design Implementation for Web Services

WORK ITEMS IN DEVELOPMENT

Work Item #	Title
921	EAP Report Retention Period
932	RAD7.5 Upgrade - JRules 6.7
933	RAD 7.5 Upgrade - PRISM
934	RAD 7.5 Upgrade - WPS
936	RAD 7.5 Upgrade - IRIS
937	RAD 7.5 Upgrade - CDMS
938	RAD 7.5 Upgrade - CDS
939	RAD 7.5 Upgrade - CSE

Work Item #	Title
940	RAD 7.5 Upgrade - ANSWRS
941	RAD 7.5 Upgrade - Security
942	RAD 7.5 Upgrade - PDS
943	RAD 7.5 Upgrade - HelpDesk
944	RAD 7.5 Upgrade - QUICK
945	RAD 7.5 Upgrade - Portal (DWSS)
946	RAD 7.5 Upgrade - FTS
961	EAP - System Pays Wrong Benefit Amount When Income Includes FAC Countable Income
1299	Migrate DWSS Web Site from Joomla! to a Standard Web Site
1433	AMPS Phase 2 - Redeterminations
1480	PDS Role Maintenance Page Abends When User Enters a New Role
1512	Analyze and Repair IRIS Reports
1613	Update EAP Notice and Form Text
1640	Warranty for Work Item 1420 - Incorrect Year Calculation
1671	Monthly AccessNV Applications by Office
1709	Create Crystal Report for Voter Registration
1846	Remove Obsolete SNAP Notices From NOMADS
1872	Analyze and Repair IRIS Report - IPV Cost Avoidance Recap
1873	Analyze and Repair IRIS Report - Referrals Received Details
1874	Analyze and Repair IRIS Report - IR Referrals Received Recap
1878	Implement HCR-EE - Deloitte
1917	Analyze and Repair IRIS Report - IR FORM 366B
1985	EE Trigger tables firing for carry forward and non-medical programs
2031	JINC screen is not holding the RECUR Indicator
2044	Implement DataCap to Replace Capture Pro
2056	Count of all applications submitted through ACCESS Nevada
2083	Implement Correspondence Management Solution - Phase 1
2116	HCR Warranty - BOS Batch 12-15-2013
2159	Create Barcode Component for Correspondence Management Solution
2224	Presumptive Eligibility
2284	Nevada State Welfare Division Zip Code Count
2334	NCCS Warranty 2206-8246
2335	NCCS Warranty 2206-8247
2337	NCCS Warranty 2206-8240
2343	Create Inmate Match Report - Crystal
2349	Ad Hoc Conversion - Count of All Applications Submitted Through ACCESS Nevada
2351	Title: OASIS – Incorrectly calculating SNAPET sanction end date
2355	Implement New 2120-EG, 2174-EG, 2179-EG, 2214-EM, 2248-EG Forms

Work Item #	Title
2356	Implement New 2254-EH, 2261-EM, 2329-EE, 2339-EH, 2429-EE Forms
2357	Implement New 2551-EE, 2486-EE, 2488-EG, 2506-EG, 2511-EE Forms
2358	Implement New 2522-EE, 2110-EM, 2547-EE, 2584-EG, 2601-B, 2614-EE Forms
2359	Implement New 2615-EE, 2648-EE, 2793-EM, 2794-EM, 2796-EM Forms
2360	Implement New 2849-EM, 2906-EG, NMO-5000, 2006-EG, 2011-EG Forms
2361	Implement New 2011A-EG, 2015-EG, 2016-EG, 2020-EF, 2022-EM, 2028-EE Forms
2362	Implement 2029-EE, 2038-EE, 2059-EM, 2069-EM, 2074-EG, 2074A-EG/B Forms
2376	Warranty for WI 2305 - Generation OF BOS PDF
2379	Active Waiver Cases by Office - Ad Hoc Conversion
2411	WIC Participants receiving SNAP
2422	Create FMC/MCB/AO Notice Programs
2423	Create MAABD Notice Programs
2424	Create SNAP Notice Programs
2425	Create TANF Notice Programs
2426	Revise NOTE Screen
2438	Active Cases by Zip Code for DO
2444	Create a Correspondence Management Screen in AMPS
2451	Correct SCaDU Telephone Payment Error Types
2458	Priority Ad Hoc - Number of Employed Medicaid Recipients
2459	IQC case reviews report.
2461	Warranty for FAME MAABD Demographic Adult Education Report By District Office (AMN38A)

WORK ITEMS IN TEST

Work Item #	Title
929	RAD 7.5 Upgrade - NCCS
935	RAD 7.5 Upgrade - ME
1493	Convert the OASIS AvrHoursEmployed Report from Brio to Crystal
1735	Delete Overdue Alerts
1781	Activate Prisoner Verification on SSAR
1989	Warranty Work Item for Health Care Reform MainFrame (Patch 6)
2020	HCR Warranty ACNV - BOS App
2043	Create Inmate Match Report - NOMADS
2080	Implement HCR CR 9 & 10 - Auto Redeterminations and AMPS Inbox - AMPS
2087	Implement HCR CR 9 & 10 - Auto Redeterminations and AMPS Inbox - NOMADS
2147	NCCS - Adjust connections for Reimbursement Summary Report

Work Item #	Title
2304	Conduct PERC CMS Testing for PRE
2325	Warranty Work Item for 2231 - Fix Exception Error in Create_IVD_Case_Child
2333	Alter English notice text for notice ID 40021 (Warranty for WI 1674)
2365	EAP_ManagementMonitoringSummary.rpt using obsolete DB2 function.
2380	Implement HCR CR 9 & 10 - Auto Redeterminations and AMPS Inbox - JAVA Forms Generation Code
2430	OASIS Incorrectly Populating OASIS Family Screen, NEON CALENDER, and Immunizations/School Attendance Page.
2439	HCR Warranty BPM-BRE (EE) 6-27-2014
2440	HCR Warranty BPM-BRE (HIX) 6-27-2014

Child Support Enforcement

WORK ITEMS COMPLETED

Work Item #	Title	Closed Date
1734	Create Child Support Lien Network (CSLN) Interface	07/15/13
1776	Warranty Work Item for 1484 - Correct Distribution of Credit Balances	07/15/13
1231	Distribute UIB Collections in Accordance With Allocation Rules	09/23/13
1806	Warranty for 1484 - Correct Distribution of Credit Balances	09/23/13
1999	Fix Overallocation and Payment Suspension UDC Problems	10/23/13
2034	Allow Multiple OJRDS Linked to Same Docket in DFM34A	11/13/13
1948	Develop Workflow For New Compass Document Type BWRCS\$	11/20/13
2090	Change SCaDU UIB File Layout	12/02/13
2058	Prevent the Generation of IWO & EV Forms on Closed Cases	12/23/13
1797	Remove Hard-Coded Security Roles Within AddressSearch.jsp	12/23/13
1927	Warranty for 1484 - Populate Distribution Case Type in FAT	12/23/13
2091	Fix SCaDU Daily Reconciliation - UDC Reason Code	12/24/13
2086	Fix IRS Batch Job in Closed Status	01/13/14
1896	Referrals Web Page Fix	01/13/14
1614	Streamline IV-D Application Entry Process (Server Component)	01/13/14
1843	Print IV-D Checks at Controller's Office	02/03/14
1943	Change Dockets With a Jurisdiction Type 'T' to 'L'.	02/10/14
2161	Fix CPR25A Logic Error	02/10/14
2154	Warranty Work Item For 1614 - Multiple Issues	02/10/14
1782	Reports Produced From DLRT in NOMADS Stopped Working	03/08/14
2176	Warranty Work Item For 1614 - Contact Entry and Zip Code Issues	03/10/14
2238	Fix Merge Job Alternate SSN Issue	04/14/14

Work Item #	Title	Closed Date
2263	Merge Job Failing Issue	04/14/14
2231	Warranty Work Item for 1614 - Fix Exception Error in Create_IVD_Case_Child	04/14/14
2094	Implement CSLN Enhancements	05/19/14
2271	Provide for Telephone Payment to SCaDU - Server	05/19/14
2218	Provide for Telephone Payments to SCaDU - Mainframe	05/19/14
2278	Warranty for 281 - Child Welfare/Child Support Enforcement Interface: NCP1 Data Exchange (Server)	05/21/14
1607	Duplicate UIB Records Being Created by CIN05A	06/02/14
1933	Update the OCSE National Medical Support Notice (NMSN) Form GN0155	06/16/14
2409	Add multiple 'Document Type's to Scanning/indexing process	06/23/14

WORK ITEMS IN REQUIREMENTS

Work Item #	Title
2342	Warranty for 1484 - Fix Credit Balance Issues

WORK ITEMS IN DESIGN

Work Item #	Title
1612	Resolve CDS Counter Receipt / Business Date Conflicts
1931	Change Functional Area Assignments

WORK ITEMS IN DEVELOPMENT

Work Item #	Title
1474	CSENet Transactions are Being Sent Out Using the Old Case ID Format
1648	Fix IV-D Caseload Assignment Problems
1660	Correct Initiating Intergovernmental Office Assignment
2327	Create Cash Payment Type for OTC Vendor Payments (NOMADS)
2460	Scanning and indexing reports issue

WORK ITEMS IN TEST

Work Item #	Title
1938	Fix IV-D Addresses Tracking History Problem - Nomads
2328	Create Cash Payment Type for OTC Vendor Payments (Server)

INVESTIGATIONS AND RECOVERY



OFFICE OF INVESTIGATIONS AND RECOVERY

OVERVIEW

The Office of Investigations and Recovery (I&R) actively detects, investigates, and prosecutes welfare program fraud in Nevada and has been doing so for over 30 years. Through its efforts, taxpayers have saved millions of dollars through cost avoidance and through the recovery of funds from individuals or entities who abused assistance programs designed to aid the truly needy.

Any commission of program fraud or abuse is considered a violation of one or more provisions of the following— the *United States Code* (U.S.C.), the *Code of Federal Regulations* (C.F.R.), the *Revised Statutes of Nevada* (N.R.S.), and the written policies of Nevada State Division of Welfare and Supportive Services (DWSS). I&R derives its investigative and recovery authority through these laws, regulations, and policies.

The Office of Investigations and Recovery is organized into three cooperative working groups, Central Office, the Northern Investigative Field Operations office in Carson City and the Southern Investigative Field Operations office in Las Vegas. All three working groups report to the Chief Investigator based in Central Office, Carson City.

The Central Office group is responsible for the unit's administrative functions and the two Field Operations offices have various investigative, audit, recovery of debt and program integrity activities for all public assistance programs. I&R staff also conduct investigations to assist in parent locates and the establishment of paternity.

Nevada issues SNAP and TANF benefits via the Electronic Benefits Transfer (EBT) program, which is administered by Central Office I&R. EBT employs debit card-like technology and has proven to be an extremely cost-effective and efficient means of issuing benefits. It has also greatly facilitated the detection, documentation, and prosecution of SNAP program abuse.

I. I&R OPERATIONAL FUNCTIONS:

- A. Administrative--Central Office: The Office of Investigations and Recovery is directed by a Chief Investigator who reports directly to the Deputy Administrator of Program and Field Operations/Support Services for the Division of Welfare and Supportive Services.

The Chief Investigator administers and is responsible for the Division's criminal prosecution and disqualification programs, criminal justice background checks (NCJIS), all compliance and program integrity investigations, coordination of law enforcement actions for trafficking, PARIS Operations, data matching, internal compliance and performance audits, claims administration, Nevada's Treasury Offset Program (TOP) and debt management for recovery of both state and federal program debt and subsequent hardship request. In addition, the Chief oversees the Division's EBT operations and the electronic disbursement of Child Support Program electronic funds transfer (EFT). The Chief Investigator also performs the more sensitive, confidential investigations and audits at the behest of the Administrator or Director.

Additional areas for which the Chief and the Chief's staff are responsible include: hearings requests made by clients wishing to appeal a decision made by the

Agency based on investigative activity, internal audits; pre-eligibility investigations; on-going recipient investigations; vendor and provider investigations, and resolution of reports of lost, stolen, and forged checks or non-receipt of benefits; claims and overpayment calculations; debt recovery, program disqualifications; civil court actions and criminal prosecutions and trafficking investigations.

- B. Investigation Activities: Investigators are mobilized to ensure families eligible for assistance are able to receive assistance and to ensure those who are not eligible for benefits are denied access to these funds. Our investigations can result in consistent savings to the state when fraud is discovered and violators are removed from the programs. This ultimately reduces the amount of time case managers spend with ineligible applicants and allows them to dedicate services to the truly needy.

Nevada implements three types of investigations: Enforcement, Compliance, and Program Integrity.

The objective in all three types is to identify and reduce fraud and abuse in public assistance programs through the investigation of suspected violations, assessment of the allegations' validity and where found to be valid, determination of violator intent and program consequence. Some investigations result in clearly determined overpayments due to program violations and are required to be repaid within a pre-determined time period. Serious incidents of program violations carry a penalty of program disqualification beginning with a 12-month sanction to a lifetime disqualification from a program(s).

Nevada also prosecutes program violations and fraud as a felony in a court of law. Investigators identify and document potential cost savings to the state due to investigative actions when program violations are confirmed and the applicant's case is either closed or benefits reduced.

- C. Claims Administration: Claims Administration specialists conduct focused audits of individual recipient benefit histories. Based on these reviews, benefit eligibility may be re-determined for the purpose of establishing overpaid benefit dollars (a claim or overpayment) that we will subsequently attempt to recover. Investigative Claims Specialists accept claim referrals for benefit redetermination from the division's Quality Control staff, case managers, and investigators.

Reports of corrected benefit eligibility are forwarded with supporting evidence back to the investigator to assess for program violation and subsequent disqualification from program participation or criminal prosecution. All established debt is also forwarded to the Debt Management specialists for recovery actions.

- D. Debt Management: Debt Management specialists perform recovery actions on behalf of the public assistance programs administered by the Division. The objectives of the team are:
1. Pursue the collection of all debt owed DWSS through the reduction of benefits, voluntary repayment, court-ordered collections, referral to collection agency or U.S. Treasury Offsets;

2. Recover monthly reimbursement of Medicaid costs from parents who meet financial criteria established by policy and regulation as a parental obligation;
 3. Represent the agency and present charges of a recipient's intentional program violation associated to a claim or debt for consideration by a Small Claims Court. Ensure that the final decision of the courts is properly recorded and imposed against the debtor to ensure appropriate recovery.
 4. Recovery Enforcement actions:
 - Benefit Reduction: Households owing a debt to the DWSS may have benefits automatically withheld, when applicable, to repay certain program overpayments.
 - Repayment Agreement: The individual owing a debt may negotiate a repayment agreement with DWSS. Such an agreement will normally allow the debtor to utilize an installment plan to repay overpaid benefits and/or parental financial obligations.
 - Forced Collection: Delinquent debtors are pursued through various means. The DWSS seeks intervention through the Controller's Office, the Attorney General, collection agencies and civil courts to enforce the repayment of overpaid program benefits and/or parental financial obligations. Delinquent debts may also be pursued through a collection agency or the U.S. Treasury Offset Program.
 - Hardship: Individuals may seek relief of the debt when repayment could result in hardship. The Administrator is empowered, through state law, to grant the hardship claim and waive the debt. The Administrator's decision is final and cannot be appealed.
- E. Electronic Benefits Transfer (EBT) Management: Central Office staff are responsible for EBT-related matters. Program Officers, with the support of other I&R staff assist Divisional Field personnel with EBT system issuance to assure that eligible clients have unimpeded access to their benefits.
- EBT-related activities include:
1. The administration and coordination of the stable distribution and access to SNAP and TANF program benefits via the Nevada Quest [EBT] card;
 2. Plan and coordinate a disaster response utilizing EBT technologies to assure a continued access to nutrition for Nevada's citizens in the event of a disaster or emergency.
 3. Act as a liaison and communication facilitator between the services contractor, DWSS Child Support and other staff to assure the smooth disbursement of child support payments on the branded Child Support Debit card.
- F. PARIS: The Public Assistance Reporting Information System is a data matching service set up by ACF, The Office of the Administration for Children & Families. I&R staff process PARIS match data from periodic data submissions as required by federal funding agencies through participation in the data matching program. A match can reveal individuals receiving benefits in jurisdictions other than

Nevada (duplicate benefits), a failure to accurately report income or employment, and Medicaid recipients who may be eligible to receive VA benefits.

- The *Federal Match* matches Nevada's benefit recipients to federal payroll records, which include all federal employees as well as active or retired military;
- The *VA Match* identifies individuals eligible for VA benefits, who may be receiving Medicaid benefits administered by Nevada, and,
- The *Interstate Match* identifies individuals receiving benefits in other states who match those receiving benefits from Nevada during the same timeframe.

Investigators analyze the match results for potential transition from Medicaid programs to federal or VA coverage, possible program violations, and to identify ineligible dual state benefit program participation.

- G. Centralized Administrative Hearings: All client appeals associated with an agency action that are the result of investigative findings are routed to Central Office I&R. Referrals and appeals of the agency's actions are reviewed, accepted, or rejected and processed on behalf of the Agency or the client. The Centralized Administrative Hearings staff are usually comprised of Family Service Specialists who are well-versed in policy, eligibility determination, claims administration and debt management, as well as the investigative process. This staff facilitates and coordinates the hearing process for the client and the Agency. They conduct additional investigation into referrals to validate investigative or agency actions and to ensure established policy was appropriately followed by the Agency for appeal processing.

The Hearing Coordinators also prepare criminal complaints for prosecution and prepare summaries justifying the sanction of a client who committed program violations. The Coordinator arranges meetings or pre-hearing conferences with the client and the client's authorized representative or attorney of record, if any, to discuss the charges against the client/appellant. Based on a pre-conference, the appellant or the Agency may withdraw from the formal hearing process or choose to go forward with the appeal. Hearing Coordinators present their cases to the Agency Hearing Officer for adjudication and present testimony on behalf of the Agency. The Coordinator also arranges or facilitates attendance by other witnesses and attorneys and the Agency Deputy Attorney General. Once the adjudication or judgment of conviction is received from the hearings office or the courts, the Coordinators ensure sanctions are imposed, debts are released for recovery, and FNS is notified of all SNAP-related sanctions and prosecutions.

II. STAFFING

I&R Investigative Field Offices are established in Las Vegas and in Carson City to support the Division's activities in all parts of the state. The Las Vegas field office is responsible for support of the Division's activities in Clark, Lincoln, Nye, and Esmeralda Counties. Similarly, the Carson City field office is responsible for the support of the Division's activities in the balance of the state, which includes the Division's offices in Reno, Carson City, Elko, Ely, Fallon, Yerington and Hawthorne.

III. AUTHORITY

Recipient fraud is a violation of both federal and state law. Federal, State and DWSS policy requires the investigation of fraudulent activity and the collection of overpaid public assistance benefits. If convicted of fraud by an administrative or criminal court, individuals may receive penalties that include any or all of the following:

- Administrative program disqualification;
- Criminal conviction with court-ordered program restitution;
- Criminal fines and/or penalties, confinement in county, state or federal prison.

IV. FRAUD**A. Definition of Fraud**

"Fraud" means an intentional action, inaction or statement made by an individual for the purposes of obtaining benefits to which he or she is not entitled. It includes any act that constitutes fraud under applicable federal or state law.

V. EXAMPLES OF RECIPIENT FRAUD

Examples of recipient fraud include, but are not limited to:

- A. Reporting false or misleading information upon submission of an application, or other required communication, which would allow individuals to receive benefits they were not otherwise entitled;
- B. Failing to report monies received from employment or other sources;
- C. Failing to report the presence of additional household members;
- D. Claiming benefits for household members that do not reside in their household;
- E. Failing to make full disclosure of assets and/or resources;
- F. Misrepresentation of identity and/or residence to receive or attempt to receive duplicate benefits.

VI. INVESTIGATIVE PROCESS**A. Cases Assigned**

Once assigned a case, the investigator initiates their investigation by using standard investigative techniques. The investigator analyzes all information, evidence and findings to formulate conclusions and determines the best action (without prejudice to the agency or client) to be taken according to the findings of the case as they apply to policy, state law and federal statutes.

B. Follow-up Actions**1. Administrative Penalties**

Individuals who have committed an intentional program violation may be disqualified from program participation for 12 months for a first violation, 24 months for a second violation and permanently for a third violation. An individual convicted of receiving duplicate benefits or misrepresenting his or her identity is disqualified for a period of 10 years. Cases of this type represented to an Administrative Hearing Officer. Unfavorable decisions may be appealed within 90 days to the appropriate district court.

2. Criteria for Fraud Prosecution Referrals

Many factors, including the following, are considered prior to making the decision to submit a case for prosecution:

- a. Intent of the individual can be either implied or specific. The accused must have willfully and knowingly failed to provide true and correct information;
- b. Overpayment amounts for all involved programs must total \$750.00 or more. Exception to this rule may be exercised when the intent is so specific there is no question about the individual's intentions or the individual has previously obtained monies from the agency utilizing fraudulent information or circumstances;

VII. NEVADA'S EBT INTEGRITY SECTION:

The mission of Nevada's EBT Integrity Section (NEIS) is to promote an alliance and coordination between DWSS, FNS and USDA's Office of the Inspector General (OIG) and local law enforcement in safeguarding the integrity of the SNAP program. NEIS is committed to enhancing the detection and prevention of fraud associated with illegal trafficking of benefits and to take appropriate civil and/or criminal action against those who commit violations against the SNAP program.

The NEIS team's goals include:

- Contact with state and local law enforcement agencies to provide additional SNAP program and EBT card awareness training;
- Development of aggressive techniques to identify trafficking patterns through analysis of available EBT transactional reports;
- Conduct investigations of suspicious retail/cardholder SNAP purchases;
- Coordinate additional investigations with FNS and OIG contacts;
- Monitor and track findings;
- When trafficking is confirmed, implement immediate corrective actions through both IPV processing and prosecution as appropriate.

VIII. STATISTICAL DATA (Statewide)

Referral Information: SFY 2013 SFY 2014

Referrals Received:	16,591	12,448
Investigations Completed:	7,461	8,813

Cost Avoidance:

From Investigative Actions:	\$ 7,840,779	\$ 13,239,312
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Intentional Program Violations:

Total Disqualified:	282	292
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Criminal Prosecutions:

Total Convictions:	12	16
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Recovery (Debt Collection):

SFY Totals:	\$1,182,806	\$1,227,162
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**PROGRAM REVIEW
AND
EVALUATION
(PRE)**



PROGRAM REVIEW AND EVALUATION (PRE)

Program Review and Evaluation consists of Quality Control, TANF Data Reporting (Disaggregated Data) and Hearings.

I. BACKGROUND

Nevada's Quality Control system was implemented in 1964 under federal mandate. Initially it monitored the Aid to Families with Dependent Children (AFDC) and adult programs. In 1975 it was expanded to include the Medicaid and SNAP programs. In 1997, with the implementation of the Temporary Assistance for Needy Families (TANF) Program, the AFDC program no longer existed and Quality Control reviews for AFDC ceased.

In 2001 the Welfare Division Quality Control program implemented a state review process for Child Care in addition to the existing QC review systems for SNAP and Medicaid.

The review of Work Participation Rate details was introduced in FFY06. Following the approved Work Verification Plan, this process reviews the captured work activity hours for TANF recipients which are reported to the Administration for Children and Families (ACF) and utilized in the determination of the Work Participation Rate (WPR) for Nevada.

In FFY07, two additional federally mandated reviews were introduced – Payment Error Reduction Measure (PERM) for Medicaid and SCHIP programs and a Child Care Program review.

II. PURPOSE

The Quality Control (QC) system is a management tool required by the Department of Health and Human Services for the Medicaid Program, the Department of Agriculture Food and Nutrition Service (FNS) for SNAP, and the Administration of Children and Families for the Child Care reviews. It began as an adaptation of a technique used widely in private industry for evaluating and improving the quality of products and services.

MEDICAID

The purpose of the Medicaid Quality Control (MEQC) system is to measure the rate of erroneous medical claim payments due to errors in recipient eligibility, to provide for corrective action and to improve state and local administration of the Medicaid eligibility system. Should Nevada, for each annual assessment period, have a payment error rate greater than 3%, it will be subject to a disallowance in federal financial participation. The federal medical assistance funds are multiplied by the percentage over 3%, which is the disallowance.

Federal rules allowed states to implement pilot projects for active MEQC reviews, which target identified error prone activities. Depending on the pilot project, establishment of payment error rates may not be required. With federal approval, Nevada implemented a pilot project in October 2002 that did not establish a payment error rate. The pilot project was approved through September 2004. Review findings were identified, reported on and corrective action was taken. Effective October 2004, the traditional MEQC reviews were reinstated.

PAYMENT ERROR RATE MEASURE (PERM)

The Centers for Medicare & Medicaid Services (CMS) implemented the Payment Error Rate Measurement (PERM) program to measure improper payments in the Medicaid program and the State Children's Health Insurance Program (SCHIP). PERM is designed to comply with the Improper Payments Information Act of 2002 (IPIA; Public Law 107-300). The Nevada QC staff conduct eligibility reviews for both the Medicaid and SCHIP program. These results are shared with the Nevada Division of Health Care Financing and Policy (DHCFP) who are responsible for the final reporting to CMS. This review was completed on a 3 year cycle rotation with through the reporting cycle being FFY14. This PERM reviews did not replace the requirement to conduct annual MEQC reviews.

Effective with FY14, PERM reviews changed in conjunction with the introduction of Health Care Reform. States are presently developing pilot initiatives which incubus the PERM and MEQC reporting requirements. It is anticipated that a national review model will be in place by FY16.

SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)

The SNAP Quality Control system is a management tool to measure the accuracy and validity of SNAP cases at a given time. Both active and negative (closed) cases are reviewed.

Reviews conducted on active cases determine whether households are eligible and receiving the correct allotments. For the purposes of this system, active errors in eligibility determinations encompass ineligibility of participating households as well as over or under issuance of total allotments.

Prior to FY12, negative case reviews determined whether the decision to deny, suspend or terminate the household was correct. Effective FY12, these reviews expanded the scope of the review to include compliance with Federal procedural requirements including the timeliness of the action and adherence to notice requirements. The reviews were also renamed Case and Procedural Error Rate (CAPER).

The Division of Welfare and Supportive Services is required to submit a sub-sample of completed state agency QC reviews for federal re-review. Results of all QC review findings are electronically transmitted to FNS on a monthly basis. The findings enable our division and the federal agency to determine the nature and extent of problems in the program areas reviewed, keep currently informed about changes in levels of errors, evaluate the effect of policies and other changes in administration and to ascertain the progress being made toward completion of the federally required sample size.

Federal financial participation may be reduced or disallowed when the error limit is exceeded. In 2002, a new Farm Bill was signed into law, which revised sanction provisions effective with the fiscal year 2003 performance year. The threshold for sanctions in active case reviews is now 105% of the national average. However, states will not be subject to sanction until the second consecutive year their error rates exceed this threshold. Any penalties assessed are based on the total dollar issuance. The CAPER error rate must be less than the national weighted mean CAPER case rate for the prior fiscal year. There is presently no fiscal sanction for SNAP CAPER performance.

Unlike Medicaid, there are incentives to gain additional administrative funding. Bonuses totaling \$48 million will be distributed to states with the best or most improved performance on measures relating to payment accuracy, CAPER error rate, increased participation in the SNAP program and application processing timeliness. QC data is used for determining which states qualify for performance bonuses.

To date, Nevada has received the following performance bonuses:

- \$1.2 million for increased participation in the Supplemental Nutrition Assistance Program (SNAP) in 2002.
- \$1.1 million for most improved performance in payment accuracy in 2005.

TANF

Current Quality Control efforts under the TANF Program are somewhat different from those used for AFDC, the previous cash assistance program. As federally mandated, case characteristics are gathered monthly and reported quarterly to the federal Department of Health and Human Services, Administration for Children and Families. Although states are expected to develop and operate individual QC programs to assure accurate and timely benefit issuances, there is no longer a federal mandate for QC case reviews to be completed. Nevada hopes to develop a state review system for TANF when funds allow.

Effective FFY06, states are required to maintain internal controls to ensure the activity hours reported for TANF participants are accurate and complete. To achieve this, DWSS conducts monthly reviews of a sub-sample of the TANF data reporting population. Using the Work Verification Plan as a guide, cases are reviewed to determine if the work activities have been properly verified and documented as well as for the accuracy of reported hours.

CHILD CARE

The Nevada Division of Welfare and Supportive Services began administering the Child Care Development Fund (CCDF) in 1997, and today, child care is one of the fastest growing areas of assistance offered by the division. Nevada developed and implemented a State Quality Control Child Care review process in 2001. Child Care eligibility determinations and services are provided by two outside contractors. Based on a random sampling, reviews of case actions are completed by QC to ensure goals of accurate and timely case processing are being met, and program expenditures are accurate.

In FFY08, ACF mandated a federal review be completed to determine the accuracy of Child Care authorizations. This review of 276 cases requires a desk audit of child care eligibility case records and a final report be submitted to ACF on a 3 year cycle. The next federal reporting cycle for federal Child Care reviews will be FY17.

III. FUNDING

Quality Control operations are included in division administrative costs for the SNAP and Medicaid programs, and are 50% federal and 50% state monies. Costs for TANF and Child Care are also included in the division administrative costs within the block grants federally provided for these programs.

IV. QUALITY CONTROL PROCESS

The Quality Control program, under the Program Review and Evaluation Unit, consists of one (1) Program Specialist, three (3) QC Supervisors, twenty-three (23) QC Specialists, two (2) Administrative Assistants, and one (1) Chief who are responsible for:

1. Completing accurate case record analysis;
2. Completing accurate and thorough field investigations, including personal contacts with program recipients, other household members, public agencies, private businesses and third parties;
3. Making accurate decisions on each case regarding the correctness of eligibility determinations and payments, based on federal and state policy manuals;
4. Compiling and tabulating the data as to the extent of errors noted and the causal factors of errors;
5. Analyzing the data accumulated and achieving logical conclusions;
6. Advising the district and program staff of the decisions reached;
7. Preparing monthly federal and state reports;
8. Preparing annual and semi-annual state and federal narrative reports, statistical reports and corrective action plans.

Successful accomplishment of the objectives of quality control depends on sound administration in all aspects of staffing, sample selection, case reviews, analysis, and evaluation of case findings, and maintaining caseloads within established limits in order to meet federal time-frame requirements.

VI. PERFORMANCE HISTORY

	Federal Fiscal Year	Active Accuracy Rate	Negative Accuracy Rate	Enhanced Funding
SNAP	1985	96.98%	UNK	\$436,711
	1986	96.79%	99.22%	\$475,328
	1987	96.18%	98.42%	\$511,258
	1988	97.31%	99.0%	\$560,703
	1989	95.18%	98.88%	\$578,338
	1990	93.50%	99.77%	-0-
	1991	92.50%	99.83%	-0-
	1992	93.20%	99.26%	-0-
	1993	90.90%	99.34%	-0-
	1994	93.15%	98.85%	-0-
	1995	91.23%	99.84%	-0-
	1996	89.37%	98.76%	-0-
	1997	87.77%	98.09%	-0-
	1998	91.19%	98.18%	-0-
	1999	91.86%	98.42%	-0-
	2000	94.89%	93.57%	-0-
	2001	92.00%	89.96%	-0-
	2002	93.59%	93.58%	\$1,200,000*
	2003	91.85%	94.69%	-0-
	2004	92.49%	95.05%	-0-
2005	97.14%	94.24%	-0-	
2006	96.13%	94.64%	\$1,146,492	
2007	95.16%	91.69%	-0-	
2008	95.27%	92.41%	-0-	
2009	95.72%	91.81%	-0-	

	2010 2011	93.43% 93.71%	85.37% 88.51%	-0- -0-
SNAP	Federal Fiscal Year	Active Accuracy Rate	CAPER Accuracy Rate	Enhanced Funding
	2012	93.99%	56.91%	-0-
	2013	94.49%	46.63%	-0-
AFDC	1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996	97.38% 97.81% 96.78% 97.03% 98.10% 96.90% 96.80% 95.87% 94.10% 90.86% 91.16% 89.16%		No enhanced funding provision.
TANF	1997 1998-2013	98.45% Not Tracked		No enhanced funding provision.

MEDICAID	1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002* 2003 2004 2005 2006 2007 2008 2009\ 2010 2011 2012	99.94% 99.74% 99.47% 98.06% 99.66% 98.04% 99.10% 98.10% 99.12% 97.74% 97.25% 99.47% 98.04% 98.07% 99.86% 99.98% 99.53% 99.16%* Not Tracked – Pilot Project Not Tracked – Pilot Project 98.81% 99.42% 98.15% 96.74% 96.39% 98.67% 95.58% 97.58%	No enhanced funding provision. unofficial state result unofficial state result unofficial state result unofficial state result unofficial state result unofficial 11 months no results due to pilot project no results due to pilot project
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HEARINGS

The Nevada Division of Welfare and Supportive Services Hearings Unit provides two essential services:

- An appeal process for applicants and recipients aggrieved of the TANF, Medicaid, SNAP, New Employees of Nevada (NEON), Child Health Assurance Program (CHAP), Energy Assistance Program (EAP) and Child Care programs; and
- Determining the validity of Intentional Program Violations (IPV) alleged by Division staff in the TANF, SNAP, EAP, NEON, and Child Care programs.

DWSS has three (3) hearing officers, who are appointed by the Division Administrator and report to the Chief of PRE and who act as impartial fact-finders having no connection with the action in question. Each hearing officer is responsible for:

- Receiving verbal testimony and documentary evidence from the hearing parties;
- Making a complete record of the hearing proceedings;
- Controlling the hearing and limiting extraneous information;
- Making a decision based on program policy and the evidence presented within required time frames and:
- Notifying appropriate parties of the final hearing decision.

A hearing decision made by the Nevada Division of Welfare and Supportive Services may be appealed within ninety (90) days from the date of the decision letter to the District Court of the State of Nevada.

TANF DATA REPORTING

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 established the block grants for TANF. The purpose of this welfare reform initiative was to increase the states flexibility in operating a program designed for specific goals. PRWORA allows states discretion as to the mechanisms used in meeting the welfare reform goals set forth in the law. However, it also places a responsibility for measuring, tracking and reporting on the reform initiatives implemented by the state.

To meet the reporting responsibility, PRWORA requires states to collect and report a wide variety of disaggregated case record information on the families receiving TANF assistance and families no longer receiving TANF assistance. This information is collected on a monthly basis by the state, and reported on a quarterly basis to the Department of Health and Human Services (HHS). States have the option of reporting on the entire TANF caseload or on a statistically valid sample of the TANF caseload. Currently, the Nevada Division of Welfare and Supportive Services reports TANF data using a sample of the caseload.

Two important uses of this information are:

- Calculating the Work Participation Rate of each state (explained further in the Employment and Training Section); and
- Caseload Characteristics Studies, by State, nationwide.

Information reported through TANF Data Reporting is compiled and published annually by the Administration for Children and Families in the TANF Annual Report to Congress. This publication serves as a resource to any federal agency making decisions or appropriations which could impact Nevada's TANF populations.

**PROGRAM
INCOME
LIMITS**



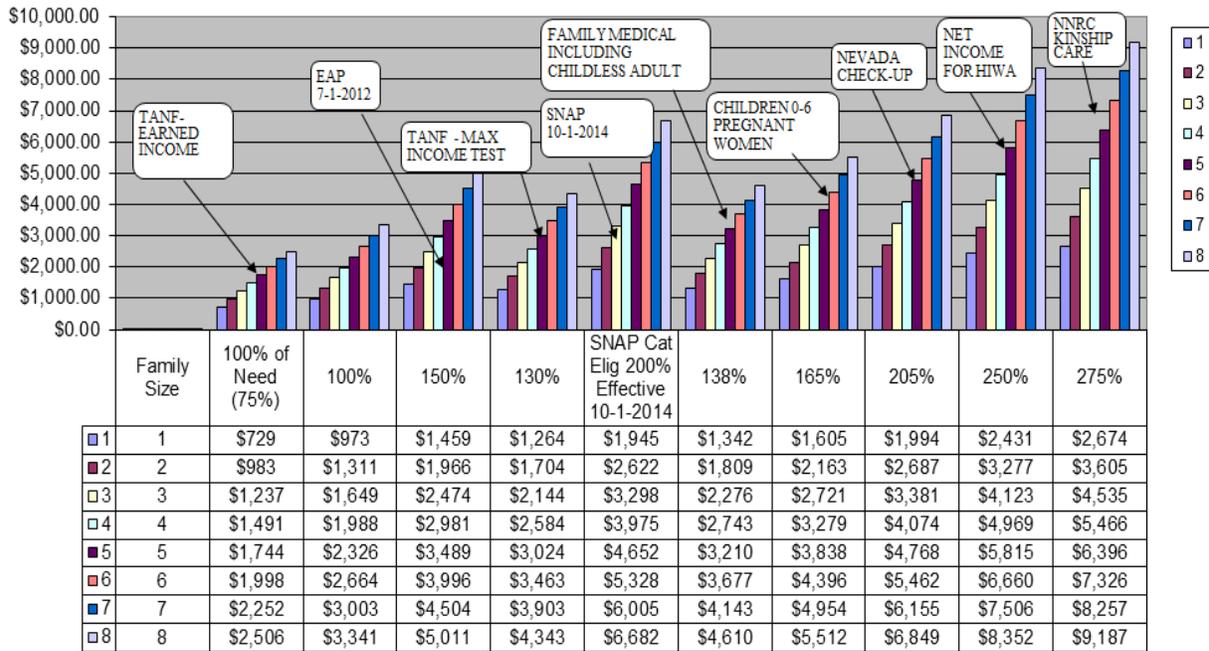
PROGRAM INCOME LIMITS

PROGRAM	INCOME LIMIT
Temporary Assistance for Needy Families (TANF)	Approx. 75% of Federal Poverty Level (see - TANF Section, Page 7. <i>R. Income/Consideration/Budgeting, 1. Need/Payment Standards, TANF NEED AND PAYMENT AMOUNTS</i>)
Family and Expanded Medical Pregnant Women Children under age 6 Children 6 and older Parent/Caretakers Childless Adults	165% of Federal Poverty Level 165% of Federal Poverty Level 138% of Federal Poverty Level 138% of Federal Poverty Level 138% of Federal Poverty Level
Nevada Check Up (Nevada's CHIP program)	205% of Federal Poverty Level
State Institutional, Katie Beckett and Home Based Waiver	300% of SSI \$2,163
Health Insurance For Work Advancement (HIWA)	Gross Unearned Income \$699.00 Gross Earned Income \$4376.00 Combined Net Income \$2431
Medicare Beneficiaries: Qualified Medicare Beneficiaries (QMBs) Special Low Income Medicare Beneficiaries (SLMBs) Qualified Individuals 1 (QIs-1)	100% of Federal Poverty Level 100% - 120% of Federal Poverty Level 120% - 135% of Federal Poverty Level
Supplemental Nutrition Assistance Program (SNAP) Gross Income Limit Net Income Limit Broad Based Categorically Eligible Households	130% of Federal Poverty Level 100% of Federal Poverty Level 200% of Federal Poverty Level
New Employees of Nevada (NEON)	TANF Eligible
SNAP Employment and Training (SNAPET)	SNAP Eligible
Child Care	75% of State Median Income
Low Income Home Energy Assistance Program (LIHEA)	125% of Federal Poverty Level
Energy Crisis Intervention Program (ECIP)	150% of Federal Poverty Level

TANF AND POVERTY LEVEL AMOUNTS

HH SIZE	TANF	100%	125%	130%	133%	185%	200%	275%
1	\$253	\$ 973	\$1,164	\$1,264	\$1,238	\$1,722	\$1,946	\$2,674
2	318	1,311	1,576	1,704	1,677	2,333	2,622	3,605
3	383	1,649	1,989	2,144	2,116	2,943	3,300	4,535
4	448	1,988	2,401	2,584	2,555	3,554	3,976	5,466
5	513	2,326	2,814	3,024	2,994	4,164	4,652	6,396
6	578	2,664	3,226	3,463	3,433	4,775	5,330	7,326
7	643	3,003	3,639	3,903	3,872	5,385	6,006	8,257
8	708	3,341	4,051	4,343	4,311	5,996	6,682	9,187

2014 Poverty Levels and Need Standards (Monthly)
TANF Need Standard, Medicaid Income limits updated April 1st of each year
SNAP Income limits and categorical eligibility updated October 1st each year
EAP income limits updated July 1st each year.



**SUPPLEMENTAL NUTRITION
ASSISTANCE
PROGRAM**



SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM

I. BACKGROUND

The Food Stamp Program was established by federal law in 1964. Nevada implemented the Food Stamp Program on October 1, 1973 in Clark and Washoe Counties and statewide by July 1, 1974. Effective October 1, 2008 the Food Stamp Program was renamed the Supplemental Nutrition Assistance Program or SNAP.

II. PURPOSE

The purpose of the SNAP Program is to raise the nutritional level among low income households whose limited food purchasing power contributes to hunger and malnutrition among members of these households.

III. FUNDING

Food benefit expenditures are 100% federal funds. Administrative costs for the SNAP Program are 50% federal and 50% state monies (General Fund).

IV. APPLICATION PROCESS

SNAP Program application requests may be made verbally, in writing, in person or through another individual. An application is provided to the household the same day the request is received. A responsible adult household member knowledgeable of the household's circumstances may apply and be interviewed. As part of the application process, all applications are screened for expedited service. Each household applying must submit an application form including, at a minimum, the applicant's name, address and signature. An application/ recertification may be submitted by fax.

Households in which members are applying for Public Assistance and SNAP benefits or in which all members are applying for SSI and SNAP may complete one application and interview. This application is used to determine eligibility for all programs.

The date of application is the date the application is received in the Division of Welfare and Supportive Services or Social Security Office.

When a household member is unable to apply, a responsible adult, 18 years or older, may be designated in writing as authorized representative. Once designated, they may sign the application and act on behalf of the household.

A decision to approve or deny benefits is usually made within 30 days from the date of application. If the household has little or no money, or has shelter expenses which exceed its income, it may be entitled to expedited service and benefits are available by the seventh day after application.

V. ELIGIBILITY CRITERIA

SNAP has specialized eligibility criteria for certain types of households (boarders, institutions, students, strikers, etc.). However, in general, the following eligibility requirements must be met to be eligible:

A. HOUSEHOLD CONCEPT

Individuals applying for SNAP benefits must apply as a household. A household is defined as any of the following (not all inclusive):

1. A person who lives alone; or
2. A group of people who live, purchase food and prepare meals together; or
3. A person or persons who live with others and who usually purchase and prepare food separately from the others.

The following people who live together must be considered as purchasing food and preparing meals with each other, even if they do not do so. They must be included in the same household and cannot apply as a separate household.

1. Spouses
2. A person under 22 years of age who is living with their parent(s) (natural, adoptive or step). All children under 22 years of age and their parents living in the home must be one household.
3. A child (other than a foster child) under 18 years of age who lives with and is under the parental control of a household member other than his/her parent must apply with that household member.

B. CITIZENSHIP

An applicant/recipient must be a citizen of the United States or a non-citizen legally admitted for permanent residence to the U.S. and meet certain criteria, or be in another eligible non-citizen category and meet certain criteria.

C. RESIDENCY

Applicants must be in Nevada for any reason other than vacation. There are no durational or fixed residence requirements; however, residence must be verified.

D. WORK REQUIREMENTS

Every household member, age 16 through 59, unless exempted, must cooperate with the SNAP Employment and Training Unit. If a household member fails to cooperate, he/she is disqualified a minimum of one month for the first violation, three months for the second violation and six months for a third or subsequent violation.

In addition to the above, able bodied adults, age 18 through 49 without dependents and not otherwise exempt, are not eligible to receive SNAP benefits if during a 36-month period they received SNAP benefits for 3 months and did not work or participate in a work program at least 20 hours per week averaged monthly. At this time the division has accepted a waiver from the Food and Nutrition Service exempting the entire State of Nevada from the ABAWD limitations. This waiver is based on Nevada's high unemployment rate and eligibility for emergency unemployment compensation. The waiver must be renewed each year to continue.

E. SOCIAL SECURITY NUMBERS

Each household member must provide a Social Security Number or provide proof of application for a Social Security Number, unless there is good cause for not providing a number or religious beliefs prohibit enumeration. Assistance will be denied only to the individual(s) refusing to provide or apply for a number without good cause. Non-qualified non-citizens do not have to provide or obtain a social

security number and any known number cannot be reported to the U.S. Citizenship and Immigration Service (USCIS).

Social Security numbers are used to verify income and resources and to see what benefits are available; as case numbers in the computer; gather workforce information for research which helps lawmakers and agencies improve services to Nevadans; investigate fraud and recover overpaid benefits; ensure nobody gets benefits in more than one household at the same time; or while they are in jail or prison or deceased and match against other federal and state records. For example, Child Support Enforcement Program (CSEP), Unemployment Insurance Benefits (UIB), Internal Revenue Service (IRS), Medicaid and Social Security Administration (SSA), law enforcement/prison records.

F. RESOURCES

1. \$2,250 per household, OR
2. \$3,250 per household if at least one member is age 60 or older or permanently disabled.

Examples of resources exempt from consideration are:

1. The household's home, plus any property which is adjacent to and connects with the lot of the home.
2. Leased vehicles.
3. The total value of one vehicle plus vehicles used for income-producing purposes, or as the client's home, or to transport a physically disabled household member.
4. Personal effects (clothing, jewelry, coin collections, paintings, etc.) and household goods (furniture, appliances, etc.).
5. Most property and assets which are income-producing.
6. Resources for which the cash value is not accessible to the household.
7. Most burial plots, and all life insurance policies.
8. Property directly related to the use or maintenance of an income-producing vehicle.
9. Pets (e.g., dog, cat, rabbit, snake, rodent, bird, horse).

All resources not specifically exempted by SNAP policy are counted in determining eligibility. When considering the value of non-exempt vehicles, either \$4,650 or encumbrances are first subtracted from the fair market value. Resources are exempt for categorically eligible households. (See page 6 of this section)

G. INCOME/BUDGETING

Income received by the household is evaluated to determine if the income is to be budgeted or exempted from consideration.

Gross Income is determined and compared to the following maximum allowable amounts. (Effective October 1, 2014)

Household Size	Gross Income (130% of Poverty)
1	\$1,265
2	1,705
3	2,144
4	2,584
5	3,024
6	3,464
7	3,904
8	4,344
Each additional person	+ 440

If gross income exceeds these amounts, the case is not eligible. If gross income is less than the maximum amounts, the following deductions are allowable to determine net income:

1. Earned income deduction - 20% of gross earned income. This deduction covers work expenses and mandatory work deductions.
2. Standard deduction - Each household is allowed a standard deduction, the amount of the standard deduction depends on the household size.
 - Household size of 1 – 3 \$155
 - Household size of 4 \$165
 - Household size of 5 \$193
 - Household size of 6 or more \$221
3. Medical expenses - Medical expenses in excess of \$35 incurred by aged or disabled household members.
4. Child support - Court ordered child support payments actually made by a household member.
5. Dependent care expenses - Verified payments actually made by a household member.
6. Shelter expenses - The shelter allowance is that portion of total shelter costs (including mortgage, rent, utilities, property payments, etc.) which exceed 50% of the household's income after all other deductions. The shelter deduction may not exceed \$490.

Net Income is then compared to the following table to determine final eligibility. (Effective October 1, 2014)

Household Size	Net Income (100% of Poverty)
1	\$ 973
2	1,311
3	1,650
4	1,988
5	2,326
6	2,665
7	3,003
8	3,341
Each additional person	+ 339

The household's SNAP allotment (benefit amount) is determined by comparing net income to the SNAP allotment table. The lower the net income, the higher the SNAP allotment will be. Thirty percent (30%) of net income is subtracted from the household size maximum allotment to determine benefit amount.

Maximum monthly allotments are:

Household Size	Maximum Allotment
1	\$194
2	357
3	511
4	649
5	771
6	925
7	1,022
8	1,169
Each additional person	+ 146

Expanded Categorical Eligibility – In March of 2009 DWSS implemented broad based categorical eligibility. This policy increases the gross income limit for most SNAP households to 200% of poverty and exempts all resources for those households meeting the increased gross income limit. (Effective October 1, 2014)

Household Size	Broad Based Categorical Eligibility Gross Income (200% of Poverty)
1	\$ 1,946
2	2,622
3	3,300
4	3,976
5	4,652
6	5,330
7	6,006
8	6,682
Each additional person	+ 678

H. COOPERATION/REPORTING REQUIREMENTS

Households are required to cooperate in providing information to determine eligibility. Changes in income/resources/circumstances must be reported during the certification period.

All households must report required changes in household circumstances within ten days from the date the change occurs. The following must be reported:

Status Change Reporting Households:

1. Changes in earned income only when there is a change in employment status. A change in employment status is defined as:
 - a. Obtaining a job;
 - b. Loss of a job;

- c. Promotion;
 - d. Change in hourly rate of pay;
 - e. Change in employer, or
 - f. Change from part-time to full-time or full-time to part-time employment.
2. Changes in source of unearned income or the amount of income more than \$50, except:
 - a. Changes in the TANF grant.
 - b. Child support payments to the household through the Child Support Enforcement Program.
 - c. Mass changes when the agency is responsible for making the change (i.e., Social Security/SSI benefit increases);
 3. Changes in household composition;
 4. Changes in residence and resulting change in shelter costs;
 5. Changes of more than \$50 in legally obligated Child Support payments being allowed as a deduction;
 6. Acquisition of non-exempt vehicles;
 7. Acquisition of liquid resources which cause the household's resource limit to reach or exceed \$2,250 or \$3,250 (whichever applies).

Simplified Reporting Households:

1. Gross income which exceeds the 130% poverty level for the household size. (The household is notified of this amount on each Notice of Decision sent to the household)

VI. OBTAINING/USING SNAP BENEFITS

SNAP benefits are issued to an Electronic Benefits Transfer (EBT) account and may be accessed by using an EBT card. EBT cards are like an ATM Debit card.

There is no cost for SNAP benefits.

SNAP benefits are spent like cash for food at stores that accept them.

SNAP benefits are only used to pay for food and plants or seeds to grow food.

SNAP benefits cannot buy ineligible items such as: alcohol, tobacco, soap, paper products, vitamins, medicine, pet food, or hot, ready-to-eat foods.

VII. REGULATIONS AND LAWS

The SNAP Program is governed by a variety of laws and regulations. The governing body is the Food and Nutrition Service, United States Department of Agriculture. Program changes and instructions are transmitted to the states through means such as administrative notices and Code of Federal Regulations updates.

The following is a partial list of regulatory sources:

1. The Food and Nutrition Act of 2008
2. Part 7 of the Code of Federal Regulations
3. Nevada Revised Statutes, Chapters 422A and 207

4. Court Ordered actions
5. The Food, Conservation and Energy Act of 2008.

Please visit the Division of Welfare and Supportive Services home page at: <http://dwss.nv.gov> for program facts and application information. This site also provides access to cash and medical program information and to the federal USDA web site.

VIII. CHANGES RESULTING FROM THE FOOD, CONSERVATION AND ENERGY ACT OF 2008 (FCEA)

On June 18, 2008, Congress enacted the Food, Conservation and Energy Act of 2008 (FCEA). The following changes to SNAP were included in this act. These provisions are effective October 1, 2008.

Renaming the Food Stamp Program:

This provision renames the Food Stamp Program the “Supplemental Nutrition Assistance Program” or SNAP and renames the Food Stamp Act of 1977 the Food and Nutrition Act of 2008.

IX. SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM - COMMUNITY PARTNERSHIPS

- SNAP Outreach

The Division of Welfare and Supportive Services (DWSS) has participated in an optional USDA FNS SNAP Outreach Reimbursement Program since 2007 to increase SNAP participation among eligible Nevadans. DWSS operates two projects under the SNAP Outreach Program. The first project began as a waiver to allow non-merit (non-state) employees to assist with application preparation and support document gathering as well as conducting the initial SNAP interview.

The plan originally targeted elderly and disabled households. In August of 2009 this project was converted to a Demonstration Project which was expanded to include all potential households served by the partners included in the plan. This project is in the last two years of a program approved for five years (August 1, 2009 - July 31, 2014). Partners working with the Demonstration Project are the Food Bank of Northern Nevada and HELP of Southern Nevada.

For Federal Fiscal year 2013 Nevada’s Trusted Partners submitted 6,369 applications, of which 5,642 were approved, an average approval rate of 88.6%. Trusted Partners were able to assist 5,733 new households who received an average benefit of \$191 per household, bringing close to \$1,095,000 more federal dollars in SNAP benefits into Nevada.

The second project includes Basic Outreach partners. This is composed of Family Resource Centers including the Boys and Girls Club of Southern Nevada, Cappalappa, East Valley Family Services, Lincoln County, Olive Crest, Salvation Army, Mesquite and as well as Three Square Food Bank of Southern Nevada, Lutheran Social Services and Catholic Charities of Northern Nevada. These organizations help applicants prepare their application and gather support documents for submission on-line through Access Nevada or to a local office for DWSS staff to conduct the initial interview. The Basic Outreach partners provided multi-lingual assistance to 689 sites in Federal Fiscal Year

2013, and assisted over 6,000 households with the completion and submission of applications for SNAP benefits.

Due to the increase of matching federal funds in the SNAP Outreach Plan, the agency has been able to contract with two Outreach Coordinators - one for the north and one for the south and add organizations to assist with the testing of the on-line SNAP application during development.

- SNAP Nutrition Education Plan

DWSS has been working with community and agency partners since 1997 to offer nutrition education to low income families through the USDA-FNS Healthy Hunger Free Kids Act of 2010 (formally known as the SNAP Ed Reimbursement Program). Currently there are 10 partners: University of Nevada Cooperative Extension, Southern Nevada Health District, Food Bank of Northern Nevada, Help of Southern Nevada, University of Nevada Reno Department of Nutrition, Step 2, Three Square, Duckwater Shoshone Tribe, Yerington Paiute Tribe and the Te-Moak Tribe of Western Shoshone. These partners offer 24 different programs for participants from 3 years of age through seniors, in Headstart, elementary and middle school classrooms, in after school, summer feeding programs and 4-H programs held in schools, youth centers, housing complexes and faith based organizations, community resource centers, drug rehabilitation programs, TANF Work Readiness Workshops and food distribution programs at senior housing complexes and 6 Native American Reservations in Nevada, Western Utah and Northeastern California. Programs assist all ages to grow foods and herbs in container gardens, school gardens and various Hoop House Gardens.

Frequent reinforcement messages can be seen at bus stop kiosks, on billboards and on bus wraps or heard as they shop in super markets where SNAP benefits are most frequently used. In 2013 it is estimated that our partners made 123,512 direct contacts and social marketing reached 1,452,360 Nevadans who benefited from nutrition education through the Nevada SNAP Ed program which encouraged them to "Eat Healthy, Be Active" following the US Dietary Guidelines on how to plan, shop and prepare meals to extend SNAP benefits throughout the month. Programs are coordinating with Community Health and Wellness programs to ensure that the environment in which we live is conducive to eating healthy and being active.

**SUPPLEMENTAL NUTRITION
ASSISTANCE PROGRAM**

**THRIFTY
FOOD PLAN**

THRIFTY FOOD PLAN

Income limits used to determine eligibility are revised each October 1, by the Food and Nutrition Service (FNS), to reflect the Office of Management and Budget's (OMB) annual adjustment to the non-farm poverty guidelines. Generally, the maximum SNAP allotment schedule based on the "Thrifty Food Plan" is revised at the same time.

The Thrifty Food Plan is a plan for the consumption of different types of foods which provide nutritious meals and snacks for family members. The plan suggests amounts of food for men, women and children of different ages which meet all dietary standards.

The Thrifty Food Plan is adjusted periodically to reflect changes in the cost of food. The last such adjustment took place on June 1, 2014, based upon the cost of food for a family of four consisting of a man and woman ages 20-50 and children 6-8 and 9-11.

FNS adjusts the Thrifty Food Plan each October 1st to reflect changes in the Consumer Price Index for all urban consumers.

**TEMPORARY ASSISTANCE
FOR NEEDY FAMILIES
(TANF)**



TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF)

I. BACKGROUND

AFDC (Aid to Families with Dependent Children) was established by the Social Security Act in 1935 and Nevada implemented the program in 1955. Nevada's AFDC Program was cash assistance only until Medicaid was implemented in 1967.

The program is administered by the Administration for Children and Families through state and local government agencies within certain broad federal requirements and guidelines.

On August 22, 1996, President Clinton signed the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. This law eliminated the open-ended federal entitlement program of Aid to Families with Dependent Children (AFDC) and created a block grant for states to provide time-limited cash assistance to needy families. The new program is called Temporary Assistance for Needy Families (TANF). The goals of TANF are to provide assistance to low-income families with children so they can be cared for in their own home, reduce dependency by promoting job preparation, reduce out-of-wedlock pregnancies and encourage the formation and maintenance of two-parent families.

States had until July 1, 1997 to submit a TANF state plan and initiate block grant funding; however, states were permitted to implement the state plan grant immediately after allowing a 45-day public comment period. States, which opted for early implementation, had to abide by the mandatory requirements of the Act. These include a 60-month lifetime time limit on receipt of benefits, increased work participation requirements, mandatory sanctions for failure to participate in work programs and failure to cooperate with the Child Support Enforcement Program, and living arrangement and school attendance requirements for minor parents. Nevada implemented TANF January 1, 1997.

On February 1, 1997, state welfare reform measures passed during the 1995 legislative session were implemented. These included exempting the total value of one vehicle, increasing the resource limit to \$2,000 and 100% and 50% earned income disregards.

Effective January 1, 1998, optional provisions allowed to states in the federal regulations were adopted by the State Legislature in 1997 and implemented. These included stricter time limits and sanction penalties; assessments and personal responsibility plans for all individuals receiving cash assistance; immunization of children; and creation of a diversion program.

Congress reauthorized the Temporary Assistance for Needy Families with the passage of the Deficit Reduction Act (DRA) of 2005. The new TANF provisions provide several challenges for states. The Division of Welfare and Supportive Services implemented several policy changes in response to the new regulations. In Federal Fiscal Year 2007, the State changed the way a TANF household is defined and addressed the challenges faced by a family in need of cash benefits. The TANF program was separated into five different programs effective October 1, 2007.

- The Self-Sufficiency Grant (SSG) is a one-time lump-sum payment designed to alleviate a barrier to employment until regular income is received from employment. The purpose of SSG is to provide an opportunity for families who are eligible for TANF, a one-time benefit to divert the family from welfare.
- The Temporary Program is a financial payment designed to meet an immediate episode of need defined as an unforeseen circumstance such as a flood, earthquake, etc., and limited to no more than four months per episode of need.
- The Loan Program is a monthly financial payment designed to meet a families needs such as food, shelter, clothing, etc. until an anticipated future source of income is received. The most common recipient of this benefit is a household with an otherwise work-eligible recipient pending receipt of Supplemental Security Income (SSI). For the Loan program to be considered, each adult household member must have a reasonable expectation of a future source of income to provide for repayment of the loan.
- The NEON Program is the Division's work program and provides a monthly financial payment for families whose adult household member are work-eligible and meet the terms of their Personal Responsibility Plan.
- The TANF Child-Only program is a monthly financial payment for families who are not subject to the federal work participation requirements. The program includes child-only cases where the adult relative caregiver(s) do not receive assistance because they are not an eligible non-citizen, receive SSI or are a non-parent, non-needy relative caregiver.

II. PURPOSE

The purpose of the program is to provide temporary assistance for the care of dependent children in their homes or in the homes of relatives by furnishing financial and self-sufficiency services.

III. FUNDING

TANF is federally funded through a block grant from the Department of Health and Human Services. In addition, a maintenance of effort provision in the federal regulations requires states to contribute money equal to 80% of the amount spent on AFDC and related programs during federal fiscal year 1994.

IV. TANF ASSISTANCE DEFINED

"Assistance" is defined as cash payments, vouchers and other forms of benefits provided to cover a family's ongoing basic needs such as food, shelter, clothing, etc. It includes childcare, transportation and other supports for families that are not employed.

Excluded from the definition of assistance are:

- A. Child care, transportation and support services to meet work-related expenses for employed families (even if combined with training and other activities) and during times of temporary unemployment.

- B. Services and activities without a monetary value, e.g., domestic violence, mental health, substance abuse and other counseling, employment and training including books and tuition, information and referral, work subsidies to employers, job retention services, etc.
- C. Non-recurrent short-term benefits for up to 4 months of future needs (with no limitation on retrospective needs). This is not limited to one payment if needed again for a different, discrete episode of need.
- D. Contributions to an individual development account (IDA).
- E. Transportation benefits from a Job Access or Reverse Commute project.
- F. Refundable earned income tax credits.

V. APPLICATION PROCESS

Receipt of TANF assistance subjects the household to federal and state time limits, work participation requirements, child support enforcement activities and requires they be included in federal data reporting.

Those wishing to apply must complete an Application for Assistance and submit it to their local Welfare and Supportive Services office for processing. An eligibility decision is generally made within 45 days from the application date. The Application for Assistance can also be used to apply for Medicaid; eligibility would be determined in conjunction with the TANF determination. In some instances individuals may qualify for Medicaid only, if they meet Medicaid eligibility criteria.

Medicaid assistance can be requested and granted when certain criteria is met up to three months prior to the application month.

An assistance unit that becomes ineligible for TANF cash assistance due to certain specified conditions may remain eligible for Medicaid up to twelve additional months when certain criteria is met.

VI. ELIGIBILITY CRITERIA

To be eligible for NEON or TANF Child-Only benefits, the following eligibility requirements must be met:

A. ASSESSMENT

An assessment is required for each household to evaluate existing skills, prior work experience and employability, and to determine family needs including job training, child care, treatment for substance abuse, mental health services, domestic violence, and other issues. The assessment is done in cooperation with household recipients.

B. PERSONAL RESPONSIBILITY PLAN

A written responsibility plan must be established with the participation of the head of household to identify the role of each household member in becoming self-sufficient. The plan must be initiated within five days of eligibility approval and expires 24 months later. The plan must be reviewed at least every six months or when the assistance unit's circumstances change requiring modification of the plan. If a recipient is a minor parent

(under age 18), it must include a provision requiring the minor parent to meet school attendance requirements, attend parenting skill training and encourage the minor parent to participate in a mentoring program.

C. AGREEMENT OF COOPERATION

Each head of household must sign an Agreement of Cooperation which includes a statement of their responsibilities as a condition of receiving benefits and describes the penalties that may be imposed for failure to comply.

D. CHILDREN MUST BE LIVING IN THE HOME OF A SPECIFIED RELATIVE

The child must be living with the individual applying for assistance on their behalf who provides care and supervision and is the child's:

1. Father, mother, sister, brother, grandfather, grandmother;
2. Uncle, aunt, nephew, niece, first cousin, second cousin;
3. Stepfather, stepmother, stepsister, stepbrother.

E. PERSONS WHO MUST BE INCLUDED IN THE ASSISTANCE UNIT

An application for a dependent child must also include, if living in the same household and otherwise eligible:

1. Any natural or adoptive parent of the dependent child; AND
2. Any blood-related or adoptive brothers or sisters of the dependent child who are themselves dependent children and meet all other eligibility requirements.

F. AGE/SCHOOL REQUIREMENTS

Children must be under age 18,

OR

Be age 18 and attending school full time expecting to graduate before age 19, or they have not completed high school but are attending vocational or technical training and the course of study is expected to be completed before the child reaches age 19.

G. SCHOOL ATTENDANCE

The head of household must ensure their children age 7 through 11 (under age 12) attend school as required by state law and take every reasonable action to ensure the child is not at risk of failing to advance to the next grade level. There is no sanction, but failure to attend school or risk of failure to advance must be addressed in the Personal Responsibility Plan. Minor parents must meet school attendance requirements as a condition of eligibility.

H. IMMUNIZATIONS

Each recipient must provide proof immediately, or within six months, that all children for whom benefits are received are appropriately immunized. The Division advises every recipient of the availability of standard

immunizations through clinics. Exemptions are provided for religious belief or medical conditions. Failure to ensure children are immunized may result in a sanction.

I. RESIDENCY

Applicants must be living in the state with the intention of making Nevada their home permanently, or for an indefinite period. OR

Entering Nevada with a job commitment or seeking employment.

J. CITIZENSHIP

An applicant/recipient must be a citizen of the United States or a non-citizen legally admitted for permanent residence to the U.S. and meets certain criteria, or be in another eligible non-citizen category and meets certain criteria.

K. CHILD SUPPORT ENFORCEMENT PROGRAM (CSEP)

Recipients must cooperate in establishing paternity or seeking child support. If a caregiver or parent applying for or receiving NEON or TANF Child-Only benefits refuses to assist the CSEP or District Attorney in establishing paternity or seeking support, benefits are denied /terminated.

L. NEW EMPLOYEES OF NEVADA (NEON)

NEON is Nevada's employment and training program. The purpose of the program is to reduce or eliminate welfare dependency by providing employment, education, training and support services to recipients to enable them to become self-sufficient. NEON participation is an eligibility requirement for all work-eligible individuals. Exempt individuals, usually single parents with children under twelve months of age, or minor parents with children under twelve weeks of age, are given the option of volunteering for the program if they wish to participate. Participants may be placed in different components including orientation to work, job search workshops, educational activities, skill training and Community Work Experience (CWEP).

Support services available to NEON participants include: help with child care, transportation, clothing and special required work items necessary for employment such as tools, uniforms, shoes, work permits, physicals, etc. Participants may also receive family counseling/planning, health referrals, job placement referrals, etc.

M. FURNISHING SOCIAL SECURITY NUMBERS

Each applicant/recipient must provide or apply for a Social Security Number to be eligible for assistance.

N. COOPERATION/REPORTING OBLIGATIONS

All applicants/recipients are required to cooperate in providing necessary information to determine initial and ongoing eligibility, the amount of assistance and to report changes which may affect their eligibility/grant.

O. NEON/Loan TIME LIMITS

1.. Federal Time Limits

A TANF NEON/Loan household in which any adult member (this includes a minor parent who is/was the head of household for their own case) received benefits from Nevada or any other state for 60 months, regardless of whether consecutive or cumulative, is prohibited from receiving cash benefits, unless the head of household meets the criteria for a hardship extension.

No more than 20% of the average monthly number of families receiving assistance may receive an exemption from this time limit.

2. Nevada Months

NEON and/or Loan assistance units containing an adult may receive benefits either cumulatively or consecutive from NEON and/or Loan from Nevada for 24 months. After the 24 months, they must remain off of assistance for 12 consecutive months, unless hardship criteria are met. A six-month extension to the two-year time limit may be allowed if the division determines the recipient could become self-sufficient if allowed this additional time.

Receipt of benefits may continue within these time limits until the lifetime limit of 5 years is reached.

P. SANCTION SIT-OUT FOR NON-COOPERATION

Sanctions are imposed for violation of the Personal Responsibility Plan. If a mandatory "Work Eligible" recipient does not cooperate within the prescribed 10 or 30 day conciliation period to correct the violation, cash assistance will be terminated for 3 consecutive months. Medicaid may continue during the sanction sit-out period.

Q. RESOURCES/PROPERTY

Liquid and non-liquid resources are evaluated to determine if they are countable or exempt. Countable resources cannot exceed \$6,000 per case. When resources exceed this limit, the case is ineligible.

Types of countable resources are cash on hand, stocks, bonds, mortgages, deeds of trust, bank accounts, real property, etc. There are certain types or amounts of resources which are not counted when determining eligibility such as:

1. One automobile is exempt.
2. The home, including any contiguous land, which is the usual residence of the assistance unit the client owns or is buying.
3. One burial plot for each member of the assistance unit.
4. Burial funds up to \$1,500 equity value for each assistance unit member.
5. Household goods and personal items.

R. INCOME/CONSIDERATION/BUDGETING

The household must have income within certain limits to be eligible for benefits. The maximum allowable income is based on the number of persons in the assistance unit. A monthly budget is done for all households with income to determine eligibility without application of disregards. Also, some incomes are counted in this test and not counted in the cash grant computation. If gross income is less than 130% of poverty, a cash grant is computed by subtracting allowable disregards from gross income. Stepparent income and the income of responsible parents is budgeted towards the needs of the assistance unit.

1. Need/Payment Standards

Agency need standards are used to determine eligibility and grant amounts. These need standards include food, clothing, recreation, personal incidentals, fuel for heating, cooking and water heating, electricity for refrigeration and lights, household supplies, medical chest supplies and shelter.

TANF NEED AND PAYMENT AMOUNTS

Household Size	Need Standard 100%	Payment Allowance	TANF NNCT 275 % of Poverty (Eff. 4/1/2012)	Non-Parent Relative Caregiver Payment Allowance
1	\$ 718	\$253	\$2,674	\$417
2	\$ 969	\$318	\$3,605	\$476
3	\$1,221	\$383	\$4,535	\$535
4	\$1,472	\$448	\$5,466	\$594
5	\$1,723	\$513	\$6,396	\$654
6	\$1,974	\$578	\$7,326	\$713
7	\$2,226	\$643	\$8,257	\$772
8	\$2,477	\$708	\$9,187	\$831

100% increases \$248 for each additional person.

Payment allowance increases \$65 for each additional person.

Effective July 1, 2007, Kinship Care and Non-Needy Relative Caregiver (NNRC) payment allowance were maintained at the level in effect June 30, 2007. Other households received a 10% increase in their monthly benefits.

Effective September 1, 2011 the payment allowance was changed as follows:

KINSHIP CARE PAYMENT ALLOWANCE	
0 through 12 years of age	\$400 for each child
13 years of age or older	\$462 for each child

Exception: When the only child in a Kinship Care case is age 0-12, the Kinship Care payment allowance will not be reduced below the NNRC payment allowance of \$417.

2. Subsidized Housing

Individuals residing in subsidized housing, who are the responsible tenant for the rent or mortgage payment, have \$76 of the value of the subsidy budgeted as unearned income in determining eligibility and amount of assistance. If the subsidy value is less than \$76, this amount is budgeted as unearned income.

The following programs are considered subsidized housing:

- HUD Conventional Public Housing
- HUD Section 8 Housing
- FMHA Section 515 Rental Assistance
- HUD Indian Housing - Mutual Help and Rental Assistance
- HUD Transitional Housing (Reno only)

3. Earned Income Disregards

The following are deducted from each person's gross earnings when certain conditions are met:

a. Earned Income Disregards

100% of gross earnings for three months, 85% the second three months, 75% the next three months and 65% of gross earnings for the final three months. After earned income disregards are exhausted:

Standard Work Expense

Ninety dollars (\$90) or 20% of gross earnings, whichever is greater.

b. Child Care

The actual amount of child care expenses.

4. Stepparent Income

When the TANF natural parent is married to and living with a stepparent, the stepparent's income is considered toward the needs of the assistance unit. The following amounts are subtracted from the stepparent's gross income when certain conditions are met:

a. Standard Work Expense

Ninety dollars (\$90) or 20% of gross earnings, whichever is greater, when the stepparent works.

b. Need Standard Deductions

The 100% need standard is deducted for the stepparent plus any other persons living in the home who are NOT included in the TANF assistance unit who are claimed by the stepparent as dependents for federal income tax purposes.

c. Support Payment Deductions

Amounts actually paid by the stepparent to persons not living in the home who are claimed by the stepparent as dependents for federal income tax purposes AND payments made by stepparents for spousal and/or child support.

5. Responsible Parent Income

When a minor parent caregiver is living with one or both natural/adoptive parents, the parent's income is used to determine eligibility and amount of assistance for the minor's assistance unit. The following amounts are subtracted from the responsible parent's gross income when certain conditions are met:

a. Standard Work Expense

Ninety dollars (\$90) or 20% of gross earnings, whichever is greater.

b. Need Standard Deductions

The 100% need standard is deducted for the responsible parent plus any other persons living in the home who are NOT included in the TANF assistance unit who are claimed by the responsible parent as dependents for federal income tax purposes.

c. Amounts actually paid by the responsible parents to persons not living in the home who are claimed by the responsible parent as dependents for federal income tax purposes AND payments made for alimony and/or child support.

S. TANF EBT RESTRICTED USE

Effective January 1, 2014, TANF NEON and TANF Child-Only EBT benefits cannot be accessed from ATM machines or used to purchase items in the following locations:

- casinos;
- gaming establishments;
- liquor stores; or
- retail establishments which provide adult entertainment.

When restricted usage is detected a warning letter must be sent to the household indicating the benefits provided are to cover a family's ongoing basic needs such as shelter, utilities, food, clothing, etc., and if another restricted usage is determined, they will no longer receive the cash benefits and instead a protective payee (someone they may select) will be established to receive the cash benefits on their behalf to ensure the family's basic ongoing needs are met.

District Office Managers will determine on a case-by-case basis if the use in a restricted area is the household's only means available to obtain money such as in rural or remote areas etc. Once the decision is made, a protective payee will not be considered until or unless the household moves

to an area where the availability to obtain money is no longer an issue, or until such time the area obtains another means to access money.

VII. REGULATIONS AND LAWS

The TANF Program is governed by a variety of laws and regulations. The governing body is the Office of Family Assistance, Administration for Children and Families, Department of Health and Human Services. Program changes and instructions are transmitted to the states through a variety of means, such as information memorandums, action transmittals and Code of Federal Regulations updates.

The following is a partial list of regulatory sources:

1. Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996
2. Title IV-A of the Social Security Act
3. The Deficit Reduction Act of 2005
4. Part 45 of the Code of Federal Regulations
5. Nevada Revised Statutes, Chapter 422A
6. Court Ordered Actions

**TANF NEED STANDARDS
AND
PAYMENT LEVELS**



TANF NEED STANDARDS AND PAYMENT LEVELS

The need standard is a consolidated figure for a designated family size which indicates the amount of money needed for purchasing basic necessities. Nevada's need standard includes:

"Food, clothing, recreation, personal incidentals, fuel for heating, cooking and water heating, electricity for refrigeration and lights, household supplies, medical chest supplies and shelter."

Once developed, a percent of the need standard is established as the payment allowance to TANF recipients.

The Nevada AFDC need standard was developed in 1969 and modified in December 1975. Since 1975, the payment allowance has fluctuated between 70% and 100% of need.

The 1985 session of the Nevada Legislature recognized that since the standard of need was developed, there had been rapid growth in the poor population in Nevada and an increase in the need for assistance to meet basic necessities might be necessary. As a result, Senate Concurrent Resolution 45 (S.C.R. 45) was passed, which established a study committee to determine the adequacy of the need standard. The study, conducted in large part by the Welfare Division, resulted in a recommendation to increase the need standard using federal Poverty Income Guidelines less the maximum SNAP allotment (Thrifty Food Plan). The 1987 Legislature approved funding to increase the payment allowance with the provision a smaller assistance payment will be made to recipients who reside in subsidized housing.

TANF need standards increased July 1, 2004; however, the payment allowance decreased to 37.3%. There is only one standard of need for all households no matter what the composition, with the exception of non-needy relative caregiver households. For example, if an assistance unit consists of 3 children only or one adult and 2 children, the same need standard applies. (Non-needy relative caregiver households are discussed under the Temporary Assistance for Needy Families (TANF) section.)

On August 22, 1996, President Clinton signed the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. This law eliminated the AFDC program and replaced it with Temporary Assistance for Needy Families (TANF). Nevada implemented TANF beginning January 1, 1997, using AFDC criteria.

TANF NEED STANDARDS AND PAYMENT LEVELS

Number of Persons	10/1/87 Total Need	10/1/87 59% Payment	10/1/87 *SH - \$25 Payment	7/1/88 60% Payment	7/1/88 *SH - \$30 Payment
1	\$ 350	\$207	\$182	\$210	\$180
2	450	266	241	270	240
3	550	325	300	330	300
4	650	384	359	390	360
5	750	443	418	450	420
6	850	502	477	510	480
7	950	561	536	570	540
8	1,050	620	595	630	600

Number of Persons	10/1/91 Total Need	10/1/91 60% Payment	10/1/91 *SH - \$72 Payment	2/1/92 59.129% Payment	2/1/92 *SH - \$76 Payment
1	\$ 410	\$246	\$174	\$230	\$154
2	515	309	237	289	213
3	620	372	300	348	272
4	725	435	363	407	331
5	830	498	426	466	390
6	935	561	489	525	449
7	1,040	624	552	584	508
8	1,050	687	615	643	567

Number of Persons	10/1/93 Total Need	10/1/93 49.8% Payment	10/1/93 *SH - \$76 Payment
1	\$ 459	\$229	\$153
2	579	288	212
3	699	348	272
4	819	408	332
5	939	468	392
6	1,059	527	451
7	1,179	587	511
8	1,299	647	571

TANF NEED STANDARDS AND PAYMENT LEVELS

Number of Persons	7/1/96 Total Need	7/1/96 45.3% Payment	7/1/96 *SH - \$76 Payment
1	\$ 505	\$229	\$153
2	637	289	213
3	769	348	272
4	901	408	332
5	1,033	468	392
6	1,165	528	452
7	1,297	588	512
8	1,429	647	571

Number of Persons	10/1/98 Total Need	10/1/98 42.6% Payment	10/1/98 *SH - \$76 Payment
1	\$ 539	\$230	\$154
2	678	289	213
3	817	348	272
4	956	407	331
5	1,095	466	390
6	1,234	526	450
7	1,373	585	509
8	1,512	644	568

Number of Persons	7/1/99 Total Need	7/1/99 42% Payment	7/1/99 *SH - \$76 Payment
1	\$ 546	\$229	\$153
2	687	289	213
3	828	348	272
4	969	407	331
5	1,110	466	390
6	1,251	525	449
7	1,392	585	509
8	1,533	644	568

Number of Persons	7/1/00 Total Need	7/1/00 41% Payment	7/1/00 *SH - \$76 Payment
1	\$ 558	\$230	\$154
2	701	289	213
3	844	348	272
4	987	407	331
5	1,130	466	390
6	1,273	524	373
7	1,416	583	507
8	1,559	642	566

Number of Persons	7/1/01 Total Need	7/1/01 40% Payment	7/1/01 *SH - \$76 Payment
1	\$ 580	\$230	\$154
2	729	289	213
3	878	348	272
4	1,027	407	331
5	1,176	466	390
6	1,325	525	449
7	1,474	584	508
8	1,623	643	567

Number of Persons	7/1/02 Total Need	7/1/02 39% Payment	7/1/02 *SH - \$76 Payment
1	\$ 592	\$230	\$154
2	744	289	213
3	896	348	272
4	1,048	407	331
5	1,200	466	390
6	1,352	524	373
7	1,504	583	507
8	1,656	643	567

Number of Persons	7/1/04 Total Need	7/1/04 39% Payment	7/1/04 *SH - \$76 Payment
1	\$ 618	\$231	\$155
2	776	289	213
3	934	348	272
4	1,092	407	331
5	1,250	466	390
6	1,408	524	373
7	1,566	583	507
8	1,724	643	567

Number of Persons	7/1/06 Total Need	7/1/06 35% Payment	7/1/06 *SH - \$76 Payment
1	\$ 650	\$230	\$154
2	817	289	213
3	984	348	272
4	1,151	407	331
5	1,318	467	391
6	1,485	526	450
7	1,652	585	509
8	1,819	644	568

Number of Persons	7/1/08 Total Need	7/1/08 Payment	7/1/08 *SH - \$76 Payment
1	\$ 650	\$253	\$177
2	875	318	242
3	1,100	383	307
4	1,325	448	372
5	1,550	513	437
6	1,775	578	502
7	2,000	643	567
8	2,225	708	632

In 2010 neither the Need Standards nor the Payments were increased.

Number of Persons	7/1/12 Total Need	7/1/12 Payment	7/1/12 *SH - \$76 Payment
1	\$ 698	\$253	\$177
2	946	318	242
3	1,193	383	307
4	1,441	448	372
5	1,688	513	437
6	1,936	578	502
7	2,183	643	567
8	2,431	708	632

Number of Persons	7/1/14 Total Need	7/1/14 Payment	7/1/14 *SH - \$76 Payment
1	\$ 718	\$253	\$177
2	969	318	242
3	1,221	383	307
4	1,472	448	372
5	1,723	513	437
6	1,974	578	502
7	2,226	643	567
8	2,477	708	632

2014 STATE TANF PAYMENTS IN ORDER OF DOLLAR AMOUNT

RANK	STATE	TANF MAXIMUM PAYMENT THREE-PERSON HOUSEHOLD
1	Alaska	\$923
2	New York*	\$789
3	California*	\$714
4	New Hampshire	\$675
5	Wisconsin	\$653
6	Vermont	\$640
7	Massachusetts	\$633
8	Wyoming	\$616
9	Hawaii	\$610
10	Connecticut	\$576
11	Maryland	\$576
12	South Dakota	\$565
13	Rhode Island	\$554
14	Minnesota	\$532
15	Montana	\$510
16	Oregon	\$506
17	Utah	\$498
18	Michigan	\$492
19	Maine	\$485
20	Washington	\$478
21	Colorado	\$462
22	Ohio	\$458
23	Illinois	\$432
24	Kansas	\$429
25	District of Columbia	\$428
26	North Dakota	\$427

27	Iowa	\$426
28	New Jersey	\$424
29	Pennsylvania	\$403
30	Nevada	\$383
31	New Mexico	\$380
32	Nebraska	\$364
33	West Virginia	\$340
34	Delaware	\$338
35	Virginia	\$320
36	Idaho	\$309
37	Florida	\$303
38	Missouri	\$292
39	Oklahoma	\$292
40	Indiana	\$288
41	Georgia	\$280
42	Arizona	\$277
43	North Carolina	\$272
44	Texas	\$271
45	Kentucky	\$262
46	Louisiana	\$240
47	South Carolina	\$223
48	Alabama	\$215
49	Arkansas	\$204
50	Tennessee	\$185
51	Mississippi	\$170

*In states where welfare benefits vary by region or for different categories of recipients, the cash assistance benefit shown here is the one that applies to the largest number of welfare recipients in the state.

**TEMPORARY ASSISTANCE
FOR NEEDY FAMILIES
(TANF)
TWO-PARENT PROGRAM**



TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) TWO-PARENT PROGRAM

I. BACKGROUND

The Family Support Act of 1988 mandated all states implement an AFDC-UP program by October 1, 1990. Nevada's program was implemented effective October 1, 1990.

The passage of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 on August 22, 1996 eliminated the restrictive requirements for the AFDC-UP program. Nevada implemented its Temporary Assistance for Needy Families (TANF) Two-Parent program effective January 1, 1997.

II. ELIGIBILITY CRITERIA

The eligibility requirements for the NEON Two-Parent program are the same as the NEON program, with the following exception.

A. PARTICIPATION

Unless exempt, both parents must be available for NEON program participation. Once approved, at least one parent is required to participate at least 35 hours per week in a countable work activity, which includes employment, community work experience program, other work experience program or on-the-job training. If the household is receiving child care assistance the participation requirement is increased to 55 hours per week. The hours both parents participate may be combined to meet the 55-hour requirement.