

The President's Fiscal Year 2021 Budget Request

This year's budget was released on Monday, February 10, 2020. The President's fiscal year (FY) 2021 budget begins on October 1, 2020. This year's budget, titled *A Budget for America's Future*, proposes a number of human service cuts and human service funding increases. It proposes cuts in non-defense spending allocating less federal funding than was agreed to in last summer's budget cap agreement for FY 2020 and FY 2021.

Within child welfare the budget includes some significant changes to the recently-enacted Family First Prevention Services Act but at the same time continues a number of significant cuts to human services with the elimination of Social Services Block Grant (SSBG), elimination of the Community Services Block Grant in HHS, the Community Development Block Grant under the U.S. Department of Housing, and elimination of the Low-Income Home Energy Assistance Program (LIHEAP) in HHS. The education budget rolls a number of programs into broad block grants including the elimination of funding for the McKinney-Vento Homeless Children and Youth program and the 21st Century Learning Centers program. The elimination of the various block grants are justified by arguing that block grants lack outcomes and evidence.

The child welfare proposals would clarify, under the Family First Act, the relationship between all Qualified Residential Treatment Programs (QRTP) and the definition of Institutions for Mental Diseases (IMD) under the Medicaid program. Additionally the Administration would allow ACF to approve programs currently rated as evidence-based by the California Evidence-Based Clearinghouse and the HHS Home Visiting Evidence of Effectiveness Project, and better align the review process standard in the Family First Act. The Administration continues to seek a new waiver authority that would allow states to take their Title IV-E foster care funding as a block grant. This is a continuation of a proposal from the last three years.

Also within child welfare they seek an increase in mandatory funding for the Court Improvement Program (CIP) to \$60 million and seek an increase of \$40 million for the Regional Partnership Grants (RPG) bringing RPGs to \$60 million while dropping the \$20 million in discretionary funding in kinship navigator funding that has been a part of the last two budgets. They propose level funding for the Child Abuse Prevention Treatment Act (CAPTA) line items of state grants and Community-Based Child Abuse Prevention (CB-CAP) but do propose an additional \$16 million in discretionary funding for new child abuse prevention grants.

Within the various human service categories, the President's budget includes the following cuts:

- Elimination of the Social Services Block Grant—SSBG (HHS)
- Elimination of the 21st Century Afterschool Learning Centers (Education)
- Elimination of the Low-Income Home Energy Assistance Program—LIHEAP (HHS)
- Elimination of the Community Services Block Grant (HHS)
- Elimination of the Community Development Block Grant—CDBG (Housing)

- Cuts to Temporary Assistance to Needy Families (TANF) of \$1.5 billion to the base grant of \$16.5 billion and elimination of the \$608 million contingency fund (HHS)
- Cuts to the Supplemental Nutrition Assistance Program—SNAP-food stamps (Agriculture)
- Cuts to Medicaid by through waivers and other reimbursement changes

Key Children’s Programs Monitored or Followed by CWLA

Title IV-E, Social Security Act

Family First Prevention Services Act-ADMINISTRATION PROPOSAL

The Administration is proposing two changes to the Family First Prevention Services Act (FFA) PL 115-123). The first and perhaps most far-reaching would align the way child welfare programs are evaluated under the Title IV-E Services component of the FFA.

It would change the current evidence-based practice requirements of the title IV-E Prevention Services to align with standards used by the California Evidence-Based Clearinghouse for Child Welfare. Title IV-E prevention services that are rated as having promising, supported, well-supported practices by the Title IV-E Prevention Services Clearinghouse, the California Evidence-Based Clearinghouse, and the Home Visiting Evidence of Effectiveness project would be eligible for reimbursement, subject to Administration for Children and Families (ACF) review and approval. ACF will continue to administer the Title IV-E Prevention Services Clearinghouse to ensure ACF has control over the review process of which programs are eligible for federal funding is retained. Title IV-E prevention services would still be defined as time-limited, evidence-based prevention services for mental health, substance abuse, and in-home parent skill-based programs for candidates for foster care, pregnant or parenting youth in foster care, and their parents and kin caregivers.

The ACF proposal would allow tribal agencies operating under a title IV-E agreement with a state to implement the title IV-E Prevention Service program requirements that are adapted to the culture and context of tribal communities, exempting them from the requirement to use only programs rated as well-supported, supported, or promising. Currently, only tribes directly operating the title IV-E program fall under this current FFA flexibility.

These changes, if enacted by Congress, would add \$1.2 billion in spending over the projected ten years.

A second proposal that would have significant effect would be a clarification of how residential programs meeting the new Qualified Residential Treatment Program (QRTP) standards as created by the FFA would not fall under the Medicaid program’s Institute for Mental Disease (IMD) exclusion. The Administration says that this would be a joint legislative fix between CMS and ACF. In some regions of the country states have been getting mixed messages on whether or not a child welfare residential program meeting the QRTP standards might then be

classified as an IMD under Medicaid standards and laws. The IMD definition under Medicaid dates back to that health care programs inception in 1965 with a goal of limiting the use of large mental health institutions. If a QRTP is classified as an IMD under Medicaid policy, no child or youth residing in such a placement can be covered by Medicaid services either at the QRTP or off-site. Some members of Congress have been working to address this issue through guidance but this action by the Administration suggests a legislative fix is required. The budget document suggests no additional cost for this change. It would, in effect, exempt QRTPs from the IMD exclusion allowing children in foster care up to age 18 (or 21 if foster care is extended) to have Medicaid coverage in these QRTPs even if a QRTP qualifies as an IMD.

Title IV-E Foster Care Payments

As an entitlement, Title IV-E foster care funding is determined by the level of need and number of claims filed by states for reimbursement at the federal level. For 2021, the Administration projects that Title IV-E foster care maintenance and administrative costs will be at \$5.796 billion, a projected increase from the projected updated cost of \$5.569 billion in 2020. Total costs have been increasing over the past several years due to an increase in foster care placements.

This increase includes an Administration projection that if SSBG is eliminated there would be a \$19 million cost shift to foster care.

The funding, according to the budget appendix will cover an estimated 171,000 children in foster care. For federal fiscal year 2018 (last complete data), more than 437,283 children were in out-of-home (foster) care, representing the slight decrease after five years of increases in foster care placements.

According to HHS information, the average monthly number of children for whom agencies receive federal foster care payments declined from more than 300,000 in FY 1999 to fewer than 157,000 in FY 2012. Since that point it has steadily increased despite the income eligibility requirements linked to the 1996 AFDC program. According to budget documents, in 2000, 51 percent of children in foster care were covered by Title IV-E foster care funding. By 2019 this percentage decreased to 40 percent despite the five years of increases in the foster care population from 2012 to 2017. One caution is that these foster care, adoption assistance and subsidized guardianship numbers are all projected and they are all likely to be adjusted up or down over the next two years as state claims and future projections are adjusted.

Title IV-E Waiver—ADMINISTRATION PROPOSAL

For the fourth straight budget, the Administration proposes “*the Child Welfare Flexible Funding Option*,” Title IV-E agencies would be able to use Title IV-E foster care maintenance payments as a block grant. This would be similar to what some states such as Florida and some local jurisdictions such as Los Angeles County implemented starting in 2006.

There are a few new twists to what was offered last year. Similar to previous year’s proposal states would have to maintain “key protections” under titles IV-B and IV-E programs to ensure

the safety and well-being of all children. Like last year the option would be available only to states that have implemented the CCI (child care institution) restrictions or in other words implementing the requirements under the Qualified Residential Treatment Program (QRTP) standards under the Family First Act. The new Title IV-E prevention services programs would not be required to elect the “flexible funding option.”

This year’s proposal states that ACF would continue to monitor the performance of all state agencies through the Child and Family Services Reviews (CFSRs). States and title IV-E tribes electing the flexible funding option would not be subject to the title IV-E foster care eligibility reviews. According to the budget document,

“This proposal would increase the flexibility of title IV-E agencies to use funds to provide services, including those that focus on prevention and addressing the impacts of the opioid crisis through innovative and targeted services, to families struggling with addiction. The proposal would be an added source of prevention funding in addition to the prevention funds through FFPSA that are only triggered when a child becomes a candidate for foster care.”

The Administration does not address how these funds, currently used for placement costs for children and youth in foster care, will allow for the cost of continuing the care, and in some instances improving the quality of that needed foster care while also funding programs preventing future foster care placements.

States would continue to claim the entitlement reimbursement for training and systems. According to the budget

“The base allocation and growth rates for states would be determined through a standardized formula, based on historic claiming data. Because title IV-E tribes do not have a fiscal history to determine allocations in the same manner as states, ACF would establish a formula for them to receive a certain amount per child in the tribe’s caseload. ACF would provide a method for a state or title IV-E tribe to access additional funding based on certain “triggers,” if the jurisdiction could document that it experienced significant cost increases due to factors such as caseload growth, foster care provider rate increases or staff salary increases. States and title IV-E tribes could opt into the flexible funding option at the beginning of any quarter during the first year of the program and would have to continue under the flexible funding option until the end of the five-year allocation period.”

Under the previous waivers that expired on September 30, 2019, Congress was reluctant to extend the waivers because the Congressional Budget Office was not calculating an actual savings. In some of the waiver projects, there were increases in foster care numbers and there was limited information or research that has contributed to best practices. There is also limited evidence that states were using their waiver funds beyond traditional foster care related expenses and services based on recent survey by Child Trends. There is even less evidence these flexible waiver funds were used for primary prevention to target prevention of child maltreatment.

Promoting Foster Families—ADMINISTRATION PROPOSAL

Similar to last year, the budget proposes a legislative change that will promote family-based care by allowing title IV-E foster care maintenance payments for foster parent salaries for care of children with severe behavioral, physical or emotional needs. This proposal is intended to provide support to agencies to develop the types of homes necessary to provide appropriate care for children with complex medical and behavioral needs, prevent subsequent placement moves based on funding restrictions, and allow children to be placed in less restrictive and more home-like settings.

The availability of title IV-E reimbursement for therapeutic foster parent salaries is intended as an incentive for agencies to license therapeutic homes and to provide an actual payment to the provider rather than simply reimbursing the family for the costs of the child's care. The total cost for these two proposals is approximately \$356 million over ten years.

Title IV-E Adoption Assistance Payments

Title IV-E Adoption Assistance funding like foster care is based on claims filed by states for federal reimbursement. For 2021, the projected cost for Title IV-E Adoption Assistance payments and administrative costs are projected to be \$3.802 billion, an increase from the projected total of \$3.430 billion in 2020. An estimated 649,400 children will be helped by adoption assistance-related federal funding in FY 2021, which is a projected increase from last year's projection of 523,000 for the current FY 2020.

Adoption Assistance payments are designed to assist families that may need additional financial support when adopting a child who has special needs. States individually establish the definition of "special needs" children. Children considered special needs could include any child in foster care; siblings with a goal of being adopted together; older children; children who have been in care for several years; or children with disabilities or other developmental, health, or physical challenges.

When Congress tied eligibility for foster care funding to the 1996 AFDC eligibility standards, the same link between AFDC and Adoption Assistance was also created. In 2008, the passage of the Fostering Connections to Success Act (PL 110-351) created a gradual de-link of Adoption Assistance eligibility from the AFDC. Starting in fiscal year 2010, newly adopted children who were 16 or older were eligible without regard to AFDC eligibility. This has been adjusted downward each year. In 2018, all new special needs adoptions were eligible for federal support. The link to AFDC was eliminated by FY 2018 but then extended or re-established for the youngest infants and toddlers until July 1, 2024 as a partial offset of the Families First Act enacted on February 9, 2018 (PL 115-123).

Adoption Assistance includes an administrative funding match to address managing the program and training staff and adoptive parents. The number of children subsidized by this program and the level of federal reimbursement has increased significantly as permanent adoptive homes are found for more children and as eligibility has expanded.

The Administration projects that the elimination of the Social Services Block Grant will increase the Adoption assistance program costs by \$13 million.

Title IV-E Adoption and Kinship Incentives

For FY 2021, the Administration requests the total for this year's adoption incentive fund be maintained at FY 2020 funding level of \$75 million. The continued total of \$75 million will assist states in catching up on recent shortfalls. In FY 2018 Congress first increased the fund from \$39 million to \$75 million because states were falling short of being awarded what they had earned. Each year, HHS would take from the new appropriations to fully fund and make up for the previous year's shortfall. Over time the \$39 million was not even covering half of what the states had earned. Since the FY 2018 increase, states are gradually catching up. Continued funding at \$75 million should assure that in a few more years, \$75 million will cover one year's full funding.

When Congress passed the Adoption and Safe Families Act (ASFA), they created this incentive fund under Title IV-E. If states increase the number of children adopted from foster care over a previous year's high mark, they are awarded an incentive from this appropriation. Congress reauthorized the Incentive Fund as part of the Title IV-B programs on February 9, 2018 as part of the Families First Act. The latest modifications to the incentive fund that extended it to some kinship placements was enacted as part of the 2014 reauthorization. It now awards incentives based on increases in both adoptions and subsidized/kinship guardianship placements.

The next awards will cover adoptions and kinship placements that took place in FY 2018 with the dollars coming from FY 2019. Total funding awarded last year was more than \$62 million. In FY 2017 (latest data) 59,430 children were adopted from foster care and 123,437 were waiting to be adopted an increase from the 116,608 children in foster care were waiting to be adopted in 2016. The 2017 adoption numbers are the highest since before 2008 and the number waiting are the highest since 2008

The 2014 reauthorization through the Preventing Sex Trafficking and Strengthening Families Act) changed the incentive fund in several ways:

- In addition. to rewarding an increase in adoption from foster care, states are awarded based on increases in subsidized guardianships.
- The awards were adjusted in terms of categories of adoptions/guardianship placements so that \$5,000 is earned per increased adoptions; \$4,000 is earned for overall kinship placements; \$7,500 is earned per pre-adolescent (ages 9-14) adoption/guardianship placements; and \$10,000 is earned per increase in in older adoption/kinship placements (ages 14 and older).
- The awards as always are based on an increase over the previous year, but this formula is based on a rate increase instead a specific number. That is intended to allow states that have been reducing their foster care population (thus reducing the pool of children waiting for adoption) to receive an award for positive permanency policies.

- All awards for guardianships are new, as is the subcategory targeting ages 9-14. This is an attempt to place a greater focus on a population that has shown an increased presence in the waiting-to-be-adopted category.

Promoting Adoptions—ADMINISTRATION PROPOSAL

The Administration highlights its “Call to Action” in adoption. The budget sites data that the number of children adopted from foster care rose from 59,000 in FY 2017 to more than 63,000 in FY 2018. They say to sustain this momentum; they have launched this call for states and stakeholders to develop key partnerships across public and private groups, including faith-based groups, with the goal of reducing the number of children in foster care and increasing the number of children who find a forever family, through adoption or otherwise.

The Administration does not propose new funding but says that they are encouraging efforts and research to identify and address barriers to adoption. The initiatives they highlight “include family-finding programs, focusing on identifying the barriers that exist in the recruitment and development of foster and adoptive families, and the development and dissemination of court-related practice improvements addressing barriers to timely adoptions.”

Title IV-E Tribal Foster Care and Adoption Assistance

As a result of the Fostering Connections to Success Act, \$3 million is allocated each year for technical assistance to tribal governments or consortia that seek to oversee their own Title IV-E programs. Funding is mandatory and provided each year. ACF has awarded planning grants to 39 tribes since FY 2009. Seventeen tribes have been approved to operate the title IV-E program.

Title IV-E Kinship Guardianship Assistance Payments

As a state optional entitlement, states may establish a program to support kinship-guardianship placements. The Administration project that 46,300 children will be covered under this program in FY 2021 which represents an increase of approximately 8,000 children above last year’s projected increase. The cost of \$271 million in FY 2021 represents an increase of \$29 million from 2020 projected costs. As of December 2019, 38 states and territories and 14 tribes have been approved to operate Title IV-E kinship-guardianship programs. That is an increase of three in the previous year. The average monthly number of children for whom states receive guardianship assistance payments was approximately 38,000 in FY 2019.

Title IV-E John H. Chafee Foster Care Independence Program

The John H. Chafee Foster Care Independence program is set at \$143 million after last year’s increase from \$140 million to \$143 million in mandatory funds for 2020. The slight increase is a result of the Preventing Sex Trafficking and Strengthening Families Act of 2014 which had resulted in a small savings/budget score starting in 2020 as a result of other cuts and restrictions in that law.

The (Title IV-E) Independent Living program is targeted to assist youth who have not been placed in a permanent family and who are aging out of foster care. In FY 2017 (latest data) 17,147 young people exited foster care through emancipation— “aged out.” This is the lowest number since 2003 and it continues a steady decline in the number of young people that age out of care from a recent high of 29,556

The Families First Act allows states to use these funds to age 23 if that state has extended foster care to 21 an option created in the 2008 Fostering Connections to Success Act. Recent data suggest that 24 states have taken this option. The Chafee program provides a variety of services including, educational assistance, career development, vocational training, job placement, life skills training, home management, health services, substance abuse prevention, preventive health services, and for eligible youth over age 18, room and board, as long as the state limits this spending to 30 percent of the state grant for room and board.

The Family First Act amended the law to allow states to exercise an option to offer Chafee services to youth until age 23, if the state extends foster care programs up to age 21. States provide a 20 percent match to draw down funds (\$1 is matched by \$4 federal dollars).

Tribes with their own IV-E plan (17 tribes) or a title IV-E tribal/state agreement have the option to directly receive a portion of the state's Chafee grant to provide services to tribal youth. As of FY 2019, seven tribes have chosen to apply for and receive direct funding.

The Administration seeks \$43 million for Education and Training Vouchers in FY 2021. The proposed funding is the same as 2020 and the same over the past decade. Funding is authorized for a maximum of \$60 million. Unused funds by one state are redistributed. The 2018 Families First Act allows states to use these funds to age 26 instead of age 26. According to FY 2021 budget projections, this funding will provide 15,000 vouchers. Each voucher ranges from \$3479 to \$4966 per voucher.

Youth in Foster Care—ADMINISTRATION PROPOSAL

The Administration offers a number of small adjustments to independent living. They would expand the state’s use of Chafee funds for room and board beyond the current requirement to cover only youth who were in foster care at age 18. Instead a young person who had been in foster care after the age of 14 would be eligible in the future. In addition, a 14 year-old who exited care to guardianship or adoption would be eligible for Chafee funds. Current law is at 16 years of age. The proposal does not increase funding beyond the current \$143 million.

In addition, the Administration proposes a version of the Grassley-Wyden legislation, (the Increasing Opportunities for Former Foster Youth Act) that would allow for competitive grants to develop practices and research on effective programs that assist in positive outcomes for youth that age out of foster care. The Administration proposes \$12 million in funding while Grassley-Wyden bill provides \$20 million.

Title IV-B, Social Security Act

Title IV-B Part 1, Stephanie Tubbs Jones Child Welfare Services (CWS)

Title IV-B, Child Welfare Services, is funded at \$269 million—the same as 2020. The total involves maintenance of earlier cuts imposed through the sequestration process and continues cuts from the pre-sequestration levels of \$281 million in 2011. It was reauthorized in 2018 as part of the Family First Act. Since 1980 it has been authorized for up to \$325 million, which is funded through the annual appropriations process. It has never been fully funded. Each state's share is based on the state's population under age 21 as compared to other states. Funding can be used for a range of child welfare services, including prevention of child abuse, prevention of foster care placements, and early intervention. Some states may use their funds to address adoption and foster care expenses.

Child Welfare Training and Research

Housed under Title IV-B, the funding total under this category is proposed at \$21 million in FY 2021. This is an overall increase of \$3 million:

- \$7 million that has been allocated to promote research and training for the child welfare workforce. Funding helps to provide leverage to institutions of higher learning and other non-profits by supporting their on-going projects. This initiative has been in place for more than a decade.
- Child Welfare Innovation and Research of approximately \$14 million to continue funding for demonstration projects across the country to reduce foster care placements.

Title IV-B part 2, The Marylee Allen Promoting Safe and Stable Families (PSSF)

Promoting Safe and Stable Families (PSSF) is a combination of funding streams for different but related services. Like CWS, PSSF was reauthorized in 2018 as part of the Families First Act of 2018. The Families First Act of 2018 modified the previous restriction on the use of PSSF funds for reunification. The original law allowed use of reunification funds for 15 months after a child was removed from the home. The new provision starts that 15-month clock after reunification. The funding for the original PSSF program has been divided into four broad categories: family preservation, family support, family reunification, and adoption services.

In addition, a portion of PSSF funding approximately (\$30 million) is allocated for court improvement programs (CIP). These CIPs receive \$20 million in mandatory funding and in addition they receive \$9 million from the base PSSF program with 3.3 percent set-aside of any discretionary/appropriated funds now set at \$59 million. Furthermore, \$20 million is designated for competitive grants to address substance abuse (Regional Partnership Grants) while another \$20 million is set aside for workforce development. These workforce grants are allocated to states if they meet a requirement to visit children in foster care at least once a month.

In FY 2021, the President is requesting PSSF funding at the same levels for the four basic services, seeking a reduction in discretionary funding back down to \$59 million as it was in 2017

but they are requesting a significant increase in mandatory court funding of \$30 million to a total of \$60 million. In addition, they are seeking to double to increase the Regional Partnership Grants (RPGs) to \$60 million. The RPGs have had a base grant of \$20 million but in recent years an additional \$20 million was added in FY 2019 and \$10 million in 2020. This would permanently increase the total by \$40 million.

By reducing the discretionary funding from \$99 million to \$59 million they are dropping the designation of \$20 million for the development of kinship navigator programs as funded in 2019-20.

Title IV-A, Temporary Assistance for Needy Families (TANF), Social Security Act

The Temporary Assistance for Needy Families (TANF) five-year reauthorization ran out in FY 2010 but it is currently extended until May 2020 (June 2019). Since it expired, Congress and several Administrations have agreed to a series of short-term extensions ranging from a few months to two years at a time. Since its creation, TANF has lost more than 35 percent of its value due to inflation.

The Administration continues to propose the first cut to the base grant since it was created in 1996. In total, TANF would be cut by more than \$2 billion when all totaled. They cut \$1.7 billion but propose to add \$100 million in demonstration grants. Another cut would result from the elimination of the TANF Contingency Fund, which is now at \$608 million. The large cut of \$1.6 billion is based on reducing base funding by 10 percent. The rationale appears to be that with SSBG eliminated, and because states can transfer up to 10 percent of their TANF into SSBG, then the elimination of SSBG makes the state transfer unnecessary or unneeded.

The Administration both praises and criticizes TANF for its past success but also criticizes states for not being as vigorous in their work requirements. They outline several proposals for reform including greater accountability on how funds are now spent under the individual-entitlement-turned-into-a-block-grant. These include assuring a minimum percentage of funds spent on core services and cash assistance, tightening the state maintenance/matching requirements and changes to the work requirement targets.

Early Childhood Education and Care Care/ Child Care Development Block Grant/CCDG

Child Care Funding has three funding streams: discretionary funding, funding based on historic spending, and funding based on states matching federal funds. Discretionary funding is appropriated each year and provided to states by a population formula, while the mandatory funding is written into the TANF law and set for five or six years at a time. This mandatory funding is divided into two sets; one of which is allocated to states based on historic spending, while the second of which is provided to states only if each state provides a match in funding.

Child Care and Development Block Grant (CCDBG)

The CCDBG generally refers to all child care funding both the discretionary (appropriated) funds and the mandatory funds written into the TANF law. Both funding sources are covered by the same CCDBG regulations that were revised as a result of the 2014 CCDBG reauthorization.

The Administration budget is proposing maintaining funding increases of FY 2020 at \$5.826 billion. The funding level represents a nearly \$2.8 billion increase from 2018.

The Administration does propose a \$1 billion increase in one-time grants and an increase in the mandatory funding levels of approximately \$290 million which would require a state match.

The competitive \$1 billion in states grants would require applying states to describe how they would use the funds to meet the unique needs of providers and employers in their state. To be eligible for the grant, states would be required to establish targets for reducing unnecessary regulatory or other requirements (such as zoning) that limit the Administration argues limits the supply of care or increased cost.

The 2014 bipartisan reauthorization of the CCDBG Act added requirements for increased quality, health and safety protections and certain protections for families receiving subsidies. Due to the nature of the CCDBG, increasing quality and health and safety comes from the same funding source as supply and expanded child care eligibility. State proposals to weaken standards would fly in the face of bipartisan agreement that sought to improve the quality of child care and early childhood education by making state requirements more rigorous. The dramatic increase of \$2.8 billion over the past three budgets is the first step after the 2014 reauthorization to make improvements in quality, safety and health and supply.

Head Start

Head Start is in a similar circumstance as child care funding. The Administration proposes level funding of \$10.613 billion in 2021. Created in the 1960s, the Head Start program provides grants to local agencies with the aim of delivering comprehensive child development services to young children. Additionally, Head Start targets familial needs by supplying families with essential supports and services. Although the program focuses on preschoolers, in 1995 it expanded its focus to infants and toddlers with the creation of Early Head Start. Funding is subject to sequestration.

21st Century Learning Centers

The President proposes, for the fourth year, to eliminate the 21st Century Community Learning Centers for a total cut of \$1.2 billion. The 21st Century Learning Centers were created through the Elementary and Secondary Education Act (ESEA). These centers were established to support after-school programs and to expand coverage beyond traditional child care. Eligible programs include local educational agencies (LEAs), cities, counties, and community-based agencies. Applicants are required to plan their programs through a collaborative process that includes

parents, youth, governmental agencies, and representatives of participating schools or local educational agencies. Funding is allocated through the U.S. Department of Education.

In several budgets the Administration indicates that, “...*data strongly suggest that the 21st CCLC is not generating the benefits commensurate with an annual investment of more than \$1 billion in limited Federal education funds. Moreover, the provision of before- and after-school academic enrichment opportunities may be better supported with other Federal, State, local or private funds, including the \$15 billion Title I Grants to Local Educational Agencies program.*”

Child Care services funded under CCDBG are restricted to children to the age of 14. This program was created through and is housed in the Education Department to, in part, address school-based programs directed to older youth. It also serves as an after-school program for youth when other programs and services do not exist in a community.

Promise Neighborhoods

The Promise Neighborhoods program was created under the Obama Administration and is based on the model established by the Harlem Children’s Zone. The goal is to establish a school-based program that joins together public, private, philanthropic, and business community interests to develop a comprehensive model. Early on in a child’s life and continuing through elementary and secondary school years, programs will wrap a range of services around the prospective student and family with a goal of preparing students for success through college and later employment. The initial grants were for planning. The Administration is seeking to eliminate all funding thus cut out \$80 million provided in 2020.

Maternal and Child Health Block Grant, Title V Social Security Act

Maternal and Child Health Block Grant

Enacted in 1935 as a part of the Social Security Act, Title V provides formula funding to all states to address maternal and child health programs. The main block grant will be funded with at \$760 million which is an increase from \$687 million in current year funding. Of the total, 85 percent of funding is distributed to states, with the remaining funds reserved for national programs. States use funding for planning and allocating services to both mothers and children. States are required to work collaboratively with other organizations to conduct comprehensive needs assessments. Once needs are assessed, states must identify priorities to comprehensively address these needs and must serve as the payer of last resort for services that do not receive coverage from any other program.

Home Visitation Title V Social Security Act (MIECHV)

Created under the Affordable Care Act (ACA, PL 111-148), the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program provides funding to all states to promote the use and expansion of home visitation programs. Funding must be used for evidenced-based models with a limited amount of funding available for innovative programs that show promise. To be

eligible for funding, states are required to undergo a rigorous planning process and the home visitation programs must undergo substantial evaluation. Funding for the program is mandatory and includes scheduled increases. The program was reauthorized for five years as part of the February 9, 2018 CR (PL 115-123).

Title IXX, Medicaid

The Administration proposes cuts to Medicaid of \$920 billion through various restrictions, new requirements (such as work) and various block grant options as evidenced by their recent waiver proposal issued in the past month. The recent waiver announcement would allow states to take a portion of the Medicaid funding and allow states to receive funding as a block grant. In addition, the Administration continues to promote new work requirements which, if not met by the individual, would reduce health insurance coverage.

In recent budgets, the Administration states: *“The Budget improves consistency between work requirements in federally funded public assistance programs, including Medicaid and Temporary Assistance for Needy Families (TANF), by requiring that able-bodied, working-age individuals find employment, train for work, or volunteer (community service) in order to receive welfare benefits. This would enhance service coordination for program participants, improve the financial well-being of those receiving assistance, and ensure federally funded public assistance programs are reserved for the most vulnerable populations”*

According to the Kaiser Family Foundation’s earlier estimates based on recent state-waiver work requirements, an estimated 1.4 million to 4 million people, would lose their health care coverage. The Center on Budget Policy and Priority has estimated that the new work mandates would eliminate 1.7 million people from health care coverage per year. This year’s waiver proposal, as well as recent state-directed work requirements will likely continue to be challenged in the courts based on the belief that the Administration is overstepping its waiver authority under Medicaid.

Medicaid was created in 1965 along with Medicare. It serves the poor while Medicare provides coverage to those 65 and older. Medicaid provides health coverage to millions of low-income adults, children, pregnant women, elderly adults, and people with disabilities. It is also the biggest funder of long-term care coverage available through the federal government including those who are covered by Medicare.

Medicaid is administered by states and is matched by the federal government with at least half the health costs paid for by the federal government with some state getting as much as 75 percent of their costs covered by the federal government. More than 69 million people are covered by Medicaid. Nearly 49 million children, combined, are covered by Medicaid or the Children’s Health Insurance Program (CHIP).

Medicaid helps state and local agencies get treatment to children in foster family homes, children with special needs in residential treatment, children who move from foster care to guardianship, and those with special needs adopted from foster care. Medicaid allows for important therapeutic case management and therapeutic treatment; colocation of health experts in child welfare offices;

services and treatment for children in foster care with multiple complex needs; and assistance for their parents, which helps shorten their stays in foster care and reunite families.

Medicaid is also critical to expanded access to substance use treatment. Access to such treatment can be a major factor in child welfare, treatment for parents is critical. According to the National Center on Behavioral Health, many states with the highest opioid overdose death rates have used Medicaid to expand access to medication-assisted treatment. This includes 49.5 percent of medication-assisted treatment in Ohio, 44.7 percent in West Virginia, 44 percent in Kentucky, 34.2 percent in Alaska, and 29 percent in Pennsylvania.

Title XX, the Social Services Block Grant (SSBG), Social Security Act

The President's budget again proposes elimination of the Social Services Block Grant (SSBG), eliminating the \$1.7 billion entitlement fund to states. SSBG is currently providing slightly less than the \$1.7 billion because it is cut by the across-the-board sequestration cuts. They leave \$85 million a year for health-related projects which was added on as a separate fund under SSBG resulting from the ACA. The Administration proposes eliminating both programs.

They propose to keep in place the SSBG law to allow the use of the block grant for emergencies and disasters.

The rationale they state is the same rational as past budget justification (2019):

“The Budget proposes to eliminate the Social Services Block Grant (SSBG) for a savings of \$1.7 billion in FY 2019 and \$17 billion over ten years. The Social Services Block Grant provides funding that is duplicative of resources provided through other federal programs and has not demonstrated its effectiveness in reducing dependency on welfare or supporting self-sufficiency...

The Budget proposes to eliminate the Social Services Block Grant (SSBG) because it lacks strong performance measures, is not well targeted, and is not a core function of the Federal Government. States do not have to demonstrate that they are using funds effectively to continue receiving funding. In addition, SSBG funds services that are also funded through other Federal programs, such as early childhood education services funded through Head Start and child welfare services funded by Title IV-E programs.”

It should be noted that SSBG provides 11 percent of federal child welfare spending in the Child Trends Survey of states. At the same time, TANF provided 22 percent of federal child welfare spending, according to the same survey. As a result, a full 33 percent of federal child welfare spending would be severely cut or eliminated. In fact, the budget explanation indicates that since they will eliminate SSBG, the ten percent that is transferred from TANF to SSBG is the rationale for the ten-percent cut to TANF.

A state specific example of how significant SSBG and TANF are to child welfare is the state of Florida. According to a recent Child Trends survey, in 2016 the state of Florida had a statewide waiver of Title IV-E Foster Care funding. In that year, the Title IV-E waiver provided Florida

with \$176 million while TANF provided \$188 million and SSBG provided \$162 million of the state's total federal child welfare spending. The Administration budget would eliminate the SSBG funding and reduce TANF by approximately 10 percent.

SSBG is a federal block grant and is an entitlement to the states. Converted into a block grant from an entitlement structure under President Ronald Reagan, SSBG is generally the biggest federal source of funds of Child Protective Services (CPS). Some funding for some states is funding transferred from the TANF block grant but even without those additional dollars SSBG still represents the biggest federal funding source of CPS.

Almost all of the states will spend some portion of SSBG on protective services, foster care services, adoption services, services for displaced youth and other child welfare related services each year. However, it can vary from year to year. SSBG funds can be spent on more than 29 categories of services that range from elderly services (e.g., home delivered meals) to children's services (e.g., child protection or child care) to disability services (e.g., to transportation or home chore services). States determine eligibility standards and can move dollars from year to year to address their most pressing needs.

SSBG is also vital to other human services, some of which impact on child well-being including the funding that is dedicated to addressing adult protective services such as domestic violence prevention. In 2014, 37 states utilized funds in this way, with states such as New York and Texas investing significant funds (\$66 million and \$39 million respectively); 21 states use SSBG to fund special services for the disabled, 17 provide services to youth at risk, and 16 strengthen their home-delivered meals programs by using SSBG.

The rationale for eliminating SSBG is that it is a block grant with too much flexibility and not enough accountability. That was the budgetary arrangement that President Reagan and the Congress struck in 1981—less accountability and more flexibility in exchange for eliminating the entitlement nature of the Title.

Title XXI, Children's Health Insurance Program (CHIP)

The Children's Health Insurance Program (CHIP) has had a significant impact on reducing the number of uninsured children. Approximately 9.8 million children are covered through CHIP, with additional children getting covered through Medicaid as a result of CHIP outreach efforts.

The Balanced Budget Act of 1997 established the Children's Health Insurance Program (CHIP) under title XXI of the Social Security Act. Title XXI provides Federal matching funds to States to enable them to extend coverage to uninsured children from low-income families. States are able to use title XXI funds for obtaining health benefit coverage for uninsured children through a separate CHIP program, a CHIP Medicaid expansion program, or a combination of both. The Children's Health Insurance Program was reauthorized as part the Bipartisan Budget Act (PL 115-123) for ten years.

The Child Abuse Prevention and Treatment Act

The Administration proposes the same level of funding for the two CAPTA-related grants for FY 2021 with an increase in one of the grants. State Grants would be funded at \$90 million, Community-Based Grants to Prevent Child Abuse and Neglect would be funded at \$55 million, and CAPTA Discretionary Grants would be funded be increased by \$16 million to \$51 million. The Administration proposes to use the new \$16 million.

The Administration proposes to use the \$16 million for demonstration projects to *“test the effectiveness of a multi-system approach to strengthen family capacity and to prevent child abuse and neglect before it occurs. Under a multi-system approach, partnerships – of public and private agencies, parents, community members, and others – will further develop centers that co-locate services to address risk factors for child maltreatment.”*

The administration would use some portion to expand evidence-based programs and to ensure that lessons learned are adopted by communities across the country to improve the investigation of child abuse and train child protective service workers.

In 2018 and 2019 as part of the budget agreement and opioids-related legislation CAPTA state grants were increased by \$60 million bringing it to its historic high of \$85 million. The CAPTA law was further amended to have a more explicit directive to states in implementing “plans of safe care.” These plans build on past legislative language that direct states to have a plan of safe care for infants born exposed to substances. Last year advocates successfully worked toward an additional increase of \$5 million. The total of \$90 million for state grants under CAPTA is more than triple funding level in 2017.

The Child Abuse Prevention and Treatment Act (CAPTA), first authorized in 1974 (P.L. 93-247), is the only federal legislation exclusively dedicated to the prevention, assessment, identification, and treatment of child abuse and neglect. It is a continuum of child maltreatment services and supports. The three main funding streams from CAPTA are State Grants, Discretionary Grants for research and demonstration projects, and Community Based Grants to Prevent Child Abuse and Neglect. The State Grants aim to help states improve their CPS systems and develop innovative approaches. To qualify for these grants, states must meet eligibility requirements such as having a child protection system in place. Additionally, states must enact laws preserving victim confidentiality, appoint Guardians Ad Litem, and establish citizen review panels.

CAPTA discretionary funds support state efforts to improve their practices in preventing and treating child abuse and neglect. Funds support program development, research, training, technical assistance, and the collection and dissemination of data to advance the prevention and treatment of child abuse and neglect. These funds also support the National Child Abuse and Neglect Data System, the only federal data collection effort to annually determine the scope of child maltreatment. Funding also supports the National Office of Child Abuse and Neglect, the National Resource Center on Child Maltreatment, and the National Clearinghouse on Child Abuse and Neglect.

Community-Based Child Abuse Prevention

The Community-Based Child Abuse Prevention (CB-CAP), Title II of CAPTA, grants support state efforts to develop, operate, and expand a network of community-based, prevention-focused family support programs that coordinate resources among a range of existing public and private organizations. Goals include support families to prevent child abuse and neglect; develop a continuum of preventive services through state and community-based nongovernmental organizations; and publicize activities focusing on the healthy and positive development of families and the prevention of child abuse and neglect. Voluntary home visiting programs are a core local service, as are programs serving families that include children or parents with disabilities. Funding is allocated to states by a formula based on the number of children in a state's population.

Seventy percent of a state's grant amount is calculated based on the number of children under 18 in the state, with a minimum award of \$200,000 per state. The remaining funds are awarded to states based on the amount leveraged by the state from private, state, or other non-federal sources. The Administration proposes the same funding level of \$55.6 million as set in FY 2020. In FY 2020 advocates successfully lobbied for an increase of more than \$15 million from its old level of \$40 million. It was the first increase for CB-CAP since FY 2005.

Adoption Opportunities

The Adoption Opportunities program was established in 1978 (P.L. 95-266) and was most recently reauthorized in 2003 (P.L.108-36, with CAPTA) and requires a reauthorization most likely as part of CAPTA. In 2011, the Adoption Opportunities program increased from \$26 to \$39 million when the Adoption Awareness Program (\$12 million) was eliminated as a standalone program. The Adoption Awareness Program was ultimately combined with Adoption Opportunities because of their shared mission.

Funding provided for Adoption Opportunities is administered by HHS and is distributed through competitive grants and contracts. The program provides grants to address post-adoption services, the recruitment of minority families and the adoption of older children. Programs such as AdoptUSKids are a national example of some of the programs funded through Adoption Opportunities.

In 2020, Adoption Opportunities was increased by \$3 million to \$42 million and the Administration is seeking the same level of funding in FY 2021.

Non-CAPTA, Child and Youth Protection, Child Abuse Prevention and Support

Court Appointed Special Advocates (CASAs)

The Administration proposes level funding for the Court Appointed Special Advocates (CASA). The funding is found in the Department of Justice. As has been the case in recent budgets, the Administration is proposing to fund CASAs at a lower level with FY 2021 at \$9 million a further cut from the 2020 level of \$11 million.

CASAs are trained volunteer adults who are appointed by the courts as officers of the courts to assist abused and neglected children. Their responsibility is to make recommendations to the judge about what is in the best interest of the child.

Consolidated Runaway and Homeless Youth Programs

This program is comprised of two: The Basic Center Program and the Transitional Living Program. The Basic Center program funds community-based programs that provide crisis intervention, temporary shelter counseling and family reunification. Centers will provide up to 21 days of shelter for a maximum of 20 youth. Funds are distributed to states by formula. The Transitional Living Program provides similar grants for youth age 16 to 22 that are living in adult-supervised group homes. Funding lasts up to 18 months. These are youth who cannot live safely at home.

Under the Administration request funding at the same level as FY 2020 at \$113.7 million (\$62 million for the Basic Centers, \$51 million for Transitional Living). Last year Congress provided an increase to the \$113 million level from \$110 million. The Administration indicates there are 4.2 million youth and young adults ages 13 to 25 who experience homelessness over a 12-month period.

McKinney-Vento Homeless Children and Youth

Funding for this program helps children and youth who are homeless but attending school through the use of school-based advocates and services. Along with these funds, states are to meet specified safeguards and requirements, and services including having a homeless liaison designated in each school district and a prohibition against segregating homeless students.

As the number of children attending school while living in homeless conditions with and without families has seen increases, Congress has responded although the need is still underfunded. In recent years Congress has increased support of the program with a series of increases going from \$77 million in 2017 to \$93 million in FY 2019 to \$101 million in FY 2020.

The Administration proposes \$0 in FY 2021 with funding rolled together with several other education programs into a new block grant.

Individuals with Disabilities Education Act: Infants and Toddlers (IDEA Part C)

The President is requesting level funding of \$477 million for FY 2021. Last year the Congress increased the FY 2019 level from \$470 million to \$477 million.

IDEA Part C provides formula grants to all states to help create systems of coordinated, comprehensive, multidisciplinary, interagency programs that will provide early intervention to children with disabilities, aged birth through two. The targeted population includes families with infants and toddlers with disabilities that are experiencing developmental delays in one or more areas, including cognitive development, physical development, communication development, socio-emotional development, or adaptive development. The intervention may also include

children who have a diagnosed physical or mental condition that has a high probability of resulting in developmental delay. States have the discretion to provide services to infants and toddlers who are at risk of having substantial developmental delays if they do not receive appropriate early intervention services.

Juvenile Justice

The Juvenile Justice and Delinquency Prevention Act (JJDP), first enacted in 1974 (PL 93-415) provides critical federal funding to states to comply with a set of core requirements designed to minimize the detention and incarceration of young people in juvenile and adult facilities, to protect youth in the system, to prevent juvenile crimes and to promote public safety.

In 2018, Congress passed the Juvenile Justice Reform Act, which reauthorized the Juvenile Justice and Delinquency Prevention Act (JJDP) for the first time in sixteen years. The bill authorizes a total of \$176 million every year for fiscal years 2019-2023 for the Department of Justice to operate programs under the Act. The FY 2021 budget is below authorized and appropriated levels.

The Administration proposes \$227.5 million for state and local juvenile justice programs, including programs aimed at delinquency prevention, intervention, and making improvements to the juvenile justice system. Title II State Formula Grants would be funded at \$58 million, Title V Local Delinquency Prevention would be funded at \$17 million, Youth Mentoring would be funded at \$43 million, Child Abuse Training Programs would be funded at \$2 million, and Victims of Child Abuse \$20 million.

JJDP Title II State Formula Grants programs supports efforts to develop and implement comprehensive state juvenile justice for state, local, and tribes.

Youth Mentoring programs supports faith and community-based, nonprofit, and for-profit organizations develop and implement innovative mentoring strategies and programs for youth involved in justice, reentry, and foster care system.

JJDP Title V delinquency prevention grants provide resources to local government for a broad range of delinquency prevention programs and activities to benefit youth who are at risk of having contact with the juvenile justice system, funded at \$17 million in FY2019. Investments in juvenile justice delinquency prevention programs are associated with improved public safety and better life outcomes for youth. Included in Title V is funding for gang and youth violence prevention program that has not been part of the juvenile justice budget in recent years. This program would be funded at \$5 million and would provide support for multi-strategic, coordinated approaches to gang prevention and reentry initiatives in targeted communities. In addition, \$2 million will support programs focusing on girls in the juvenile justice system.

Victims of Child Abuse

The Administration's Department of Justice budget also includes a continued funding for the Victims of Child Abuse program at \$20 million, which is below the \$27 million for FY 2020.

Currently the funds help to maintain over 750 Children's Advocacy Centers across the country. The centers goals are to work with professionals from law enforcement to child protection agencies to ensure that investigations of abuse both physical and sexual are conducted in a way that does not further victimize the child. The National Children's Alliance indicates that more than 286,000 children were helped in 2012 and that the Centers provided child sexual abuse prevention training to approximately 500,000 people, including some school personal. The recent child sexual abuse prosecutions involving a former Penn State coach and USA Gymnastics doctor Larry Nassar suggested a lack of basic training of state-mandated child abuse and neglect reporters.

--Preliminary review