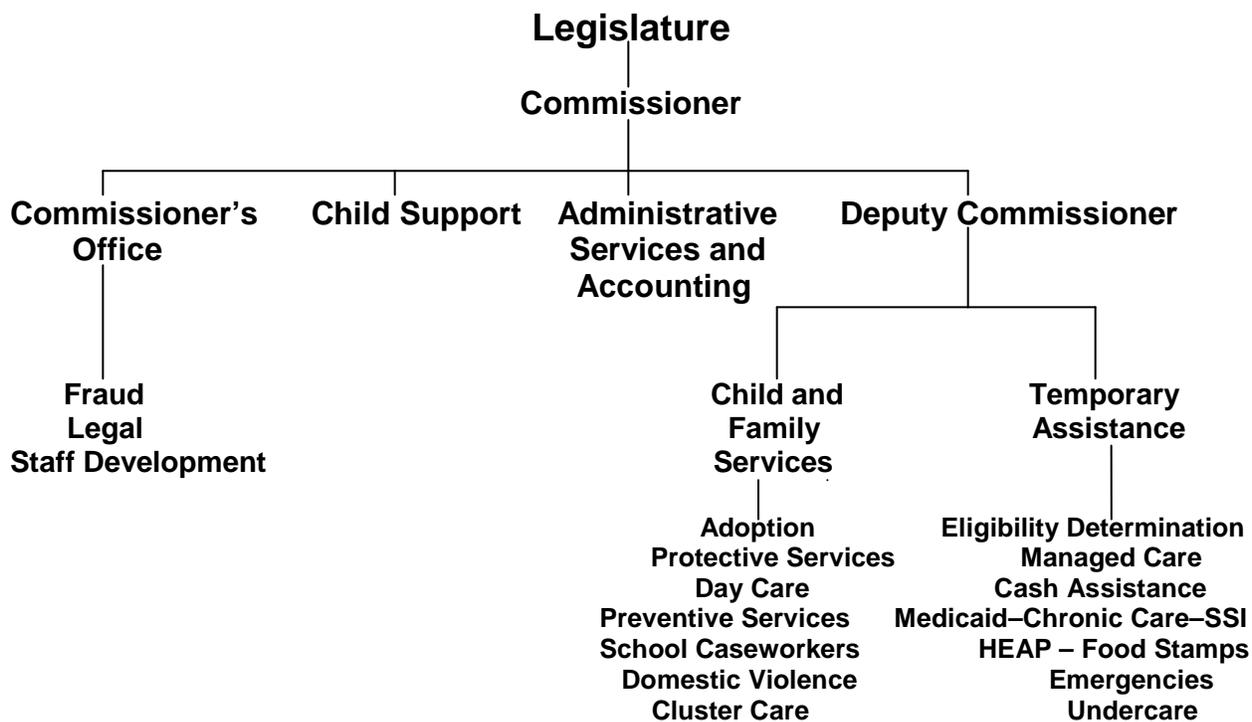




County of Orleans
Department of Social Services
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THOMAS D. KURYLA
Commissioner

2013 Program Budget
Orleans County
Department of Social Services

Organizational Chart



Department Function:

The Orleans County Department of Social Services provides a wide variety of human services and financial assistance to assist families and individuals to achieve self-sufficiency and strengthen family life. There are approximately 85 employees in the department. State and federal laws mandate all of our programs and services.

Department of Social Services

Framework

Mission

Our mission is to provide quality services by creating an environment where employees, consumers, and other citizens can interact to motivate individuals to achieve self-sufficiency and strengthen family live.

We recognize the worth of each individual and commit to a work culture based on the dedication, creativity, and talents of our employees.

Purpose

Our purpose is to assist needy individuals in caring for themselves and their families with the best level of assistance and government intervention possible.

All of the programs are state administered, but locally operated. We have three separate state oversight agencies: the Office of Temporary and Disability Assistance (OTDA), the Office of Children and Family Services (OCFS), and the Department of Health (DOH).

Notable Accomplishments in 2012

Our fraud investigator has exhibited consistent progress over the last two years regarding cost avoidance and recoveries, resulting in sizeable savings for Orleans County taxpayers.

	<u>Jan.-Dec.,2010</u>	<u>Jan.-Dec.,2011</u>	<u>Jan-June 2011</u>	<u>Jan- June 2012</u>
<u>Recovery:</u>	\$40,417	\$75,894	\$34,571	\$41,172
<u>Cost Avoidance:</u>	\$1,216,092	\$1,423,272	\$675,888	\$723,084

The above information represents a consistent improvement in communication between our fraud investigator and the Temporary Assistance Department examiners, resulting in an ever increasing amount of Front End Detection Service (FEDS) referrals.

The Child Protective Services staff is consistently ranked in the top 10% of counties in New York State. Over the past twelve months, overdue investigations have averaged approximately 5% - 11%, which is substantially lower than the median of 12% - 17%. We have also had very good success in submitting timely Safety Assessments, averaging between 80% and 95% within the seven-day requirement. The above two statistics represent the ability of our CPS workers to keep children and families safe in Orleans County.

The Preventive Services Unit received approximately 88 referrals in the past 12 months, working with 144 children. Because of their efforts the staff prevents placements of youth into the foster care system, and keep families together by providing services on a daily basis.

During 2012 the Adult Services staff has received numerous daily referrals. We continue to provide excellent services to clients on a daily basis, especially in the cases of guardianship and representative payee.

With the cooperation and assistance of the safety officer, Building and Grounds, G4S, and the personnel officer, an upgrade and several improvements in our Building Security Policy was developed. Staff training for 2 days was also completed so that familiarity with procedures was completed. Several practice drills were utilized regarding both evacuation and lockdown.

Our Day Care Unit continues to adapt very well with the new Child Care Time and Attendance System (CCTA). This was mandated by the state in 2011 and monitors child care hours and payments to local child care providers. It has improved the recruitment and retention of child care providers in Orleans County, as well as increasing fiscal accountability and tracking on a monthly basis. It has also lessened the burden of manual processes on both staff and child care providers. Although this was a monumental change for our staff on its inception, they have more than adapted and become proficient in using the entire system.

The Fraud Unit will (as a result of investigations) increase the amount of recovery by 15% over their estimated 2012 total. Also, they will strive to increase the Front End Detection System (FEDS) cost avoidance by 20% over the 2012 totals. These accomplishments will continue to lower the incidents of welfare fraud in Orleans County as well as saving taxpayer dollars in the meantime.

Our work participation rate for the Family Assistance Program averaged approximately 25% for the year. We have discussed several ways for us to successfully engage our clients in achieving the goal of 50% set for us by New York State. We consistently rank among the top ten performing counties in this category. However, we will continue to improve this statistic until we achieve the desired 50% or higher.

DSS has very strong collaborative relationships with the other county departments and agencies including Probation, (joint state award in 2011), Job Development, Mental Health, Public Health, Nursing Home, and public school systems. This constant communication has served the clients, as well as, the community, in a much more thorough and professional manner. For example, the DSS Advisory Council has proven to be an excellent mechanism for collaboration with most community agencies; it also reinforces strong working relationships.

The Director of Administrative Services has developed up-to-date spreadsheets, which has drastically improved our ability to predict and evaluate our financial condition. We also have the ability to model various financial scenarios, which is very helpful when reacting to changes in funding/reimbursement.

Key 2013 Goals

Our Family Assistance and Employment Program staff will work together and concentrate on participating clients to increase the TANF recipient work participation rate toward the 50% goal for all families, while also working to reduce the current number of public assistance cases.

The Foster Care Unit will lower our total foster care children below 20 children through more intense Preventive Services and collaboration with the agencies within Orleans County. Also, the Preventive Services Unit will continue their progress in preventing out of home placement in at least 90% of the cases for which they provide preventive services during 2013.

The Child Protective Services Unit will complete 95% of all 7-day safety assessments within that timeframe. Also, they will complete 90% of all CPS investigations within the 60-day limit for submission and approval. The average caseload size per worker will be within the recommended (15) maximum throughout 2013.

The Adult Services Unit will complete 95% of their PSA investigations with the 60-day timeframe.

Safety and security practices will be evaluated and revisited and staff training conducted as significant staff turnover has occurred in the last 18 months. This will include a review of both field and office practices with special attention to the already existing evacuation and lockdown procedures in the event of a major building incident.

In the last 20 months we have, through consolidation or abolishment, trimmed our department by 6 positions. This has resulted in more staff efficiency and increased production. We will continue to monitor staff production so that future vacancies/refills are evaluated for necessity.

Children, Family, and Adult Services

DEPARTMENT PURPOSE

The department provides a variety of services, which focuses on improving individual and family functioning as well as helping neglected, abused or delinquent children. The main principle is to provide care, assistance, and intervention in the least restrictive ways. We provide various services directed toward families and children including child protective, foster and cluster care, adoption, preventive, types of child day care, and several institutional programs. Also, substantial numbers of adults in our community require specialized care and protection. We are also expected with providing protective services to individuals over the age of 18. Caseworkers also perform case management for Medicaid supported home care, monitored recently released adults, and provide various preventive services.

Performance Indicators

	<u>2010</u>	<u>2011</u>	<u>2012(Est)</u>
<u>Child Protective Reports</u>	689	674	680
<u>Preventive Services Caseload</u>	110	133	140
<u>Adult Protective Investigations</u>	25	32	40
<u>Long-term Managed Care Caseload</u>	44	55	60
<u>Adult Preventive Caseload</u>	15	17	20

Temporary Assistance

DEPARTMENT PURPOSE

The Orleans County Temporary Assistance Unit determines eligibility of applicants and maintains the cases for recipients of the work support programs of Cash Assistance, SNAP (Supplemental Nutrition Assistance Program formerly known as 'Food Stamps'), Medicaid and HEAP. Directives and oversight are provided by the Department of Health and the Office of Temporary and Disability Assistance. The objective of these work support programs is to enable families to become self-sufficient. This requires collaboration amongst various other county agencies including Job Development, Mental Health and GCASA, whose expertise is relied upon in assisting recipients to overcome barriers to self-sufficiency. Eligibility requirements vary from program to program.

Applicants for Cash Assistance are sent to Orleans County Job Development, where staff assess the skill levels of recipients and funnels them into work activities or skill development programs provided by Orleans-Niagara BOCES. Some applicants may be determined work exempt for reasons such as primary caregiver of a household member, substance abuse issues, in which case they must comply with GCASA recommendations to remain eligible or medical reasons. Should an applicant be deemed unable to work due to medical reasons, the Department makes a referral for them to Office for the Aging who assists in submitting an application to Social Security.

The Department also provides one-time only payments to forestall evictions and utility shut-offs. Under certain situations property liens or repayment agreements can be put in place to recover such expenditures. DSS also covers the cost of indigent burials, shelter costs for victims of Domestic Violence, and temporary housing expenses for homeless singles and families. Homeless individuals placed on an emergency basis in temporary housing are required to sign a statement of responsibility for damage to the domicile. They are also required to report daily to the Department and detail actions they have taken toward location of more permanent housing.

The Temporary Assistance unit also determines eligibility for the Supplemental Nutrition Assistance Program (SNAP). Applications for SNAP are submitted in person, by mail or via myBenefits, the NYS internet site. The requirement for a face-to-face interview has been phased out; however a phone interview remains an eligibility requirement. All SNAP applications require immediate attention as a determination for emergency food stamps eligibility must be made within 5 days.

The Home Energy Assistance Program (HEAP) is administered by the Temporary Assistance Unit. SNAP and Cash Assistance recipients are categorically eligible to receive the HEAP benefit so that payments are automatically issued from those cases. Subsequent emergency benefits for that population are issued separately. Office for the Aging is responsible for assisting the aged population in the application process for HEAP. First time applicants must appear for a face-to-face interview, while recipients from the previous year can apply by mail. Benefit amounts vary from year to year, based on the amounts allotted by the Federal government.

In 2011 our 3 person intake unit conducted an average of 203 face to face interviews per month for applicants of cash, emergencies, SNAP and Medicaid. Through July of 2012 the average is 160 per month. While the applications for cash assistance still number approximately 100 per month, the number of people applying for emergency shut offs after HEAP season ended was unusually low compared to typical spring months. This explains the overall decrease of 21% in average number of interviews as compared to 2011.

The Department employs one full time Fraud Investigator who is charged with many tasks. Applicants can be subject to an investigation if information garnered through application/documentation/interview seems questionable. The state and feds also provide reports periodically of recipients who appear on the rolls of a NYS correctional facility, or on the assistance rolls in another state. The Fraud Investigator is responsible to confirm the whereabouts of the recipient and pursue recovery of funds and/or legal action as appropriate. The Fraud Hotline and the examiners also contribute to a steady stream of referrals to the Fraud Investigator. In addition, the Fraud Investigator does an initial inspection of all temporary housing and also does periodic unscheduled visits to ensure that no one other than those authorized to occupy the temporary housing location are on the premises. Day care providers who are not required to be licensed (example relative caregivers) are also paid a visit by the Fraud Investigator to ensure they are actually providing day care to children as claimed by recipients.

BUDGET HIGHLIGHTS

While Cash Assistance caseload sizes increased rather significantly between July, 2009 and July 2010 (18% from 458 in 2009 to 561 in 2010) the numbers have remained relatively stable over the past two years with 572 cases open at the end of July 2012. The number of Safety Net (single individuals, childless couples, individuals who have exceeded the 60 month limit, families of individuals abusing drugs or alcohol or refusing treatment) recipients consistently outnumbers the recipients of Temporary Assistance for Needy Families.

In 2012 the basic allowance for cash assistance recipients will increase by 10% in 2012. This results in an increase of \$14/month for a single Safety Net recipient. The increase for a household of 4, the average size of families receiving cash assistance, will be \$38/month. Based on average caseload size thus far in 2012, this translates into approximate total increases of \$4,466 per month of benefits granted for the Safety Net population and \$10,070 per month of benefits granted for the TANF population.

Thus far in 2012, the number of SNAP recipients appears to have changed little from the average monthly number in 2011. However, the number of internet applications is projected to steadily rise in the coming months which, regardless of whether an increase in numbers of applicants/recipients occurs, do lead to changes in the work flow within the unit

The HEAP processing volume is somewhat stable but also unpredictable as it is very much driven by the weather. Case in point, the winter of 2011/2012, the number of applications decreased slightly for regular HEAP (approximately 3%) but significantly for emergency HEAP (44%). This was likely due to the uncommonly mild winter, which was fortunate, as the Feds, at the outset, decided to reduce benefits and shorten the application period considerably from previous years. Although 3 additional staff are added for the HEAP season, it is a challenge to meet processing deadlines as applications pour in by the dozens and phone calls from applicants with pending utility shut offs often number over a hundred per day.

Performance Indicators

	2011	2012
FA (average open cases/month)	281	265
SN (average open cases/month)	300	319
Participation Rate (all families)	25.90%	24.5% ¹
FS (average open cases/month)	2,869	2,939
MyBenefits online FS appl processed	268	196 ²
HEAP (Regular Benefits)	3,673	3,467
HEAP (Emergency Benefits)	1,804	1,000
HEAP (Furnace replace or repair)	43	33
Burials (approved applications)	44	24
DV (shelter payments)	9	9
Day care (Avg open TA and Non-TA cases/month)	119	114
Images scanned into I/EDR	602,281	461,396 ²

¹ through June

² through July

Medical Assistance

DEPARTMENT PURPOSE

This unit determines eligibility for, and maintains cases of recipients of a variety of government subsidized health insurance benefit plans, under the nameplate of 'Medicaid'. Most are familiar with the typical inpatient and outpatient medical benefits, but Medicaid also pays for Medicare Part A, B and D premiums, reimbursement to employees for their portion of employer sponsored health insurance policies, family planning, and transportation costs to medical appointments.

Orleans County opted to become a mandatory Managed Care county many years ago. This means that, with a few exceptions, most Medicaid eligible recipients are enrolled in one of the participating HMO type plans (Fidelis, Excellus, HealthyNow,NY). The plans charge Medicaid a set premium amount per individual each month and the medical providers then bill the plans directly. At present, the majority of applications for Medicaid are submitted by Facilitated Enrollers (FEs) employed by the plans or located at health clinics. Applications can also be submitted directly to the district by mail or in person. The requirement for a face-to-face interview was eliminated some time ago. The AccessNY (medicaid) application has recently been updated so that required supporting documentation is clearly specified. Often the eligibility determination can be made without any direct contact with the applicant. Applications submitted by self-employed persons are reviewed by staff from the Bonadio accounting firm to ensure that income disclosures are accurately portrayed. See below for current rates charged by managed care plans:

Plan Name	TANF/SN Children	TANF/SN Adult	SSI Adult and Children	Maternity Kick Payment*	Newborn Kick Payment*
Excellus	\$146.83	\$402.07	\$776.59	\$6,532.36	\$3,263.63
HealthyNow	\$153.66	\$420.27	\$908.99	\$6,532.36	\$3,263.63
Fidelis	\$139.36	\$381.07	\$780.36	\$6,532.36	\$3,263.63

* Kick payments are additional payments made to the plans by Medicaid following the birth of the child for both mother and newborn.

The Department determines Medicaid eligibility for residents of the three skilled nursing facilities within Orleans County, as well as the occasional resident who is placed in an out of county nursing home for various reasons. There are currently 238 active cases for this population with 19 additional cases pending determination. All but \$50 of a resident's available income, such as pension or social security income must be paid toward their care at the skilled nursing facility and Medicaid covers the remainder.

The Department also administers the Long Term Home Health Care Program which allows individuals who meet the medical criteria for skilled nursing care to remain in their homes. Our case manager works in conjunction with medical providers and Medina Long Term Care home health aides to provide services to over 50 individuals. Medicaid covers the cost of their care.

BUDGET HIGHLIGHTS

The number of Medicaid cases increased by 9% from July 2009 to 2010, 4% from July 2010 to July 2011 and 4.5% between July 2011 and July 2012.

The county's share to fund Medicaid accounts for the largest single expenditure in the DSS budget. Although there is a cap instituted on the amount the county must contribute to these costs, each year the expenditures increase by 3% over the previous year. Since the county contribution is a set amount, variance in numbers of recipients from year to year has little impact on cost, but does affect the work processes.

Performance Indicators

	2011	2012 ¹
MA (average open cases/month)	4,935	5,130
Family Health Plus ²	604	650
Personal Care Aide Hours	1,384	708
Consumer Directed Care Hours	22,507	7,260
MA Recoveries (\$)	387,172	190,001
Managed Care Enrollments (avg/mo)	5,580	5,843

¹ through July

² included in total MA cases

CHILD SUPPORT ENFORCEMENT AND COLLECTION

DEPARTMENT PURPOSE

The Child Support Unit has the responsibility for making sure that non-custodial parents contribute to the support of their dependent children up to the age of 21. This helps with the ultimate goal of Temporary Assistance by helping the custodial parents become self-sufficient, in part through the establishment and collection of child support orders. The first step is in determining if paternity has been established and if not, work with the parents and if necessary the court to establish it. Next, we help the custodial parent establish a child support order through the Court system pursuant to the Child Support Standards Act (CSSA) guidelines. In Non-TANF cases, we then collect the support and distribute it to the family. For TANF cases, we collect the support and distribute a portion of it to the family, and the remainder helps to offset the costs of the public assistance grant. All orders must include a provision for medical insurance if it is available at a reasonable cost as determined by the court. This helps limit the costs that are expended by the Medicaid program. For children that are in Foster Care or Institutionalized, the support is collected to help offset the cost of care for them. Our accounting portion of the unit handles the collections, disbursements and adjustments to the accounts based on the Court Orders.

BUDGET HIGHLIGHTS

At the current pace for this year, our total collections are projected to have increased by 2.6% over last year. Considering our economic times, that is quite an accomplishment. Our average monthly caseloads for Family Assistance cases have dropped slightly for this year, however the non-Family Assistance cases have increased slightly more, netting a slight increase in total caseload. This helps to show that in part with the establishment and enforcement of support orders, the number of children that must rely on public assistance is also decreasing. Our statistics show that we are well above the state average in all areas and we are continuing to surpass all federal performance standards. Child Support Enforcement is one part of successful welfare reform. It helps to be sure that non-custodial parents are held accountable to support their children which in turn limits the amount of public assistance is required to meet their needs. Establishing and enforcing health insurance provisions of the child support order helps to limit the amount of Medicaid, including Family Health Plus that needs to be expended.

Performance Indicators

	Actual 2011	To Date 30-Jun-12
FA Collections	\$ 305,917.90	\$ 139,698.32
Non-FA Collections	\$ 4,476,962.33	\$ 2,325,102.32
Title IV-E and Others	\$ 123,580.30	\$ 60,282.10
Medical Reimbursement	\$ 49,702.01	\$ 17,011.41
Total Collections	\$ 4,956,162.54	\$ 2,542,094.15
FA (+FC) Average Month Caseload	376	370
Non-FA Average Month Caseload	1920	1937
New Paternities Established	53	26
New Orders Established	97	69

Statistics

	Orleans	Jun-12 Statewide
Paternity Established	96.92%	83.25%
Support Established	90.73%	80.14%
Current Support Collected	97.34%	74.94%
Arrears Collected	61.01%	53.27%
Cases with Health Insurance Ordered	81.42%	60.87%

Category	2010 Actual	2011 Acutal	2012 Adopted	2013 Requested
Salary/Fringe	4,682,648	4,766,690	5,395,959	5,633,528
Equipment	16,190	21,733	35,398	9,245
Contractual	1,570,480	1,431,756	1,421,548	1,359,710
Program Expenses*	13,125,798	13,994,828	15,396,656	15,862,264
State Aid	3,237,900	2,419,054	2,437,035	2,427,486
Federal Aid	6,419,782	6,516,712	7,088,379	7,086,667
Repayments	907,508	1,100,353	1,020,990	961,035
County Share	8,829,926	10,178,888	11,703,157	12,389,559
County Share %	45.53%	50.35%	52.60%	54.19%
IGT	0	1,600,243	825,000	
FTE	91.42	87.69	86.62	86.12

*Program expenses include Daycare, Purchase of Services, Medical Assistance, MMIS (weekly shares), Family Assistance, Emergency Assistance to Families, EAF Services, Child Care, Juvenile Delinquents, State Training School, Safety Net, HEAP, and Emergency Assistance to Adults