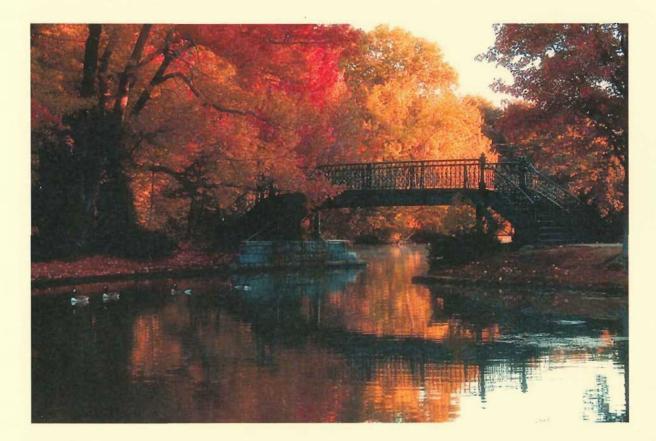
State of Rhode Island and Providence Plantations





Fiscal Year 2013

Volume II – Human Services Lincoln D. Chafee, Governor

Agency

Department Of Human Services

Agency Mission

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

Agency Description

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

Major state and federal reforms in the mid-1990s provided unprecedented flexibility in how the State could utilize funds to accomplish its goals. Rhode Island's Family Independence Act (FIA) represented the State's first welfare reform program. FIA was crafted in response to federal welfare reform legislation which is called Temporary Assistance for Needy Families (TANF). TANF replaced the former Aid to Families with Dependent Children (AFDC) and represented a major departure from entitlement programs and lifetime benefits for families. In lieu of entitlements, TANF provided states with a block grant program with capped funding; the significance of this was that the State was able to pass its own welfare reform legislation and to design a broad variety of policies and services to assist those families transitioning from cash assistance to employment. The successor program to the Family Independence Program is known as the Rhode Island Works (RIW) program, enacted by the General Assembly in 2008.

An additional priority of DHS is to provide assistance to persons with disabilities seeking to achieve economic independence and integration with society, through its Office of Rehabilitation Services.

Statutory History

Title 40 Chapter 1 and Title 42 Chapter 12 of the Rhode Island General Laws established DHS.

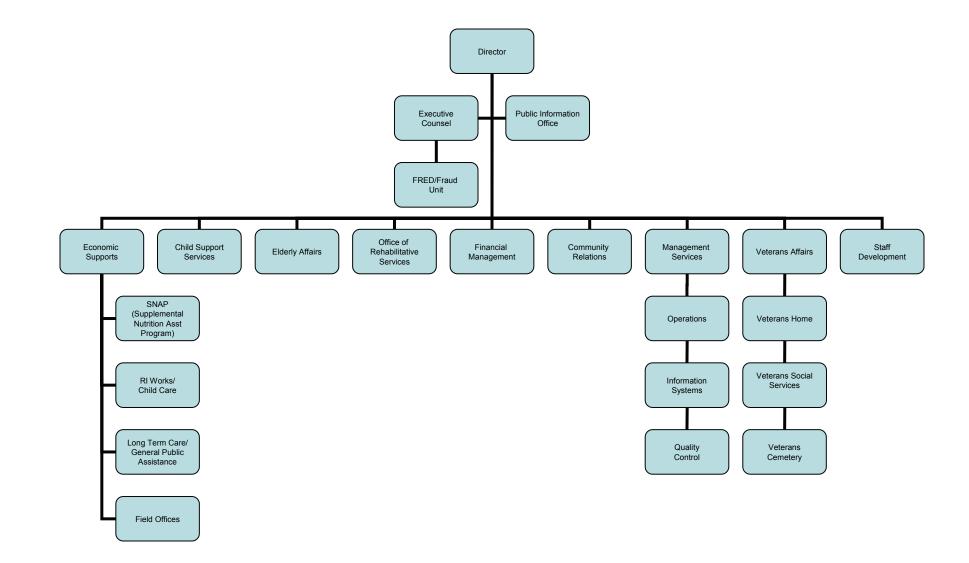
Budget

Department Of Human Services

	FY 2010 Audited		FY 2012 Enacted	FY 2012 Revised	FY 2013 Recommend
Expenditures By Program					
Central Management	13,667,236	12,992,097	11,547,906	11,503,966	6 11,056,978
Child Support Enforcement	7,180,660	9,069,516	8,355,622	8,228,17	5 8,531,055
Individual and Family Support	71,573,406	98,187,986	127,885,859	128,096,078	3 151,488,135
Veterans' Affairs	25,173,917	27,038,838	28,216,627	30,043,996	28,665,373
Health Care Quality, Financing & Purchasing	60,738,411	64,118,781	59,373,254	80,721,646	5 17,838,116
Medical Benefits	1,510,979,689	1,583,439,772	1,662,194,277	1,641,112,103	- 3
Supplemental Security Income Program	22,249,416	20,936,170	18,000,600	18,777,600	18,622,000
Rhode Island Works	90,618,731	87,700,429	86,140,550	87,894,897	90,209,050
State Funded Programs	228,589,296	267,240,201	301,710,437	301,746,022	301,746,022
Elderly Affairs	25,226,866	27,330,660	27,826,593	29,719,055	5 28,941,992
Total Expenditures	\$2,055,997,628	\$2,198,054,450	\$2,331,251,725	\$2,337,843,538	\$657,098,721
Expenditures By Object					
Personnel	122,064,742	134,660,423	138,405,087	138,797,614	103,401,980
Operating Supplies and Expenses	17,874,325	16,837,567	21,742,409	23,863,009	24,950,727
Assistance and Grants	1,910,188,455	2,040,363,608	2,162,421,043	2,164,136,534	521,124,672
Subtotal: Operating Expenditures	2,050,127,522	2,191,861,598	2,322,568,539	2,326,797,157	649,477,379
Capital Purchases and Equipment	1,211,180	560,141	2,856,170	4,647,460) 1,372,421
Operating Transfers	4,658,926	5,632,711	5,827,016	6,398,92	6,248,921
Total Expenditures	\$2,055,997,628	\$2,198,054,450	\$2,331,251,725	\$2,337,843,538	\$657,098,721
Expenditures By Funds					
General Revenue	661,600,662	735,671,107	893,131,302	892,604,690	99,781,727
Federal Funds	1,380,745,701	1,446,893,845	1,419,613,547	1,423,745,953	3 550,578,610
Restricted Receipts	8,898,484	10,590,911	14,089,597	17,103,71 <i>°</i>	2,349,200
Operating Transfers from Other Funds	4,609,579	4,748,054	4,417,279	4,389,184	4,389,184
Other Funds	143,202	150,533	-	-	-
Total Expenditures	\$2,055,997,628	\$2,198,054,450	\$2,331,251,725	\$2,337,843,538	\$657,098,721
FTE Authorization	919.7	1,000.2	984.2	949.2	947.7
Agency Measures					
Minorities as a Percentage of the Workforce	14.0%	16.2%	19.8%	19.8%	19.8%
Females as a Percentage of the Workforce	78.0%	80.0%	77.8%	77.8%	
Persons with Disabilities as a Percentage of the Workfor		0.3%	0.3%	0.3%	

The Agency

Department of Human Services



Department Of Human Services

Agency Summary

	FY 2	2012	F	ŕ 2013
	FTE	Cost	FTE	Cost
Distribution by Category				
Classified	945.2	52,790,782	943.7	53,618,171
Unclassified	4.0	382,854	4.0	384,357
Cost Allocation from Other Programs	95.5	4,651,634	95.5	4,696,699
Cost Allocation to other programs	(95.5)	(4,651,634)	(95.5)	(4,696,699)
Interdepartmental Transfer (DOH)	-	28,115	-	22,036
Overtime	-	5,682,554	-	4,471,911
Turnover	-	(5,611,388)	-	(5,009,460)
Total Salaries	949.2	\$53,272,917	947.7	\$53,487,015
Benefits				
Defined Contribution Plan	-	-	-	507,416
FICA	-	4,153,588	-	4,236,849
Holiday Pay	-	363,783	-	363,545
Medical	-	9,483,003	-	10,934,672
Payroll Accrual	-	-	-	297,230
Retiree Health	-	3,353,920	-	3,492,574
Retirement	-	10,954,517	-	10,531,237
Total Salaries and Benefits	949.2	\$81,581,728	947.7	\$83,850,538
Cost Per FTE Position		\$85,948		\$88,478
Statewide Benefit Assessment	-	1,787,619	-	1,863,412
Temporary and Seasonal	-	869,360	-	1,726,528

Payroll Costs	949.2	\$84,238,707	947.7	\$87,440,478
Purchased Services				
Building and Grounds Maintenance	-	430,912	-	430,947
Clerical and Temporary Services	-	2,684,591	-	2,726,791
Design and Engineering Services	-	185,000	-	85,000
Information Technology	-	6,083,046	-	6,073,718
Legal Services	-	553,351	-	435,021
Management and Consultant Services	-	39,721,869	-	1,312,245
Medical Services	-	3,063,059	-	3,060,659
Other Contract Services	-	1,529,279	-	1,529,321
Training and Educational Services	-	307,800	-	307,800

Department Of Human Services

Agency Summary

	FY 2	2012	FY 2013	
	FTE	Cost	FTE	Cost
General Revenue	432.9	51,097,785	433.3	44,257,583
Federal Funds	511.9	86,557,440	510.4	58,666,001
Restricted Receipts	4.4	1,142,389	4.0	478,396

Total All Funds

949.2 \$138,797,614 947.7 \$103,401,980

Department Of Human Services

Central Management

Program Mission

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

Program Description

Central Management supervises, coordinates, and monitors all departmental functions: to assure efficient and effective use of state and federal resources for the purpose of providing services to poor, disabled, or aged individuals and families; to assist them in reaching their highest potential for self-sufficiency; and, to support the achievement of the department's mission. Central Management, organized through the Office of the Director, provides leadership, management, strategic planning, direction, and control of departmental activities. A principal function is intergovernmental liaison with the Governor's staff, other department directors, and agency heads, federal government representatives, state and federal legislators, local welfare directors, and national and local human service professionals and organizations. The establishment and maintenance of community relations with consumers and service providers, and the provision of information to the general public, are core responsibilities of this program area

Additionally, all field operation activities are direct functions of Central Management, although the associated costs are budgeted in two programs, Individual and Family Support, and Health Care Quality, Financing and Purchasing. Central Management is responsible for the Electronic Benefits Transfer System, which electronically distributes cash assistance and food stamp benefits to clients. Other centralized functions include support for financial management, information systems, collections and fraud investigations, and contract management.

Statutory History

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

Department Of Human Services Central Management

	2010 Audited	2011 Audited	2012 Enacted	2012 Revised	2013 Recommend
Expenditures By Subprogram					
Operations	13,667,236	12,992,097	11,547,906	11,503,966	11,056,978
Total Expenditures	\$13,667,236	\$12,992,097	\$11,547,906	\$11,503,966	\$11,056,978
Expenditures By Object					
Personnel	1,798,699	2,534,212	2,215,024	2,168,699	2,217,216
Operating Supplies and Expenses	74,110	69,992	84,183	86,568	140,377
Assistance and Grants	11,787,275	10,387,893	9,243,899	9,243,899	8,694,585
Subtotal: Operating Expenditures	13,660,084	12,992,097	11,543,106	11,499,166	11,052,178
Capital Purchases and Equipment	7,152	-	4,800	4,800	4,800
Total Expenditures	\$13,667,236	\$12,992,097	\$11,547,906	\$11,503,966	\$11,056,978
Expenditures By Funds					
General Revenue	4,758,548	6,066,218	5,683,745	5,683,224	5,204,015
Federal Funds	8,108,688	6,125,879	5,364,162	5,299,679	5,333,616
Restricted Receipts	800,000	800,000	499,999	521,063	519,347
Total Expenditures	\$13,667,236	\$12,992,097	\$11,547,906	\$11,503,966	\$11,056,978

Department Of Human Services

Central Management

		FY 2012		F١	(2013
	Grade	FTE	Cost	FTE	Cost
Classified					
Associate Director Management Services	0146A	1.0	141,739	1.0	143,157
Deputy Director	01048A	1.0	125,310	1.0	130,010
Associate Director II	0144A	1.0	125,000	1.0	125,000
Assistant Admin. Family & Children's Services	0035A	1.0	93,091	1.0	98,287
Chief Human Services Policy Systems Spec.	0A32A	2.0	174,485	2.0	177,793
Policy Analyst	0033A	1.0	84,379	1.0	84,379
Senior Quality Control Reviewer	0A30A	1.0	83,372	1.0	83,372
Chief of Family Health Systems	00137A	1.0	82,207	1.0	82,207
Principal Human Services. Policy Systems Spec.	0A30A	4.0	317,528	4.0	324,259
Administrator Financial Management	0A37A	1.0	76,633	1.0	80,220
Pr. Human Services Business Officer	0A28A	1.0	74,665	1.0	74,665
Sr. Human Services Policy Systems Spec.	0A28A	8.0	590,317	8.0	596,555
Sr. Human Services Policy Systems Spec.	0A24A	1.0	67,981	1.0	70,444
Quality Control Reviewer	0A24A	7.0	447,831	7.0	451,142
luman Services Program Planner	0327A	2.0	124,835	2.0	131,351
Senior Human Services Business Officer	0A25A	1.0	58,592	1.0	60,346
Assistant Coordinator Community Relations	0A26A	1.0	53,000	1.0	53,000
Special Assistant	0A28A	1.0	53,000	1.0	53,000
luman Services Policy & Systems Specialist	20A25A	1.0	52,000	1.0	52,000
Office Manager	0A23A	1.0	49,430	1.0	51,309
Eligibility Technician	0321A	15.0	741,182	15.0	745,723
Data Control Clerk	0315A	1.0	45,393	1.0	45,393
Fiscal Clerk	0314A	1.0	44,478	1.0	44,478
Senior Clerk	0308A	1.0	39,130	1.0	39,130
Senior Word Processing Typist	0312A	2.0	75,037	2.0	75,575
Principal Clerk-Typist	0312A	1.0	36,691	1.0	36,691
Subtotal		59.0	\$3,857,306	59.0	\$3,909,486
Inclassified					
Director, Department of Human Services	0949F	1.0	129,636	1.0	129,636
Subtotal		1.0	\$129,636	1.0	\$129,636
Cost Allocation to Other Programs		(40.0)	(2,039,924)	(40.0)	(2,063,583)
Turnover		-	(540,837)	-	(547,480)
Subtotal		(40.0)	(\$2,580,761)	(40.0)	(\$2,611,063)
Total Salaries		20.0	\$1,406,181	20.0	\$1,428,059
Benefits					
Defined Contribution Plan		-	-	-	14,280
ICA		-	102,711	-	104,069
ledical		-	184,950	-	205,851
Payroll Accrual		-	-	-	8,472
Retiree Health		-	98,985	-	100,486
Retirement		-	323,140	-	302,447
Subtotal		-	\$709,786	-	\$735,605
Total Salaries and Benefits		20.0	\$2,115,967	20.0	\$2,163,664

Department Of Human Services Central Management

		FY 2	.012 F		Y 2013	
	Grade	FTE	Cost	FTE	Cost	
Cost Per FTE Position			\$105,798		\$108,183	
Statewide Benefit Assessment		-	52,732	-	53,552	
Subtotal		-	\$52,732	-	\$53,552	
Payroll Costs		20.0	\$2,168,699	20.0	\$2,217,216	
Total Personnel		20.0	\$2,168,699	20.0	\$2,217,216	
Distribution By Source Of Funds					.,,,	
General Revenue		14.0	1,488,938	14.4	1,575,332	
Federal Funds		1.6	181,331	1.6	183,788	
Restricted Receipts		4.4	498,430	4.0	458,096	
Total All Funds		20.0	\$2,168,699	20.0	\$2,217,216	

Department Of Human Services

Child Support Enforcement

Program Mission

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

Program Description

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

Statutory History

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

Department Of Human Services Child Support Enforcement

	2010 Audited	2011 Audited	2012 Enacted	2012 Revised	2013 Recommend
Expenditures By Subprogram					
Operations	7,180,660	9,069,516	8,355,622	8,228,175	8,531,055
Total Expenditures	\$7,180,660	\$9,069,516	\$8,355,622	\$8,228,175	\$8,531,055
Expenditures By Object					
Personnel	5,687,261	7,451,711	6,875,858	6,737,378	7,032,459
Operating Supplies and Expenses	1,367,987	1,474,079	1,282,175	1,293,208	1,301,007
Assistance and Grants	671	120,122	182,771	182,771	182,771
Subtotal: Operating Expenditures	7,055,919	9,045,912	8,340,804	8,213,357	8,516,237
Capital Purchases and Equipment	124,741	23,604	14,818	14,818	14,818
Total Expenditures	\$7,180,660	\$9,069,516	\$8,355,622	\$8,228,175	\$8,531,055
Expenditures By Funds					
General Revenue	2,128,111	2,139,572	2,214,781	2,233,256	2,315,247
Federal Funds	5,052,549	6,929,944	6,140,841	5,994,919	6,215,808
Total Expenditures	\$7,180,660	\$9,069,516	\$8,355,622	\$8,228,175	\$8,531,055
Program Measures					
Current Child Support Collected as a Percentage of Current Child Support Owed	60.35%	59.93%	59.83%	59.83%	59.93%
Objective	61.96%	61.68%		61.77%	61.79%

Department Of Human Services Child Support Enforcement

	FY 2012		FY 2013		
	Grade	FTE	Cost	FTE	Cost
Classified					
Assoc. Dir. Revenue Services (Child Support)	0144A	1.0	133,195	1.0	133,195
Pr. HS Policy & Systems Specialist	0A30A	1.0	84,405	1.0	84,405
Chief Human Services Policy & System Spec	0A32A	2.0	167,162	2.0	171,721
Supervisor, Family Support & Dom Rel. Unit	0A29A	3.0	234,418	3.0	234,418
Human Services Policy & Systems Specialist	0A24A	2.0	138,246	2.0	138,246
Principal Human Services Business Officer	0028A	1.0	66,489	1.0	66,489
Child Support Administrative Officer	0325A	9.0	523,311	9.0	523,311
Child Support Enforcement Agent II	0322A	20.0	1,044,669	20.0	1,047,176
Assistant Business Management Officer	0319A	1.0	48,052	1.0	48,052
Accountant	0020A	1.0	46,370	1.0	47,680
Data Control Clerk	0315A	1.0	44,364	1.0	44,867
Child Support Enforcement Agent I	0320A	11.0	472,989	11.0	478,578
Community Prog Liaison Worker	0319A	1.0	39,114	1.0	40,024
nterpreter	0316A	1.0	35,791	1.0	36,436
Telephone Operator	0310A	1.0	35,112	1.0	35,112
Data Entry Operator	0310A	4.0	137,226	4.0	138,131
Senior Word Processing Typist	0312A	1.0	33,356	1.0	33,920
Subtotal		61.0	\$3,284,269	61.0	\$3,301,761
Cost Allocation from Other Programs		0.2	13,970	0.2	14,248
Dvertime		-	29,411	-	29,411
urnover		-	(443,377)	-	(264,140)
Subtotal		0.2	(\$399,996)	0.2	(\$220,481)
Total Salaries		61.2	\$2,884,273	61.2	\$3,081,280
Benefits					
Defined Contribution Plan		-	-	-	30,518
FICA		-	219,232	-	234,212
Medical		-	491,588	-	577,486
Payroll Accrual		-	-	-	16,740
Retiree Health		-	195,842	-	209,359
Retirement		-	656,047	-	646,354
Subtotal		-	\$1,562,709	-	\$1,714,669
Total Salaries and Benefits		61.2	\$4,446,982	61.2	\$4,795,949
Cost Per FTE Position			\$72,663		\$78,365
statewide Benefit Assessment		-	107,057	-	114,445
Subtotal		-	\$107,057	-	\$114,445
Payroll Costs		61.2	\$4,554,039	61.2	\$4,910,394

Department Of Human Services Child Support Enforcement

		FY 2012		FY 2013	
	Grade	FTE	Cost	FTE	Cost
Purchased Services					
Information Technology		-	793,504	-	855,230
Legal Services		-	517,071	-	394,071
Management and Consultant Services		-	747,264	-	747,264
Other Contract Services		-	125,500	-	125,500
Subtotal		-	\$2,183,339	-	\$2,122,065
Total Personnel		61.2	\$6,737,378	61.2	\$7,032,459
Distribution By Source Of Funds					
General Revenue		20.8	1,828,228	20.8	1,907,568
Federal Funds		40.4	4,909,150	40.4	5,124,891
Total All Funds		61.2	\$6,737,378	61.2	\$7,032,459

Department Of Human Services Individual and Family Support

Program Mission

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

Program Description

The Individual and Family Support Program provides policy and program development, management, monitoring and evaluation, systems development, and financial administration for the full scope of social service programs administered by the Department of Human Services. The Individual and Family Support Program is responsible for ensuring that the services affecting all populations are provided in accordance with state and federal mandates. The IFS program is bifurcated into two distinct entities: the Division of Economic Support and the Office of Rehabilitation Services (ORS).

The Division of Economic Support has the responsibility for the operational planning, direction, coordination, and implementation of programs such as Rhode Island Works (RIW), the Child Care Assistance Program, General Public Assistance, the Supplemental Nutrition Assistance Program (SNAP), the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), the Low-Income Home Energy Assistance Program (LIHEAP), and the Supplemental Security Income program (SSI). Funding for the Social Services Block Grant (Title XX), the Head Start Collaboration Grant, the Refugee Assistance Program, and special financing for victims of domestic violence is budgeted within, and administered by, the IFS program.

The Office of Rehabilitation Services (ORS), housed within the Individual and Family Support Program (IFS), provides vocational rehabilitative services to disabled individuals seeking to re-enter the workforce and attain "competitive, career oriented, employment outcomes". Under the auspices of the Rehabilitation Act of 1973 and RIGL 40-12, ORS supplies this population with a broad range of vocational supports, including evaluation and assessment, counseling, career development, and job placement. These services are jointly financed by the State and the U.S. Department of Education (Rehabilitation Services Administration), with a general revenue match of 21.3 percent. DHS ORS also administers the Services for the Blind and Visually Impaired (SBVI) program and the Disability Determination Services Unit (RIDDS).

Statutory History

Title 40 Chapter 5.2 of the Rhode Island General Laws establishes the Rhode Island Works Program. The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) replaces Title IV-A of the Federal Social Security Act. Title 42 Chapter 12 of the Rhode Island General Laws establishes the Vocational Rehabilitation Program.

	2010 Audited	2011 Audited	2012 Enacted	2012 Revised	2013 Recommend
Expenditures By Subprogram					
Operations	71,573,406	98,187,986	127,885,859	128,096,078	151,488,135
Total Expenditures	\$71,573,406	\$98,187,986	\$127,885,859	\$128,096,078	\$151,488,135
Expenditures By Object					
Personnel	39,636,554	44,355,413	52,765,902	50,757,209	51,770,965
Operating Supplies and Expenses	9,726,399	9,213,489	13,375,643	15,717,690	16,326,500
Assistance and Grants	17,228,707	38,686,185	55,469,548	54,637,337	76,746,749
Subtotal: Operating Expenditures	66,591,660	92,255,087	121,611,093	121,112,236	144,844,214
Capital Purchases and Equipment	222,820	300,188	447,750	584,921	395,000
Operating Transfers	4,758,926	5,632,711	5,827,016	6,398,921	6,248,921
Total Expenditures	\$71,573,406	\$98,187,986	\$127,885,859	\$128,096,078	\$151,488,135
Expenditures By Funds					
General Revenue	19,090,568	20,318,051	22,498,106	22,743,217	23,170,788
Federal Funds	47,551,419	72,835,602	100,790,474	100,783,677	123,748,163
Restricted Receipts	178,638	135,746	180,000	180,000	180,000
Operating Transfers from Other Funds	4,609,579	4,748,054	4,417,279	4,389,184	4,389,184
Other Funds	143,202	150,533	-	-	-
Total Expenditures	\$71,573,406	\$98,187,986	\$127,885,859	\$128,096,078	\$151,488,135

		FY 2012		FY 2012			FY	2013	
	Grade	FTE	Cost		FTE	Cost			
Classified									
Associate Director Community Services	0A43A	1.0	120,000		1.0	120,000			
Administrator Family and Adult Services	0141A	4.0	460,289		4.0	467,704			
Administrator Operations Management	0A41A	1.0	110,000		1.0	110,000			
Deputy Administrator of Vocational Rehab.	0A35A	3.0	293,509		3.0	293,509			
Regional Manager	0A35A	3.0	292,993		3.0	297,451			
Assistant Administrator Financial Management	0034A	1.0	96,425		1.0	96,425			
Assistant Administrator	0A35A	1.0	95,021		1.0	95,021			
Chief Health Program Evaluator	0137A	1.0	94,538	(1)	1.0	94,538	(1)		
Chief Case Work Supervisor	0A34A	5.0	466,956		5.0	473,698			
Chief Human Services Business Officer	0033A	1.0	92,065		1.0	93,313			
Assistant Admin. Family & Children's Svcs.	0A35A	1.0	90,493		1.0	94,696			
Supervising Accountant	0A31A	1.0	89,891		1.0	89,891			
Chief Office of WIC	0337A	1.0	87,877		1.0	87,877			
Senior Casework Supervisor	0A30A	1.0	86,082		1.0	86,082			
Assistant Administrator of Vocational Rehabilitation	0A32A	2.0	168,252		2.0	168,252			
Chief Human Services Policy Syst Spec.	0A32A	2.0	166,155		2.0	169,810			
Clinical Training Specialist	0A30A	4.0	329,233		2.0	169,233	(3)		
Administrator Management Services	0A39A	1.0	82,199		1.0	86,065			
Principal Human Svcs Policy & Syst Spec.	0A30A	2.0	162,473		2.0	164,047			
Health Policy Analyst	0333A	3.0	239,920		3.0	239,920			
Senior Public Health Promotion Specialist	0137A	1.0	78,703		1.0	78,703			
Supervisor Vocational Rehabilitation	0A29A	13.0	1,007,116		13.0	1,011,205			
Principal :Human Services Business Officer	20A28A	1.0	74,167		1.0	77,869			
Senior Rehabilitation Counselor	0A26A	4.0	287,874		4.0	287,874			
Case Work Supervisor	0A26A	7.0	502,133		7.0	502,133			
Peripatologist	0A25A	2.0	141,946		2.0	142,690			
Sr Human Svces Policy & Systems Spec	0128A	1.0	69,262	(1)	1.0	70,394	(1)		
Supervising Eligibility Technician	0A26A	22.0	1,490,015		22.0	1,511,961			
Vocational Rehabilitation Counselor II	0A26A	13.0	874,941		13.0	886,138			
Public Health Promotion Specialist	0129A	1.0	64,297	(1)	1.0	65,608	(1)		
Programming Services Officer	0131A	4.0	254,609		5.0	318,139	(4)		
Human Services Policy & Systems Spec.	0A24A	5.0	311,339		5.0	313,688			
Senior Public Health Promotion Specialist	0131A	1.0	61,913	(1)	1.0	61,913	(1)		
Social Case Worker II	0A24A	13.0	790,923		13.0	791,298			
Rehabilitation Counselor	0A24A	34.0	2,068,419		34.0	2,069,459			
Chief Field Investigator	0B24A	1.0	59,683		1.0	59,683			
Public Health Nutritionist	0327A	1.0	59,248		1.0	59,248			
Social Case Worker	0A22A	63.0	3,561,202		63.0	3,577,049			
Principal Computer Operator	0A22A	1.0	55,974		1.0	55,974			
Vocational Rehabilitation Counselor I	0A24A	23.0	1,272,307		23.0	1,303,212			
Senior Eligibility Technician	0A22A	3.0	159,140		3.0	159,140			
Human Services Business Officer	0A22A	6.0	315,284		6.0	319,440			
Office Manager	0A23A	1.0	51,866		1.0	51,866			
Senior Community Program Liaison Worker	0122A	2.0	100,000	(1)	2.0	100,000	(1)		

		FY 2	2012	FY 2013		
	Grade	FTE	Cost	FTE	Cost	
Junior Resource Specialist	0319A	2.0	99,670	2.0	101,322	
Productions Systems Specialist	0320A	1.0	48,544	1.0	48,544	
Property Control & Supply Officer	0317A	1.0	47,696	1.0	47,696	
Food Service Administrator	0022A	2.0	95,290	2.0	97,196	
Eligibility Technician	0321A	104.0	4,920,557	104.0	4,986,129	
Asst Business Management Officer	0319A	2.0	92,765	2.0	95,363	
Clerk Secretary	0B16A	1.0	46,136	2.0	82,824	(4)
Rehabilitation Teacher of Blind	0321A	2.0	91,415	2.0	92,471	
Chief Clerk	0A16A	2.0	88,330	2.0	91,193	
Senior Reconciliation Clerk	0314A	1.0	44,155	1.0	44,154	
Interpreter	0316A	8.0	344,174	8.0	345,064	
Assistant Administrative Officer	0321A	1.0	42,896	1.0	44,125	
Fiscal Clerk	0314A	1.0	42,329	1.0	42,329	
Information Aide	0319A	1.0	42,017	1.0	42,770	
Senior Telephone Operator	0313A	1.0	41,128	1.0	42,998	
Data Control Clerk	0315A	8.0	323,203	8.0	323,988	
Community Program Liaison Worker	0319A	1.0	40,213	1.0	40,213	
Case Aide	0316A	2.0	80,049	2.0	80,932	
Information Aide	0315A	1.0	39,335	1.0	39,335	
Principal Clerk-Typist	0312A	8.0	309,250	8.0	311,874	
Senior Clerk Typist	0309A	1.0	38,607	1.0	38,607	
Principal Clerk-Stenographer	0313A	1.0	37,486	1.0	37,486	
Telephone Operator	0310A	6.0	220,592	6.0	220,592	
Central Mail Room Clerk	0311G	1.0	36,088	1.0	36,088	
Senior Word Processing Typist	0312A	8.0	286,869	8.0	289,730	
Word Processing Typist	0310A	17.0	608,565	17.0	611,297	
Data Entry Operator	0310A	8.0	271,282	8.0	273,630	
Laborer	0308A	1.0	32,181	1.0	32,427	
Senior Clerk	0308A	20.0	624,932	-	-	(3)
Administrator of Energy Program	0137A	-	-	1.0	76,527	(2)
Chief Program Development	0134A	-	-	2.0	158,119	(2)
Executive Secretary	04623A	-	-	1.0	59,253	(2)
Junior Resource Specialist	03519A	-	-	1.0	47,751	(2)
Sr Resource Specialist	03526A	-	-	3.0	178,296	(2)
Supervising Accountant	00131A	-	-	1.0	60,756	(2)
System Support Technician I	0318A	-	-	0.5	18,344	(4)
Subtotal		475.0	\$26,372,486	464.5	\$26,511,639	
Cost Allocation from Other Programs		35.0	1,758,094	35.0	1,777,375	
Cost Allocation to Other Programs		(52.5)	(2,439,447)	(52.5)	(2,460,279)	
Interdepartmental Transfer (DOH)		-	28,115	-	22,036	
Overtime		-	2,075,000	-	1,915,000	
Turnover		-	(2,313,191)	-	(1,865,694)	
Subtotal		(17.5)	(\$891,429)	(17.5)	(\$611,562)	
Total Salaries		457.5	\$25,481,057	447.0	\$25,900,077	

Restricted Receipts

Total All Funds

Department Of Human Services Individual and Family Support

		FY 2012		FY 2013	
	Grade	FTE	Cost	FTE	Cost
Benefits					
Defined Contribution Plan		-	-	-	239,851
FICA		-	1,947,042	-	1,978,657
Medical		-	4,506,850	-	5,058,001
Payroll Accrual		-	-	-	141,314
Retiree Health		-	1,666,508	-	1,706,225
Retirement		-	5,378,713	-	5,086,98
Subtotal		-	\$13,499,113	-	\$14,211,033
Total Salaries and Benefits		457.5	\$38,980,170	447.0	\$40,111,110
Cost Per FTE Position			\$85,203		\$89,734
Statewide Benefit Assessment		-	877,730	-	899,443
Subtotal		-	\$877,730	-	\$899,443
Payroll Costs		457.5	\$39,857,900	447.0	\$41,010,553
Purchased Services					
Building and Grounds Maintenance		-	7,486	-	7,521
Clerical and Temporary Services		-	2,683,591	-	2,725,791
Design and Engineering Services		-	70,000	-	70,000
nformation Technology		-	3,838,630	-	3,664,024
Legal Services		-	35,000	-	35,000
Management and Consultant Services		-	564,281	-	559,781
Medical Services		-	2,224,000	-	2,224,000
Other Contract Services		-	1,168,521	-	1,166,495
Training and Educational Services		-	307,800	-	307,800
Subtotal		-	\$10,899,309	-	\$10,760,412
Total Personnel		457.5	\$50,757,209	447.0	\$51,770,96
Distribution By Source Of Funds		1515	12 950 904	140 7	11 107 50
General Revenue		154.5	13,850,824	140.7	14,437,531
Federal Funds		303.0	36,906,085	306.3	37,333,134

300

-

447.0 \$51,770,965

-

457.5 \$50,757,209

300

	FY 2012		FY	2013
Grade	FTE	Cost	FTE	Cost
1 Reflects 5.0 FTE positions transferred from the Department of Health to DHS in fulfillment of the transfer of the Ryan White HIV Care Program	Aa Lo	aflects 9.0 FTE trai Iministration to DH w-Income Home E eatherization Assis	IS as a result of th Energy Assistance	ne relocation of the and the
3 Reflects the removal of 22.0 limited period FTE from the DHS roster. These positions are financed by a non- recurring supplemental grant for SNAP administration which expires in FY 2012, pursuant to the DoD Appropriations Act of 2010 (P.L. 111-118).	the	eflects the addition e programmatic ac ace to the Top- Ea	tivities and admin	istration of the

Department Of Human Services

Veterans' Affairs

Program Mission

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

Program Description

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

Veterans' Affairs is confronting a growing challenge as a result of a rapidly aging veteran's population. Rhode Island has a population of approximately 93,000 veterans. Although the total number of war service veterans is declining, the growth in the proportion of aging (World War II and Korean) veterans is escalating.

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

Statutory History

Chapters 17, 24, and 25 of Title 30 of the Rhode Island General Laws established the Division of Veterans Affairs. Chapter 233 of the Public Laws of 2009 set forth Chapter 152 of Title 42 of the General Laws, repealing the statutory authority for the Division and establishing the Department of Veterans' Affairs, effective FY 2012. However, this law was subsequently repealed prior to implementation, and the Division of Veterans Affairs remains within DHS.

Department Of Human Services Veterans' Affairs

	2010 Audited	2011 Audited	2012 Enacted	2012 Revised	2013 Recommend
Expenditures By Subprogram					
Operations	25,173,917	27,038,838	28,216,627	30,043,996	28,665,373
Total Expenditures	\$25,173,917	\$27,038,838	\$28,216,627	\$30,043,996	\$28,665,373
Expenditures By Object					
Personnel	21,857,117	23,890,039	22,594,005	22,941,916	24,100,767
Operating Supplies and Expenses	2,759,157	2,928,147	3,403,523	3,237,875	3,680,506
Assistance and Grants	4,423	3,688	24,100	23,712	24,100
Subtotal: Operating Expenditures	24,620,697	26,821,874	26,021,628	26,203,503	27,805,373
Capital Purchases and Equipment	553,220	216,964	2,194,999	3,840,493	860,000
Total Expenditures	\$25,173,917	\$27,038,838	\$28,216,627	\$30,043,996	\$28,665,373
Expenditures By Funds					
General Revenue	17,714,916	20,032,032	18,568,043	18,328,325	19,879,830
Federal Funds	6,545,890	6,126,436	8,005,072	7,083,757	7,707,781
Restricted Receipts	913,111	880,370	1,643,512	4,631,914	1,077,762
Total Expenditures	\$25,173,917	\$27,038,838	\$28,216,627	\$30,043,996	\$28,665,373
Program Measures					
Percentage of Persons Completing the Veterans' Transitional Supportive Program Who Secure Housing by program Completion	87.0%	90.0%	92.0%	92.0%	80.0%
Objective	67.8%	67.8%		67.8%	67.8%

Department Of Human Services Veterans' Affairs

Grade FTE Cost FTE Cost Assistant Medical Program Director 00747A 1.0 167,971 1.0 167,971 Psychiatrist IV 00447A 0.6 84,995 0.6 84,9 Physician II 00740A 2.0 265,071 2.0 266,1 Associate Director Veterans Affairs 00143A 1.0 110,000 1.0 110,0 Consultant Public Health Nurse 00926A 1.0 106,640 1.0 106,6 Infection Control Nurse 00925A 3.0 290,974 3.0 291,4 Administrator 00141A 1.0 95,000 1.0 95,00 Supervising Registered Nurse A 00924A 7.0 659,747 7.0 659,5 Nursing Instructor 00924A 1.0 90,552 1.0 90,5 Chief of Family Health Systems 00137A 1.0 96,55 1.0 96,5 Assistant Administrator 00133A 2.0 157,141 2.0 157,1 <th></th>	
Assistant Medical Program Director 00747A 1.0 167,971 1.0 167,971 Psychiatrist IV 00447A 0.6 84,995 0.6 84,995 Physician II 00740A 2.0 265,071 2.0 266,1 Associate Director Veterans Affairs 00143A 1.0 110,000 1.0 110,00 Consultant Public Health Nurse 00926A 1.0 106,640 1.0 106,613 Infection Control Nurse 00924A 1.0 100,799 1.0 101,65 Supervising Registered Nurse B 00925A 3.0 290,974 3.0 291,4 Administrator 00141A 1.0 95,000 1.0 95,00 Supervising Registered Nurse A 00924A 7.0 657,747 7.0 659,5 Nursing Instructor 00924A 1.0 90,552 1.0 90,4 Chief Gase Work Supervisor 00A34A 1.0 85,956 1.0 85,5 Clinical Social Worker 00920A 8.0 578,687 <th>971</th>	971
Psychiatrist IV 00447A 0.6 84,995 0.6 84,95 Physician II 00740A 2.0 265,071 2.0 266,1 Associate Director Veterans Affairs 00143A 1.0 110,000 1.0 110,00 Consultant Public Health Nurse 00926A 1.0 106,640 1.0 106,640 Infection Control Nurse 00924A 1.0 106,613 1.0 106,640 Supervising Registered Nurse B 00925A 3.0 290,974 3.0 291,4 Administrator 00141A 1.0 95,000 1.0 95,00 Supervising Registered Nurse A 00924A 7.0 657,747 7.0 659,50 Nursing Instructor 00924A 1.0 90,428 1.0 90,428 Chief of Family Health Systems 00137A 1.0 90,428 1.0 96,62 Assistant Administrator 00133A 2.0 157,141 2.0 157,141 Registered Nurse A 00920A 8.0 578,687	971
Physician II 00740A 2.0 265,071 2.0 266,071 Associate Director Veterans Affairs 00143A 1.0 110,000 1.0 110,00 Consultant Public Health Nurse 00926A 1.0 106,640 1.0 106,613 Infection Control Nurse 00924A 1.0 100,799 1.0 101,6 Supervising Registered Nurse B 00925A 3.0 290,974 3.0 291,4 Administrator 00141A 1.0 95,000 1.0 95,00 Supervising Registered Nurse A 00924A 7.0 657,747 7.0 659,5 Nursing Instructor 00924A 1.0 90,552 1.0 90,4 Chief of Family Health Systems 00137A 1.0 90,428 1.0 90,4 Assistant Administrator 00133A 2.0 157,141 2.0 157,1 Registered Nurse A 00920A 8.0 578,687 8.0 585,65 Clinical Social Worker 000321A 1.0 61,083	
Associate Director Veterans Affairs00143A1.0110,0001.0110,00Consultant Public Health Nurse00926A1.0106,6401.0106,640Executive Nurse00142A1.0106,6131.0106,61Infection Control Nurse00924A1.0100,7991.0101,6Supervising Registered Nurse B00925A3.0290,9743.0291,4Administrator00141A1.095,0001.095,00Supervising Registered Nurse A00924A7.0657,7477.0659,5Nursing Instructor00924A1.090,5521.090,6Chief of Family Health Systems00137A1.090,4281.090,4Chief Case Work Supervisor00A34A1.085,9561.085,95Assistant Administrator00133A2.0157,1412.0157,17Registered Nurse B00921A22.61,750,61629.62,210,3Registered Nurse A00920A8.0578,6878.058,56Clinical Social Worker00321A1.061,0831.061,0Supervising Activities Therapist00324A2.0120,5052.0120,505Senior Food Service Administrator00326A1.055,9061.057,6Maintenance Superintendent00322A1.054,0001.054,00Senior Cemetery Specialist00318A1.048,3941.048,394Group Worker </td <td>995</td>	995
Consultant Public Health Nurse00926A1.0106,6401.0106,640Executive Nurse00142A1.0106,6131.0106,613Infection Control Nurse00924A1.0100,7991.0101,6Supervising Registered Nurse B00925A3.0290,9743.0291,4Administrator00141A1.095,0001.095,00Supervising Registered Nurse A00924A7.0657,7477.0659,5Nursing Instructor00924A1.090,5521.090,55Chief of Family Health Systems00137A1.090,4281.090,428Chief Case Work Supervisor00A34A1.085,9561.085,956Assistant Administrator00133A2.0157,1412.0157,141Registered Nurse B00921A22.61,750,61629.62,210,37Registered Nurse A00920A8.0578,6878.0585,57Clinical Social Worker00A27A4.0285,7494.0286,27Licensed Practical Nurse00517A15.0972,82215.0978,07Principal Dietician00324A2.0120,5052.0120,57Senior Food Service Administrator00326A1.055,9061.057,67Maintenance Superintendent00322A1.054,0001.054,00Senior Cemetery Specialist00318A1.048,3941.048,39Group Worker00319	142
Executive Nurse00142A1.0106,6131.0106,613Infection Control Nurse00924A1.0100,7991.0101,6Supervising Registered Nurse B00925A3.0290,9743.0291,4Administrator00141A1.095,0001.095,00Supervising Registered Nurse A00924A7.0657,7477.0659,5Nursing Instructor00924A1.090,5521.090,55Chief of Family Health Systems00137A1.090,4281.090,428Chief Case Work Supervisor00A34A1.085,9561.085,95Assistant Administrator00133A2.0157,1412.0157,141Registered Nurse B00921A22.61,750,61629.62,210,35Registered Nurse A00920A8.0578,6878.0585,55Clinical Social Worker00A27A4.0285,7494.0286,749Licensed Practical Nurse00517A15.0972,82215.0978,07Principal Dietician00321A1.061,0831.061,05Senior Food Service Administrator00326A1.055,9061.057,68Maintenance Superintendent00322A1.054,0001.054,00Senior Cemetery Specialist00318A1.048,3941.048,39Group Worker00319A5.5259,3575.5263,27	000
Infection Control Nurse 00924A 1.0 100,799 1.0 101,6 Supervising Registered Nurse B 00925A 3.0 290,974 3.0 291,4 Administrator 00141A 1.0 95,000 1.0 95,00 Supervising Registered Nurse A 00924A 7.0 657,747 7.0 659,50 Nursing Instructor 00924A 1.0 90,552 1.0 90,55 Chief of Family Health Systems 00137A 1.0 90,428 1.0 90,428 Chief Case Work Supervisor 00A34A 1.0 90,428 1.0 90,428 Assistant Administrator 00133A 2.0 157,141 2.0 157,141 Registered Nurse B 00921A 22.6 1,750,616 29.6 2,210,3 Registered Nurse A 00920A 8.0 578,687 8.0 588,5 Clinical Social Worker 00321A 1.0 61,083 1.0 61,06 Senior Food Service Administrator 00322A 2.0 120,505 </td <td>640</td>	640
Supervising Registered Nurse B 00925A 3.0 290,974 3.0 291,4 Administrator 00141A 1.0 95,000 1.0 95,00 Supervising Registered Nurse A 00924A 7.0 657,747 7.0 659,5 Nursing Instructor 00924A 1.0 90,552 1.0 90,5 Chief of Family Health Systems 00137A 1.0 90,428 1.0 90,4 Chief Case Work Supervisor 00A34A 1.0 85,956 1.0 85,95 Assistant Administrator 00133A 2.0 157,141 2.0 157,14 Registered Nurse B 00920A 8.0 578,687 8.0 585,5 Clincal Social Worker 00A27A 4.0 285,749 4.0 286,2 Licensed Practical Nurse 00517A 15.0 972,822 15.0 978,0 Principal Dietician 00324A 2.0 120,505 2.0 120,55 Senior Food Service Administrator 00326A 1.0 55,906	513
Administrator00141A1.095,0001.095,00Supervising Registered Nurse A00924A7.0657,7477.0659,5Nursing Instructor00924A1.090,5521.090,5Chief of Family Health Systems00137A1.090,4281.090,4Chief Case Work Supervisor00A34A1.085,9561.085,95Assistant Administrator00133A2.0157,1412.0157,14Registered Nurse B00921A22.61,750,61629.62,210,3Registered Nurse A00920A8.0578,6878.0585,5Clinical Social Worker00A27A4.0285,7494.0286,2Licensed Practical Nurse00517A15.0972,82215.0978,00Principal Dietician00324A2.0120,5052.0120,505Senior Food Service Administrator00326A1.055,9061.057,8Maintenance Superintendent00322A1.054,0001.054,00Group Worker00319A5.5259,3575.5263,20	321
Supervising Registered Nurse A00924A7.0657,7477.0659,50Nursing Instructor00924A1.090,5521.090,552Chief of Family Health Systems00137A1.090,4281.090,428Chief Case Work Supervisor00A34A1.085,9561.085,55Assistant Administrator00133A2.0157,1412.0157,14Registered Nurse B00921A22.61,750,61629.62,210,35Registered Nurse A00920A8.0578,6878.0585,55Clinical Social Worker00A27A4.0285,7494.0286,25Licensed Practical Nurse00517A15.0972,82215.0978,05Principal Dietician00324A2.0120,5052.0120,505Senior Food Service Administrator00326A1.055,9061.057,80Maintenance Superintendent00318A1.048,3941.048,394Group Worker00319A5.5259,3575.5263,20	434
Nursing Instructor00924A1.090,5521.090,5Chief of Family Health Systems00137A1.090,4281.090,4Chief Case Work Supervisor00A34A1.085,9561.085,95Assistant Administrator00133A2.0157,1412.0157,1Registered Nurse B00921A22.61,750,61629.62,210,3Registered Nurse A00920A8.0578,6878.0585,5Clinical Social Worker00A27A4.0285,7494.0286,2Licensed Practical Nurse00517A15.0972,82215.0978,02Principal Dietician00321A1.061,0831.061,03Supervising Activities Therapist00324A2.0120,5052.0120,505Senior Food Service Administrator00322A1.054,0001.054,00Maintenance Superintendent00318A1.048,3941.048,394Group Worker00319A5.5259,3575.5263,20	000
Chief of Family Health Systems00137A1.090,4281.090,428Chief Case Work Supervisor00A34A1.085,9561.085,9Assistant Administrator00133A2.0157,1412.0157,14Registered Nurse B00921A22.61,750,61629.62,210,3Registered Nurse A00920A8.0578,6878.0585,5Clinical Social Worker00A27A4.0285,7494.0286,2Licensed Practical Nurse00517A15.0972,82215.0978,02Principal Dietician00321A1.061,0831.061,03Supervising Activities Therapist00324A2.0120,5052.0120,55Senior Food Service Administrator00322A1.054,0001.054,000Maintenance Superintendent00318A1.048,3941.048,394Group Worker00319A5.5259,3575.5263,22	509
Chief Case Work Supervisor00A34A1.085,9561.085,956Assistant Administrator00133A2.0157,1412.0157,141Registered Nurse B00921A22.61,750,61629.62,210,3Registered Nurse A00920A8.0578,6878.0585,5Clinical Social Worker00A27A4.0285,7494.0286,2Licensed Practical Nurse00517A15.0972,82215.0978,0Principal Dietician00321A1.061,0831.061,0Supervising Activities Therapist00324A2.0120,5052.0120,55Senior Food Service Administrator00322A1.054,0001.054,00Maintenance Superintendent00318A1.048,3941.048,32Group Worker00319A5.5259,3575.5263,2	552
Assistant Administrator00133A2.0157,1412.0157,1Registered Nurse B00921A22.61,750,61629.62,210,3Registered Nurse A00920A8.0578,6878.0585,5Clinical Social Worker00A27A4.0285,7494.0286,749Licensed Practical Nurse00517A15.0972,82215.0978,00Principal Dietician00321A1.061,0831.061,03Supervising Activities Therapist00326A1.055,9061.057,8Maintenance Superintendent00322A1.054,0001.054,00Group Worker00319A5.5259,3575.5263,2	428
Registered Nurse B 00921A 22.6 1,750,616 29.6 2,210,3 Registered Nurse A 00920A 8.0 578,687 8.0 585,5 Clinical Social Worker 00A27A 4.0 285,749 4.0 286,749 Licensed Practical Nurse 00517A 15.0 972,822 15.0 978,02 Principal Dietician 00321A 1.0 61,083 1.0 61,0 Supervising Activities Therapist 00324A 2.0 120,505 2.0 120,50 Senior Food Service Administrator 00322A 1.0 55,906 1.0 57,80 Maintenance Superintendent 00318A 1.0 48,394 1.0 48,30 Group Worker 00319A 5.5 259,357 5.5 263,20	956
Registered Nurse A00920A8.0578,6878.0585,5Clinical Social Worker00A27A4.0285,7494.0286,2Licensed Practical Nurse00517A15.0972,82215.0978,0Principal Dietician00321A1.061,0831.061,0Supervising Activities Therapist00324A2.0120,5052.0120,50Senior Food Service Administrator00326A1.055,9061.057,6Maintenance Superintendent00318A1.048,3941.048,3Group Worker00319A5.5259,3575.5263,2	141
Clinical Social Worker00A27A4.0285,7494.0286,2Licensed Practical Nurse00517A15.0972,82215.0978,0Principal Dietician00321A1.061,0831.061,0Supervising Activities Therapist00324A2.0120,5052.0120,50Senior Food Service Administrator00322A1.055,9061.057,6Maintenance Superintendent00318A1.048,3941.048,3Group Worker00319A5.5259,3575.5263,2	312 ⁽¹⁾
Licensed Practical Nurse00517A15.0972,82215.0978,0Principal Dietician00321A1.061,0831.061,0Supervising Activities Therapist00324A2.0120,5052.0120,5Senior Food Service Administrator00326A1.055,9061.057,8Maintenance Superintendent00322A1.054,0001.054,00Senior Cemetery Specialist00318A1.048,3941.048,3Group Worker00319A5.5259,3575.5263,2	595
Principal Dietician 00321A 1.0 61,083 1.0 61,0 Supervising Activities Therapist 00324A 2.0 120,505 2.0 120,505 Senior Food Service Administrator 00326A 1.0 55,906 1.0 57,8 Maintenance Superintendent 00322A 1.0 54,000 1.0 54,000 Senior Cemetery Specialist 00318A 1.0 48,394 1.0 48,3 Group Worker 00319A 5.5 259,357 5.5 263,2	221
Supervising Activities Therapist00324A2.0120,5052.0120,5Senior Food Service Administrator00326A1.055,9061.057,8Maintenance Superintendent00322A1.054,0001.054,00Senior Cemetery Specialist00318A1.048,3941.048,394Group Worker00319A5.5259,3575.5263,2	059
Senior Food Service Administrator 00326A 1.0 55,906 1.0 57,8 Maintenance Superintendent 00322A 1.0 54,000 1.0 54,0 Senior Cemetery Specialist 00318A 1.0 48,394 1.0 48,3 Group Worker 00319A 5.5 259,357 5.5 263,2	083
Maintenance Superintendent 00322A 1.0 54,000 1.0 54,00 Senior Cemetery Specialist 00318A 1.0 48,394 1.0 48,3 Group Worker 00319A 5.5 259,357 5.5 263,2	505
Senior Cemetery Specialist 00318A 1.0 48,394 1.0 48,3 Group Worker 00319A 5.5 259,357 5.5 263,2	370
Group Worker 00319A 5.5 259,357 5.5 263,2	000
	394
Pharmany Aida II 00210A 2.0 129 654 2.0 129 6	240
Pharmacy Aide II 00318A 3.0 138,654 3.0 138,6	654
Medical Records Technician 00320A 1.0 45,264 1.0 45,264	264
Food Service Supervisor 00314A 1.0 44,864 1.0 45,5	558
Assistant Business Mgmt Officer 00310A 1.0 44,174 1.0 45,2	202
Assistant Business Mgmt Officer 00319A 1.0 44,026 1.0 45,4	465
Senior Laboratory Technician 00319A 1.0 43,873 1.0 43,873	373
Senior Institution Attendant 00314A 6.0 260,903 6.0 260,903	903
Senior Food Service Aide 00313A 2.0 86,501 2.0 86,5	501
Senior X-Ray Technologist 00318A 1.0 43,169 1.0 44,6	
Chief Clerk 00A16A 1.0 42,623 1.0 42,623	523
Senior Word Processing Typist 00312A 1.0 42,511 1.0 42,5	511
Senior Reconciliation Clerk 00314A 1.0 41,985 1.0 41,9	985
Senior Cook 00315A 2.0 83,785 2.0 83,7	785
Storekeeper 00315A 1.0 41,128 1.0 41,1	128
Motor Equipment Operator 00311G 2.0 81,234 2.0 81,234	234
Laboratory Technician 00316A 1.0 40,191 1.0 40,1	191
Institutional Attendant 00313A 80.5 3,199,709 80.5 3,213,3	327
Gardener 00310G 1.0 39,446 1.0 39,4	
Cemetery Specialist 00314A 5.0 197,167 5.0 197,8	446
Senior Maintenance Technician00314G1.038,5481.038,4	321

Department Of Human Services Veterans' Affairs

		FY :	2012	F	Y 2013	
	Grade	FTE	Cost	FTE	Cost	
Cook	00312A	5.0	190,948	5.0	190,948	
Word Processing Typist	00310A	2.0	75,240	4.0	145,240	(1)
Cook's Helper	00309A	21.0	777,309	21.0	780,715	
Principal Clerk-Typist	00312A	1.0	36,691	1.0	36,691	
Fiscal Clerk	00314A	1.0	35,141	1.0	35,869	
Reconciliation Clerk	00310A	1.0	32,061	1.0	32,523	
Subtotal		229.2	\$12,344,151	238.2	\$12,920,048	
Unclassified						
Director	20944F	1.0	110,000	1.0	110,000	
Subtotal		1.0	\$110,000	1.0	\$110,000	
Overtime		-	2,478,143	-	1,527,500	
Turnover		-	(1,875,904)	-	(2,020,408)	
Subtotal		-	\$602,239	-	(\$492,908)	
Total Salaries		230.2	\$13,056,390	239.2	\$12,537,140	
Benefits						
Defined Contribution Plan		-	-	-	127,362	
FICA		-	1,086,036	-	1,114,071	
Holiday Pay		-	363,783	-	363,545	
Medical		-	2,487,730	-	3,042,449	
Payroll Accrual		-	-	-	73,979	
Retiree Health		-	744,117	-	814,631	
Retirement		-	2,449,134	-	2,474,881	
Subtotal		-	\$7,130,800	-	\$8,010,918	
Total Salaries and Benefits		230.2	\$20,187,190	239.2	\$20,548,058	
Cost Per FTE Position			\$87,694		\$85,903	
Statewide Benefit Assessment		-	399,663	-	438,208	
Temporary and Seasonal		-	869,360	-	1,726,528	
Subtotal		-	\$1,269,023	-	\$2,164,736	
Payroll Costs		230.2	\$21,456,213	239.2	\$22,712,794	

Department Of Human Services Veterans' Affairs

		FY 2012		FY 2013	
	Grade	FTE	Cost	FTE	Cost
Purchased Services					
Building and Grounds Maintenance		-	421,764	-	421,764
Design and Engineering Services		-	115,000	-	15,000
nformation Technology		-	103,500	-	103,500
Legal Services		-	1,280	-	5,950
Medical Services		-	839,059	-	836,659
Other Contract Services		-	5,100	-	5,100
Subtotal		-	\$1,485,703	-	\$1,387,973
Total Personnel		230.2	\$22,941,916	239.2	\$24,100,767
Distribution By Source Of Funds		200.2	Ψ 22,3 41,310	255.2	Ψ 2 4 ,100,707
General Revenue		162.5	16,027,440	171.4	17,578,557
Federal Funds		67.7	6,270,817	67.8	6,502,210
Restricted Receipts		-	643,659	-	20,000
Total All Funds		230.2	\$22,941,916	239.2	\$24,100,767

1 Reflects the addition of 9.0 FTE at the Veterans' Home (in FY 2013) to sufficiently staff clinical and administrative operations following the planned census expansion in FY 2014. These positions are financed for the final quarter of FY 2013 only.

Department Of Human Services Health Care Quality, Financing & Purchasing

Program Mission

To purchase to purchase medically necessary services covered by the Medicaid State Plan at a reasonable cost while assuring quality and access; to assure the efficiency and economy of services delivered to program recipients by monitoring service providers; to coordinate service-delivery efforts with other state departments and agencies; and to administer the Medical Assistance program in a manner consistent with federal and state laws and regulations.

Program Description

Under the leadership and guidance of the Executive Office of Health and Human Services, DHS supervises disbursements to a number of state agencies, as well as local school districts, for administrative and program activities in support of the Medicaid program. In the Governor's FY 2013 budget, the vast majority of the HCQFP program has been merged into the Central Management program of EOHHS, where it will retain its core functions.

Specifically, the HCQFP program operates a claims processing system, secures financial recoveries from third parties for claims liability, and conducts utilization review of inpatient and outpatient hospital services. To encourage the utilization of community-based services rather than institutional programs, HCQFP administers home and community-based waivers– both directly and through interagency agreements with the Division of Elderly Affairs and the Department of Behavioral Health Care, Developmental Disabilities and Hospitals. HCQFP also administers a demonstration waiver to provide health services to families through a managed care delivery system, known as RIte Care, and is responsible for administration of a Section 1115 SCHIP waiver amendment to the current managed care program in order to implement the provisions of Health Reform RI 2000 (all individual waivers were combined into a single "Global Waiver" in 2009). This assures that the program serves either persons without access to affordable employer-sponsored insurance, or maintains persons in employer-based insurance, if more cost-effective. HCQFP also administers the Early Intervention Program for at risk children up to age three.

Statutory History

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

Department Of Human Services Health Care Quality, Financing & Purchasing

	2010 Audited	2011 Audited	2012 Enacted	2012 Revised	2013 Recommend
Expenditures By Subprogram					
Operations	60,738,411	64,118,781	59,373,254	80,721,646	17,838,116
Total Expenditures	\$60,738,411	\$64,118,781	\$59,373,254	\$80,721,646	\$17,838,116
Expenditures By Object					
Personnel	50,559,963	53,679,010	50,971,888	53,243,990	15,187,836
Operating Supplies and Expenses	3,179,288	2,740,973	2,860,621	2,805,992	2,633,652
Assistance and Grants	6,698,271	7,696,848	5,445,445	24,560,739	10,328
Subtotal: Operating Expenditures	60,437,522	64,116,831	59,277,954	80,610,721	17,831,816
Capital Purchases and Equipment	300,889	1,950	95,300	110,925	6,300
Total Expenditures	\$60,738,411	\$64,118,781	\$59,373,254	\$80,721,646	\$17,838,116
Expenditures By Funds					
General Revenue	19,569,583	19,473,744	18,551,887	18,655,818	8,314,370
Federal Funds	41,168,828	44,645,037	40,761,367	62,005,828	9,523,746
Restricted Receipts	-	-	60,000	60,000	-
Total Expenditures	\$60,738,411	\$64,118,781	\$59,373,254	\$80,721,646	\$17,838,116
Program Measures					
Length of Stay - Pneumonia	8.0	8.1	8.3	8.3	N/A
Objective	2.8	2.8		2.8	N/A
Lenth of Stay - Angina Pectoris	3.0	3.6	3.7	3.7	N/A
Objective	1.0	1.0		1.0	N/A
Lenth of Stay - Alcohol Dependency	5.1	5.5	5.6	5.6	N/A
Objective	11.0	11.0		11.0	N/A
Length of Stay - Chest Pain	3.4	3.9	4.0	4.0	N/A
Objective	1.2	1.2		1.2	N/A
Length of Stay - Congestive Heart Failure	7.1	6.8	7.0	7.0	N/A
Objective	1.2	1.2		1.2	N/A
Length of Stay - Depressive Disease	7.4	7.9	7.6	7.6	N/A
Objective	4.0	4.0		4.0	N/A
Length of Stay - Chronic Airway Obstructive Disease	5.5	5.3	5.1	5.1	N/A
Objective	3.3	3.3		3.3	N/A
Length of Stay - Abdominal pain	5.5	5.3	5.4	5.4	N/A
Objective	1.4	1.4		1.4	N/A
Length of Stay - Acute Pancreatitis	5.0	4.9	4.6	4.6	N/A
Objective	3.0	3.0		3.0	N/A
Length of Stay - Recurrent	8.5	8.9	8.9	8.9	N/A
Depression					

Department Of Human Services Health Care Quality, Financing & Purchasing

	FY 2012		2 FY 20		
	Grade	FTE	Cost	FTE	Cost
Classified					
Chief Case Work Supervisor	0A34A	1.0	90,987	1.0	91,511
Case Work Supervisor	0A26A	4.0	285,630	4.0	285,749
Supervising Eligibility Technician	0A26A	5.0	355,359	5.0	358,213
Social Case Worker II	0A24A	14.0	874,497	14.0	876,151
Social Case Worker	0A22A	33.0	1,872,820	33.0	1,879,192
Eligibility Technician	0321A	28.0	1,413,967	28.0	1,419,914
Telephone Operator	0310A	1.0	37,321	1.0	37,321
Data Entry Operator	0310A	2.0	74,404	2.0	74,404
Senior Word Processing Typist	0312A	1.0	36,691	1.0	36,691
Nord Processing Typist	0310A	4.0	136,487	4.0	136,487
Subtotal		93.0	\$5,178,163	93.0	\$5,195,633
Cost Allocation to Other Programs		(3.0)	(172,263)	(3.0)	(172,837)
Cost Allocation from Other Programs		60.3	2,879,570	60.3	2,905,076
Dvertime		-	1,100,000	-	1,000,000
Furnover		-	(388,362)	-	(311,738
Subtotal		57.3	\$3,418,945	57.3	\$3,420,501
Total Salaries		150.3	\$8,597,108	150.3	\$8,616,134
Benefits					
Defined Contribution Plan		-	-	-	76,162
FICA		-	657,202	-	658,628
Medical		-	1,518,748	-	1,717,388
Payroll Accrual		-	-	-	45,284
Retiree Health		-	521,702	-	529,866
Retirement		-	1,722,834	-	1,613,018
Subtotal		-	\$4,420,486	-	\$4,640,346
Total Salaries and Benefits		150.3	\$13,017,594	150.3	\$13,256,480
Cost Per FTE Position			\$86,611		\$88,200
Statewide Benefit Assessment		-	281,140	-	285,604
Subtotal		-	\$281,140	-	\$285,604

Payroll Costs	150.3	\$13,298,734	150.3	\$13,542,084
-				

Department Of Human Services Health Care Quality, Financing & Purchasing

		FY 2	2012	F	Y 2013
	Grade	FTE	Cost	FTE	Cost
Purchased Services					
Building and Grounds Maintenance		-	1,662	-	1,662
Clerical and Temporary Services		-	800	-	800
nformation Technology		-	1,311,412	-	1,414,964
Management and Consultant Services		-	38,405,124	-	-
Other Contract Services		-	226,258	-	228,326
Subtotal		-	\$39,945,256	-	\$1,645,752
Total Personnel		150.3	\$53,243,990	150.3	\$15,187,836
Distribution By Source Of Funds					
General Revenue		75.2	17,262,457	75.2	7,593,918
Federal Funds		75.1	35,981,533	75.1	7,593,918
Total All Funds		150.3	\$53,243,990	150.3	\$15,187,836

Department Of Human Services Medical Benefits

Program Mission

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

Program Description

The Medical Benefits Program assures quality and access to necessary medical services for eligible recipients, primarily financed through Medicaid. Authorized under Title XIX of the Social Security Act, Medicaid is an entitlement program administered by states to provide medical benefits to low income persons who are aged, blind, disabled, or to low income children and families. Medicaid is jointly financed by states and the federal government according to the prevailing Federal Medical Benefits Percentage (FMAP). Rhode Island's FMAP, which is based on a measure of relative per capita personal income, is 52.12 percent for federal fiscal year 2012 and 51.26 percent for federal fiscal year 2013.

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

In the Governor's FY 2013 Budget, this program (renamed as "Medical Assistance") is relocated in its entirety to the budget of the Executive Office of Health and Human Services.

Statutory History

Title XIX of the Social Security Act was enacted by Congress under the provision of Public Law 89-97 on July 30, 1965. The Rhode Island Medical Benefits Program was implemented under Title 40, Chapter 8 of the Rhode Island General Laws. Title 42 Chapter 12.3 and Title 40-6.2 of the Rhode Island General Laws authorized the Department of Human Services to establish and administer the RIte Care Program.

Department Of Human Services Medical Benefits

	2010 Audite	2011 ed Auditee	2012 d Enacted	2012 Revised	2013 Recommend
Expenditures By Subprogram					
Hospitals	242,629,803	247,406,604	240,371,850	239,062,103	-
Nursing Facilities	394,960,268	403,447,723	415,319,617	418,900,000	-
Managed Care	546,513,231	574,199,134	620,332,851	602,000,000	-
Other Services	108,806,756	123,500,877	118,007,014	116,500,000	-
Special Education	23,246,818	20,203,556	20,837,655	18,350,000	-
Pharmacy	39,262,079	37,733,842	56,124,448	53,300,000	-
Rhody Health	155,560,734	176,948,036	191,200,842	193,000,000	-
Total Expenditures	\$1,510,979,689	\$1,583,439,772	\$1,662,194,277	\$1,641,112,103	-
Expenditures By Object					
Operating Supplies and Expenses	57,915	57,636	-	-	-
Assistance and Grants	1,510,921,774	1,583,382,136	1,662,194,277	1,641,112,103	-
Subtotal: Operating Expenditures	1,510,979,689	1,583,439,772	1,662,194,277	1,641,112,103	-
Total Expenditures	\$1,510,979,689	\$1,583,439,772	\$1,662,194,277	\$1,641,112,103	-
Expenditures By Funds					
General Revenue	558,717,247	625,398,981	785,968,544	784,011,357	-
Federal Funds	945,995,707	949,365,996	865,091,738	845,962,103	-
Restricted Receipts	6,266,735	8,674,795	11,133,995	11,138,643	-
Total Expenditures	\$1,510,979,689	\$1,583,439,772	\$1,662,194,277	\$1,641,112,103	-
Program Measures					
Neonatal Intensive Care Unit Admissions Per 1,000 Live Births	98.8	89.0	89.0	89.0	N/A
Objective	89.0	89.0		89.0	N/A
Number of Physician Office Visits per Rite Care Enrollee	5.6	5.6	5.2	5.2	N/A
Objective	5.0	5.0		5.0	N/A
Number of Emergency Room Care Visits per 1,000 Rite Care Enrollees	680	630	630	630	N/A
Objective	560	560		560	N/A
Number of Hospital Days per 1,000 Rite Care Enrollees	568	568	570	570	N/A
Objective	570	570		570	N/A

Department Of Human Services Supplemental Security Income Program

Program Mission

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

Program Description

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

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

Statutory History

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

Department Of Human Services Supplemental Security Income Program

	2010 Audited	2011 Audited	2012 Enacted	2012 Revised	2013 Recommend
Expenditures By Subprogram					
Operations	22,249,416	20,936,170	18,000,600	18,777,600	18,622,000
Total Expenditures	\$22,249,416	\$20,936,170	\$18,000,600	\$18,777,600	\$18,622,000
Expenditures By Object					
Assistance and Grants	22,249,416	20,936,170	18,000,600	18,777,600	18,622,000
Subtotal: Operating Expenditures	22,249,416	20,936,170	18,000,600	18,777,600	18,622,000
Total Expenditures	\$22,249,416	\$20,936,170	\$18,000,600	\$18,777,600	\$18,622,000
Expenditures By Funds					
General Revenue	22,249,416	20,936,170	18,000,600	18,777,600	18,622,000
Total Expenditures	\$22,249,416	\$20,936,170	\$18,000,600	\$18,777,600	\$18,622,000

Department Of Human Services Rhode Island Works

Program Mission

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

Program Description

The Rhode Island Works Program (RIW), formerly the Family Independence Program (FIP), provides support, including child care and cash payments to needy children and their families, and also represents a strong emphasis on requiring families who receive cash assistance to prepare for, and achieve, employment.

When the federal TANF Program was reauthorized under Deficit Reduction Act of 2005, more stringent policies and accountability mandates were instituted. Rhode Island therefore needed to revamp its FIA welfare program and in June 2008, the Rhode Island Works Program was enacted. After thirteen years under FIP, which had a 60 month time limit for parents and maintained ongoing cash assistance for children even after parents time off the program, Rhode Island again tackled the chance to reform its program. Using many of the valuable lessons learned on services to low income children and parents a new cash assistance program was crafted. R.I. Works created shorter time limits on cash assistance (24 in 60 months, capped at 48 months for both parents and children).

The emphasis in RIW is to achieve gainful employment and self-sufficiency, with the ultimate outcome of strong, healthy families. RIW promotes work as the source of family income and has a lifetime limit of 60 months for the receipt of cash assistance. Child care, health care, and other supportive services are an entitlement to those families pursuing economic independence. While on cash assistance, RIW beneficiaries may participate in intensive readiness services if they lack literacy skills, or if they have little or no paid work experience. To further assist RIW parents, opportunities are available to participate in short term vocational training for up to 12 months as long as the program is designed to lead to full time employment. Enhanced financial incentives in the form of income allowances encourage families to increase earned income without immediately closing to cash assistance. Under RIW, child care is considered an essential component of the long-range plan to move clients from dependence to independence.

Statutory History

The Aid to Families with Dependent Children (AFDC) Program, which was initiated in the 1930s as Title IV of the Social Security Act, is replaced by the Temporary Assistance for Needy Families (TANF) in Title I of PRWORA. Child care funding is provided under Title VI of PRWORA. Title 40, Chapter 5.2 of the General Laws sets forth the Rhode Island Works Program.

Department Of Human Services Rhode Island Works

	2010 Audited	2011 Audited	2012 Enacted	2012 Revised	2013 Recommend
Expenditures By Subprogram					
RI Works	43,781,950	38,943,917	37,219,550	40,829,172	42,480,604
Child Care	46,836,781	48,756,512	48,921,000	47,065,725	47,728,446
Total Expenditures	\$90,618,731	\$87,700,429	\$86,140,550	\$87,894,897	\$90,209,050
Expenditures By Object					
Operating Supplies and Expenses	32,767	8,476	-	-	-
Assistance and Grants	90,585,964	87,691,953	86,140,550	87,894,897	90,209,050
Subtotal: Operating Expenditures	90,618,731	87,700,429	86,140,550	87,894,897	90,209,050
Total Expenditures	\$90,618,731	\$87,700,429	\$86,140,550	\$87,894,897	\$90,209,050
Expenditures By Funds					
General Revenue	7,142,693	9,251,637	9,668,635	9,668,635	9,392,481
Federal Funds	83,476,038	78,448,792	76,471,915	78,226,262	80,816,569
Total Expenditures	\$90,618,731	\$87,700,429	\$86,140,550	\$87,894,897	\$90,209,050
Program Measures					
Percent of RI Works Families with Earned Income	17.0%	15.3%	15.3%	15.3%	16.0%
Objective	26.0%	26.0%		26.0%	26.0%
Job Retention Rate for RI Works Families No Longer Receiving Cash Assistance	14.3%	23.0%	28.0%	28.0%	35.0%
Objective	40%	40%		40%	40%

Department Of Human Services State Funded Programs

Program Mission

To administer the General Public Assistance Program (GPA), which provides: (1) medical services to ill or disabled individuals who do not quality for other federal programs, (2) emergency cash assistance for individuals who experience extreme financial hardship, (3) interim cash assistance individuals who are accepted for Title XIX Medical Assistance (Medicaid), but pending eligibility application for federal Social Security benefits (SSI), and (4) burial and funerary services for the indigent.

Program Description

The General Public Assistance (GPA) Program is designed to meet the health care needs of incapacitated and unemployable persons who are suffering from an illness, injury, or medical condition and do not qualify for other public assistance programs. The program provides for limited medical assistance (known as "GPA Medical" or GMED), consisting of physician services and a limited formulary of prescription medications. The GPA "Bridge" program provides interim cash assistance for totally disabled individuals who maintain a pending, but not yet approved, application for Supplemental Security Income (SSI). The GPA program also provides subsidized burials and funeral services for indigent persons. At the discretion of the Director of Human Services, very limited cash assistance is available from a special hardship contingency fund. Under state welfare reform statutes, two parent families who had formerly received services from GPA became eligible under FIP (now RIW).

Also Note: Though federally financed, benefit disbursements provided under the Supplemental Nutrition Assistance Program (SNAP) are budgeted within this program. However, administrative responsibility for SNAP is maintained by the Individual and Family Support program, with associated budgetary resources housed within that program.

Statutory History

Title 40 Chapter 6 of the Rhode Island General Laws (RIGL) established the General Public Assistance Program. R.I.G.L 40-6-8(d) established the State's administrative role with regard to the federal SNAP program.

The Budget

Department Of Human Services State Funded Programs

	2010 Audited	2011 Audited	2012 Enacted	2012 Revised	2013 Recommend
Expenditures By Subprogram					
Food Stamps - Benefits	225,310,142	263,761,762	298,243,902	298,243,902	298,243,902
General Public Assistance	3,279,154	3,478,439	3,466,535	3,502,120	3,502,120
Total Expenditures	\$228,589,296	\$267,240,201	\$301,710,437	\$301,746,022	\$301,746,022
Expenditures By Object					
Operating Supplies and Expenses	224,085	169,679	-	-	-
Assistance and Grants	228,365,211	267,070,522	301,710,437	301,746,022	301,746,022
Subtotal: Operating Expenditures	228,589,296	267,240,201	301,710,437	301,746,022	301,746,022
Total Expenditures	\$228,589,296	\$267,240,201	\$301,710,437	\$301,746,022	\$301,746,022
Expenditures By Funds					
General Revenue	2,234,708	2,445,265	2,491,925	2,915,669	2,541,960
Federal Funds	226,354,588	264,794,936	299,218,512	298,830,353	299,204,062
Total Expenditures	\$228,589,296	\$267,240,201	\$301,710,437	\$301,746,022	\$301,746,022

The Program

Department Of Human Services

Elderly Affairs

Program Mission

As outlined in the Division of Elderly Affairs' State Plan on Aging under the Older Americans Act, (OAA) and in the relevant laws and policies of the State of Rhode Island, the Division is dedicated to providing leadership and advocacy in emerging elder issues. The Division is committed to providing services that are consumer-focused, high quality and easily accessible. The Division will continue to enhance and implement a comprehensive coordinated system of elder service delivery that expands the options for community-based care for all older Rhode Islanders, their families, caregivers and adults with disabilities. The Division will work to strengthen programs and services that enable older Rhode Islanders to live an independent, healthy and dignified lifestyle while continuing to make meaningful contributions in the community. DEA will also continue to serve as the statewide advocacy agency for the needs of elders and adults with disabilities.

Program Description

The Division of Elderly Affairs is the designated State Agency on Aging for Rhode Island. As such, the Division is responsible for the development and implementation of a comprehensive, coordinated system of community-based care for persons sixty years of age and older and adults with disabilities. The Division is headed by a director who is appointed by the Governor. Divisional responsibilities include developing and implementing a State Plan on Aging under the Federal Older Americans Act (OAA) and serving as the state's Single Planning and Service Area on Aging under the Older Americans Act. The primary focus of the Division of Elderly Affairs is to preserve the independence, dignity and capacity for choice of seniors, their families and caregivers. The Division is the lead state agency advocate to protect and preserve the rights of older individuals; operates services designed to assist seniors in remaining independent in the community and administers and funds a wide range of community programs, activities and services. Some services are provided directly by the Division staff, but many are provided though a strong and coordinated communitybased network of senior centers, adult day centers, nutrition programs, senior housing and assisted living facilities, home care, advocacy groups, the Aging and Disability Resource Center (The POINT), Community Information Specialists (statewide regional POINTS), and other community partners. The Division's grants management staff and DEA Program staff coordinate the efforts and activities of the State Aging Network through the allocation and monitoring of federal and state funds.

Statutory History

The Department (now Division) of Elderly Affairs was created in 1977. R.I.G.L. 42-66 established and provides for the organization and functions of the department. Federal authority rests under the Older Americans Act of 1965 as amended. Article 9 of the FY 2012 Appropriations Act merged the former DEA as a division within the Department of Human Services.

The Budget

Department Of Human Services Elderly Affairs

	2010 Audited	2011 Audited	2012 Enacted	2012 Revised	2013 Recommend
Expenditures By Subprogram					
Administrative Services	891,085	448,191	237,281	332,605	524,843
Program Services	23,076,156	25,794,688	26,643,221	28,440,359	27,671,058
RIPAE	1,259,625	1,087,781	946,091	946,091	746,091
Total Expenditures	\$25,226,866	\$27,330,660	\$27,826,593	\$29,719,055	\$28,941,992
Expenditures By Object					
Personnel	2,525,148	2,750,038	2,982,410	2,948,422	3,092,737
Operating Supplies and Expenses	452,617	175,096	736,264	721,676	868,685
Assistance and Grants	22,346,743	24,388,091	24,009,416	25,957,454	24,889,067
Subtotal: Operating Expenditures	25,324,508	27,313,225	27,728,090	29,627,552	28,850,489
Capital Purchases and Equipment	2,358	17,435	98,503	91,503	91,503
Operating Transfers	(100,000)	-	-	-	-
Total Expenditures	\$25,226,866	\$27,330,660	\$27,826,593	\$29,719,055	\$28,941,992
Expenditures By Funds					
General Revenue	7,994,872	9,609,437	9,485,036	9,587,589	10,341,036
Federal Funds	16,491,994	17,621,223	17,769,466	19,559,375	18,028,865
Restricted Receipts	740,000	100,000	572,091	572,091	572,091
Total Expenditures	\$25,226,866	\$27,330,660	\$27,826,593	\$29,719,055	\$28,941,992
Program Measures					
Percentage of Elder Abuse Involving the Same Victim	36.0%	32.7%	33.0%	33.0%	33.0%
Objective	0.0%	0.0%		0.0%	0.0%
Self-Neglect Percentage of Reports Involving the Same Victim	39.0%	30.0%	30.0%	30.0%	30.0%
Objective	0.0%	0.0%		0.0%	0.0%
Percentage of Elder Abuse and Self- Neglect Reports Involving the Same Victim following Early Intervention	1.9%	1.5%	1.4%	1.4%	1.3%
Objective	0.0%	0.0%		0.0%	0.0%

Personnel

Department Of Human Services Elderly Affairs

	FY 2012		FY 2013		
	Grade	FTE	Cost	FTE	Cost
Classified					
Assistant Admin Comm & Plan Services	135	1.0	90,662	1.0	90,662
Assistant Director	139	1.0	90,369	1.0	92,362
Chief Human Services Business Officer	133	1.0	85,549	1.0	85,549
Home and Community Care Coordinator	331	1.0	77,860	1.0	77,860
Chief Resource Specialist	131	1.0	76,446	1.0	77,971
Chief Program Development	134	3.0	221,294	3.0	224,026
Clinical Social Worker	B27	1.0	73,109	1.0	73,109
Fiscal Management Officer	326	1.0	71,162	1.0	71,162
lealth Promotion Coordinator	329	1.0	64,349	1.0	67,421
luman Services Program Planner	327	1.0	60,328	1.0	60,328
luman Policy & System Specialist	324	2.0	115,464	2.0	117,477
Sr Resource Specialist	323	1.0	56,024	1.0	56,024
Customer Service Specialist III	323	1.0	56,019	1.0	57,656
Resource Specialist	322	1.0	55,969	1.0	55,969
Social Caseworker II	B24	6.0	333,667	6.0	339,438
Sr. Housing Specialist	326	1.0	54,948	1.0	56,941
nformation Aide	315	1.0	43,603	1.0	45,151
Customer Service Specialist II	323	3.0	127,585	3.0	130,498
Subtotal		28.0	\$1,754,407	28.0	\$1,779,604
Inclassified					.,,,
Director	944	1.0	95,387	1.0	95,387
sst Administrative Officer	124	1.0	47,831	1.0	49,334
Subtotal		2.0	\$143,218	2.0	\$144,721
urnover		-	(49,717)	-	-
Subtotal		-	(\$49,717)	-	-
Total Salaries		30.0	\$1,847,908	30.0	\$1,924,325
enefits					
Pefined Contribution Plan		-	-	-	19,243
ICA		-	141,365	-	147,212
<i>l</i> edical		-	293,137	-	333,497
Payroll Accrual		-	-	-	11,441
Retiree Health		-	126,766	-	132,007
Retirement		-	424,649	-	407,552
Subtotal		-	\$985,917	-	\$1,050,952
Total Salaries and Benefits		30.0	\$2,833,825	30.0	\$2,975,277
Cost Per FTE Position			\$94,461		\$99,176
tatewide Benefit Assessment		-	69,297	-	72,160
Subtotal		-	\$69,297	-	\$72,160
		30.0	\$2,903,122	30.0	\$3,047,437

Personnel

Department Of Human Services Elderly Affairs

	Grade	FY 2012		FY 2013	
		FTE	Cost	FTE	Cost
Purchased Services					
Clerical and Temporary Services		-	200	-	200
nformation Technology		-	36,000	-	36,000
Management and Consultant Services		-	5,200	-	5,200
Other Contract Services		-	3,900	-	3,900
Subtotal		-	\$45,300	-	\$45,300
Total Personnel		30.0	\$2,948,422	30.0	\$3,092,737
Distribution By Source Of Funds					
General Revenue		5.9	639,898	10.8	1,164,677
Federal Funds		24.1	2,308,524	19.2	1,928,060
Total All Funds		30.0	\$2,948,422	30.0	\$3,092,737

Child Support Enforcement

Current Child Support Collected as a Percentage of Current Child Support Owed

This indicator is a measure of current child support collected as a percentage of current child support owed during each federal fiscal year. This standard is related to Child Support Enforcement's stated function to help strengthen families through financial support, and to reduce welfare dependency by ensuring that parents live up to their responsibilities of supporting their children.

The benchmark is the latest available national percentage of current child support owed that is collected on a federal fiscal year basis.

Veterans' Affairs

Percentage of Persons Completing the Veterans' Transitional Supportive Program Who Secure Housing by program Completion

This indicator measures the percentage of veterans participating in the Veterans' Transitional Supportive Program who secure housing by the end of the program. The Veterans' Transitional Supportive Program is a six month program designed for homeless veterans to assist in securing housing and income supports. Veterans who do not require nursing home care are eligible.

The department's benchmark is based on the effectiveness of thirteen federal programs for homeless veterans in the United States. The benchmark is the latest available national average.

Health Care Quality, Financing & Purchasing

Length of Stay - Pneumonia

All medical assistance recipients receiving inpatient services in Rhode Island and border states' acute care hospitals are included in the Admission Screening and Concurrent Utilization Review program with the following exceptions: enrollees in a Medicaid managed care plan (except those having "Category A" benefits for mental health), enrollees in a coordinated health care plan which includes court-ordered hospital admissions, Medicare eligible recipients with remaining Medicare Part A benefits, and normal deliveries and newborns. The goal of the program is to assure the medical necessity, quality of care, and appropriateness of services rendered to Medicaid recipients, and to control the utilization of acute inpatient hospital services.

Although there are no published standards for length of stay (LOS), average length of stay is a generally accepted performance measure of utilization review programs. HCIA, Inc. publishes a data book on LOS, which analyzes LOS data in hospitals by diagnoses throughout the United States. Utilizing the data of the 50th percentile length of stay for the Northeastern region for 2005 (Unchanged 2005 & 2006 - The latest available data) presents a benchmark for comparison.

Lenth of Stay - Angina Pectoris

All medical assistance recipients receiving inpatient services in Rhode Island and border states' acute care hospitals are included in the Admission Screening and Concurrent Utilization Review program with the following exceptions: enrollees in a Medicaid managed care plan (except those having "Category A" benefits for mental health), enrollees in a coordinated health care plan which includes court-ordered hospital admissions, Medicare eligible recipients with remaining Medicare Part A benefits, and normal deliveries and newborns. The goal of the program is to assure the medical necessity, quality of care, and appropriateness of services rendered to Medicaid recipients, and to control the utilization of acute inpatient hospital services.

Although there are no published standards for length of stay (LOS), average length of stay is a generally accepted performance measure of utilization review programs. HCIA, Inc. publishes a data book on LOS, which analyzes LOS data in hospitals by diagnoses throughout the United States. Utilizing the data of the 50th percentile length of stay for the Northeastern region for 2005 (Unchanged 2005 & 2006 - The latest available data) presents a benchmark for comparison.

Lenth of Stay - Alcohol Dependency

All medical assistance recipients receiving inpatient services in Rhode Island and border states' acute care hospitals are included in the Admission Screening and Concurrent Utilization Review program with the following exceptions: enrollees in a Medicaid managed care plan (except those having "Category A" benefits for mental health), enrollees in a coordinated health care plan which includes court-ordered hospital admissions, Medicare eligible recipients with remaining Medicare Part A benefits, and normal deliveries and newborns. The goal of the program is to assure the medical necessity, quality of care, and appropriateness of services rendered to Medicaid recipients, and to control the utilization of acute inpatient hospital services.

Length of Stay - Chest Pain

All medical assistance recipients receiving inpatient services in Rhode Island and border states' acute care hospitals are included in the Admission Screening and Concurrent Utilization Review program with the following exceptions: enrollees in a Medicaid managed care plan (except those having "Category A" benefits for mental health), enrollees in a coordinated health care plan which includes court-ordered hospital admissions, Medicare eligible recipients with remaining Medicare Part A benefits, and normal deliveries and newborns. The goal of the program is to assure the medical necessity, quality of care, and appropriateness of services rendered to Medicaid recipients, and to control the utilization of acute inpatient hospital services.

Although there are no published standards for length of stay (LOS), average length of stay is a generally accepted performance measure of utilization review programs. HCIA, Inc. publishes a data book on LOS, which analyzes LOS data in hospitals by diagnoses throughout the United States. Utilizing the data of the 50th percentile length of stay for the Northeastern region for 2005 (Unchanged 2005 & 2006 - The latest available data) presents a benchmark for comparison.

Length of Stay - Congestive Heart Failure

All medical assistance recipients receiving inpatient services in Rhode Island and border states' acute care hospitals are included in the Admission Screening and Concurrent Utilization Review program with the following exceptions: enrollees in a Medicaid managed care plan (except those having "Category A" benefits for mental health), enrollees in a coordinated health care plan which includes court-ordered hospital admissions, Medicare eligible recipients with remaining Medicare Part A benefits, and normal deliveries and newborns. The goal of the program is to assure the medical necessity, quality of care, and appropriateness of services rendered to Medicaid recipients, and to control the utilization of acute inpatient hospital services.

Although there are no published standards for length of stay (LOS), average length of stay is a generally accepted performance measure of utilization review programs. HCIA, Inc. publishes a data book on LOS, which analyzes LOS data in hospitals by diagnoses throughout the United States. Utilizing the data of the 50th percentile length of stay for the Northeastern region for 2005 (Unchanged 2005 & 2006 - The latest available data) presents a benchmark for comparison.

Length of Stay - Depressive Disease

All medical assistance recipients receiving inpatient services in Rhode Island and border states' acute care hospitals are included in the Admission Screening and Concurrent Utilization Review program with the following exceptions: enrollees in a Medicaid managed care plan (except those having "Category A" benefits for mental health), enrollees in a coordinated health care plan which includes court-ordered hospital admissions, Medicare eligible recipients with remaining Medicare Part A benefits, and normal deliveries and newborns. The goal of the program is to assure the medical necessity, quality of care, and appropriateness of services rendered to Medicaid recipients, and to control the utilization of acute inpatient hospital services.

Length of Stay - Chronic Airway Obstructive Disease

All medical assistance recipients receiving inpatient services in Rhode Island and border states' acute care hospitals are included in the Admission Screening and Concurrent Utilization Review program with the following exceptions: enrollees in a Medicaid managed care plan (except those having "Category A" benefits for mental health), enrollees in a coordinated health care plan which includes court-ordered hospital admissions, Medicare eligible recipients with remaining Medicare Part A benefits, and normal deliveries and newborns. The goal of the program is to assure the medical necessity, quality of care, and appropriateness of services rendered to Medicaid recipients, and to control the utilization of acute inpatient hospital services.

Although there are no published standards for length of stay (LOS), average length of stay is a generally accepted performance measure of utilization review programs. HCIA, Inc. publishes a data book on LOS, which analyzes LOS data in hospitals by diagnoses throughout the United States. Utilizing the data of the 50th percentile length of stay for the Northeastern region for 2005 (Unchanged 2005 & 2006 - The latest available data) presents a benchmark for comparison.

Length of Stay - Abdominal pain

All medical assistance recipients receiving inpatient services in Rhode Island and border states' acute care hospitals are included in the Admission Screening and Concurrent Utilization Review program with the following exceptions: enrollees in a Medicaid managed care plan (except those having "Category A" benefits for mental health), enrollees in a coordinated health care plan which includes court-ordered hospital admissions, Medicare eligible recipients with remaining Medicare Part A benefits, and normal deliveries and newborns. The goal of the program is to assure the medical necessity, quality of care, and appropriateness of services rendered to Medicaid recipients, and to control the utilization of acute inpatient hospital services.

Although there are no published standards for length of stay (LOS), average length of stay is a generally accepted performance measure of utilization review programs. HCIA, Inc. publishes a data book on LOS, which analyzes LOS data in hospitals by diagnoses throughout the United States. Utilizing the data of the 50th percentile length of stay for the Northeastern region for 2005 (Unchanged 2005 & 2006 - The latest available data) presents a benchmark for comparison.

Length of Stay - Acute Pancreatitis

All medical assistance recipients receiving inpatient services in Rhode Island and border states' acute care hospitals are included in the Admission Screening and Concurrent Utilization Review program with the following exceptions: enrollees in a Medicaid managed care plan (except those having "Category A" benefits for mental health), enrollees in a coordinated health care plan which includes court-ordered hospital admissions, Medicare eligible recipients with remaining Medicare Part A benefits, and normal deliveries and newborns. The goal of the program is to assure the medical necessity, quality of care, and appropriateness of services rendered to Medicaid recipients, and to control the utilization of acute inpatient hospital services.

Length of Stay - Recurrent Depression

All medical assistance recipients receiving inpatient services in Rhode Island and border states' acute care hospitals are included in the Admission Screening and Concurrent Utilization Review program with the following exceptions: enrollees in a Medicaid managed care plan (except those having "Category A" benefits for mental health), enrollees in a coordinated health care plan which includes court-ordered hospital admissions, Medicare eligible recipients with remaining Medicare Part A benefits, and normal deliveries and newborns. The goal of the program is to assure the medical necessity, quality of care, and appropriateness of services rendered to Medicaid recipients, and to control the utilization of acute inpatient hospital services.

Medical Benefits

Neonatal Intensive Care Unit Admissions Per 1,000 Live Births

This indicator measures the percentage of neonatal intensive care unit admissions per 1,000 live births covered under the RIte Care program. Neonatal intensive care unit admissions are very sensitive to lifestyle factors in the population of pregnant females and rates vary from approximately eighty per thousand to one hundred and twenty per thousand, depending on the prevalence of risk factors in the population. This measure is indicative of improvements in the quality of prenatal health and nutrition care for pregnant females resulting in increased survival rates in low birth rate infants. Neonatal intensive care unit admissions are monitored and reported through the Medical Management Information System.

Number of Physician Office Visits per Rite Care Enrollee

These measures reflect the number of physician office visits per RIte Care Enrollee per one thousand RIte Care enrollees. The goal is to increase the rate of RIte Care enrollee utilization of physicians in order to decrease unnecessary or inappropriate hospitalizations and hospital emergency room use.

A key to containing program costs for the RIte Care population is to intervene early so as to avoid expensive use of emergency room and hospital admissions for conditions which are highly treatable in a private physician's office or in a clinical setting. Preventive services and early intervention reduce future costs and improve clinical outcomes. Physicians deliver such services.

Note that earlier versions of this report contained estimates and objectives based on the original managed care experience and the expectation of the impact of managed care in the Medicaid market. Since that time there have been changes in the federal regulations and in standards of care (e.g., required length of hospital stay) which have led to increases in utilization of certain types of care which have required that we modify our objectives. These adjustments are reflected in this report.

Number of Emergency Room Care Visits per 1,000 Rite Care Enrollees

These measures reflect the number of emergency room care visits per one thousand RIte Care enrollees. The goal is to increase the rate of RIte Care enrollee utilization of physicians in order to decrease unnecessary or inappropriate hospitalizations and hospital emergency room use.

A key to containing program costs for the RIte Care population is to intervene early so as to avoid expensive use of emergency room and hospital admissions for conditions which are highly treatable in a private physician's office or in a clinical setting. Preventive services and early intervention reduce future costs and improve clinical outcomes. Physicians deliver such services.

Note that earlier versions of this report contained estimates and objectives based on the original managed care experience and the expectation of the impact of managed care in the Medicaid market. Since that time there have been changes in the federal regulations and in standards of care (e.g., required length of hospital stay) which have led to increases in utilization of certain types of care which have required that we modify our objectives. These adjustments are reflected in this report.

Number of Hospital Days per 1,000 Rite Care Enrollees

These measures reflect the number of hospital days per one thousand RIte Care enrollees. The goal is to increase the rate of RIte Care enrollee utilization of physicians in order to decrease unnecessary or inappropriate hospitalizations and hospital emergency room use.

A key to containing program costs for the RIte Care population is to intervene early so as to avoid expensive use of emergency room and hospital admissions for conditions which are highly treatable in a private physician's office or in a clinical setting. Preventive services and early intervention reduce future costs and improve clinical outcomes. Physicians deliver such services.

Note that earlier versions of this report contained estimates and objectives based on the original managed care experience and the expectation of the impact of managed care in the Medicaid market. Since that time there have been changes in the federal regulations and in standards of care (e.g., required length of hospital stay) which have led to increases in utilization of certain types of care which have required that we modify our objectives. These adjustments are reflected in this report.

Rhode Island Works

Percent of RI Works Families with Earned Income

This indicator measures the percentage of Rhode Island Works (RIW) families, receiving some cash assistance, which also have earned income, i.e., families with a working parent or parents receiving a reduced RIW monthly grant. The data is extracted from the InRhodes client database. The continuing economic downturn in SFY 11 has greatly affected low income families, depressing their ability to obtain and maintain even part-time employment.

Job Retention Rate for RI Works Families No Longer Receiving Cash Assistance

A successful outcome for participants of the Rhode Island Works (RIW) is the ability of parents to obtain financial independence through stable employment. The Department of Human Services provides preplacement training, education, job placement, and some job retention services for a minimum of twelve months after closing their cash assistance. When families close to cash assistance due to income exceeding RI Works standards but continue to receive work supports of Medical Assistance, Child Care, or Supplemental Nutrition Assistance, the InRhodes eligibility tracking system continues to run data matches with the State Wage Information Collection Agency (SWICA). Earnings information is reported at quarterly intervals by employers to SWICA and within six months is able to shared with the Department of Human Services. Through sampling, it is possible to estimate job retention for former RI Works parents at 6 months post-employment.

Elderly Affairs

Percentage of Elder Abuse Involving the Same Victim

This indicator measures repeated abuse on the part of perpetrator(s) toward the same elder victim within a twelve- month period. The Elder Protection Services Program seeks to reduce the elder abuse recidivism rate by investigating complaints of alleged abuse of persons 60 years of age or older, intervening to alleviate abuse, and coordinating available services.

The department's goal is to reduce the recidivism rate to zero, while the department seeks to lower recidivism each year.

Self-Neglect Percentage of Reports Involving the Same Victim

This indicator measures repeated self-neglect involving the same victim within a twelve month period. The program assists adults, 60 and over, who, due to physical and/or mental impairments or diminished capacity, have difficulty performing essential self-care tasks. Such self-care tasks include securing food, clothing, shelter, and medical care, obtaining services necessary to maintain physical health, mental health, emotional well being and general safety, and managing financial affairs. The Department of Elderly Affairs and community agency staff work cooperatively to meet the needs of these elders.

The department's goal is to reduce the recidivism to zero, while the department seeks to lower recidivism each year.

Percentage of Elder Abuse and Self-Neglect Reports Involving the Same Victim following Early Intervention

This indicator measures repeated abuse on the part of perpetrator(s) toward the same elder victim within a twelve- month period and repeated self-neglect involving the same victim within a twelve month period both following early intervention. The Elder Protection Services Program seeks to reduce the elder abuse and self neglect recidivism rates.

The department's goal is to reduce the recidivism rates to zero, while the department seeks to lower recidivism each year.