

Robert P. Astorino
County Executive

Department of Social Services

Grant E. Mitchell, MD
Acting Commissioner

15863

To: Board of Acquisition and Contract

From: Grant E. Mitchell, MD, Acting Commissioner
Department of Social Services

Date: December 8, 2010

Re: Authorization to enter into a Letter of Understanding/Letter of Revenue Intercept to utilize medical providers under contract with the New York State Office of Temporary and Disability Assistance to provide medical and psychological examinations and/or intelligence tests for persons who are applying for or receiving Temporary Assistance benefits or Food Stamps or to make recommendations for Federal Disability Benefits, Supplemental Security Income, or disability determinations for Medical Assistance recipients for the term **January 1, 2011** through **December 31, 2011** at a cost not to exceed \$350,000 pursuant to an approved budget and subject to appropriations

The New York State Office of Temporary and Disability Assistance (the "State") issued a Local Commissioners Memorandum in December 2006 which outlined the above referenced program, whereby local social services districts were offered the opportunity to utilize medical providers under contract with the State to provide medical and psychological examinations and/or intelligence tests for persons who are applying for or receiving Temporary Assistance Benefits or Food Stamps or to make recommendations for Federal Disability Benefits, Supplemental Security Income, or Disability Determinations for Medical Assistance recipients.

Due to the success of this program in providing assessment services for our Temporary Assistance customers, the Department would like to continue participating in the above program. Accordingly, authority is now requested to enter into a Letter of Understanding /Letter of Revenue Intercept with the New York State Office of Temporary and Disability Assistance to provide the aforesaid services for the period from **January 1, 2011** through **December 31, 2011** at a cost not to exceed \$350,000. It is to be noted that the cost of providing these services in an amount not to exceed \$350,000 will be deducted from

Westchester's RF-2 or RF-2A Federal or State settlement funds available for Temporary and Disability Assistance.

The services provided pursuant to this agreement achieve a public purpose by identifying the physical and psychological barriers which impede the employability status of Temporary Assistance customers. As a result of these assessments, rehabilitative plans can be developed to address these issues and create a plan of action to develop their employability status. The successful removal of these medical and psychological barriers will allow the customers access to employment resources which will promote their self-sufficiency and economic security, and ultimately the dependence on Temporary Assistance.

The goals and objectives of this agreement are to provide funding for assessment services from medical providers under contract with the State, for medical and psychological evaluations. These assessments will help determine employability for Temporary Assistance recipients and be used as a tool in developing individualized plans that lead to employability status for the Temporary Assistance recipients.

The goals and objectives of this agreement are in the best interest of the County in terms of fiscal responsibility because the aim is to move Temporary Assistance recipients out of the classification of unemployable. Each customer who either moves into employability status or is referred to Social Security, represents a reduction in County expenditures when they ultimately obtain employment or receive Social Security benefits. Reaching a status of employability for Temporary Assistance customers will qualify them to become engaged in countable employment activities. It is these countable employment activities which are tracked by the Federal Government in order to continue to provide funds for these employment programs. Westchester County is required to engage all TANF customers in countable employment activities in order to meet the Federal participation rate requirements. Failure to meet these standards can result in Federal fiscal sanctions for Westchester County.

The goals and objectives of this contract will be tracked and monitored by the New York State Office of Temporary and Disability Assistance. The performance reports are based on the parameters determined by New York State. The provider submits monthly rosters of all customers served in the previous month. A quarterly performance report is also submitted to New York State. The Department can review these reports to determine fiscal savings as well as referrals to our employment programs for customers who qualify.

The success of the program can be measured by the performance outcomes reported through October 2010, in which, 2,115 customers were referred for assessments, 592 customers were determined to be temporarily unemployable and needed rehabilitation, while 64 were deemed permanently unemployable and potentially eligible for Social Security Benefits. Additionally, 776 customers were determined to be employable with restrictions. The cost savings to the County results when cases in the following assistance categories close:

- Family Assistance \$12,516 per year
- Safety Net Families \$15,636 per year
- Safety Net Individuals \$8,436 per year

The County's future assistance expenditures will be reduced since 64 customers, deemed permanently unemployable, were referred to Social Security for benefits. This may potentially

translate into a cost saving for the County in the range of \$539,904 and \$1,000,704 depending on which of the three above categories of assistance the 64 customers belong.

In addition, the 776 customers who were determined to be employable with restrictions were referred to the various programs offered by our Department for job training and job placement, setting the stage for their eventual departure from dependency on Temporary Assistance.

It is therefore requested that your Honorable Board authorize the Department of Social Services (the "Department") to enter into a Letter of Understanding/Letter of Revenue Intercept with the State for the provision of medical services to the Department's customers for the term **January 1, 2011** through **December 31, 2011** at a cost not to exceed \$350,000. The New York State Office of Temporary and Disability Assistance will intercept this amount from Westchester's RF-2 or RF-2A Federal or State settlement to fund this activity payable at the rates obtained by the State pursuant to its contract

This Agreement is exempt from the Westchester County Procurement Policy pursuant to Section 3(a) (iii) of that Policy.

A resolution is attached for your Honorable Board's approval.

APPROVED BOARD OF ACQUISITION & CONTRACT - 12/22/2010 - JOMARY VIEIRA, SECRETARY

RESOLUTION

Upon communication from the Acting Commissioner of Social Services, be it hereby

RESOLVED, that the County of Westchester, by and through its Department of Social Services (“Department”), is hereby authorized to enter into a Letter of Understanding/Letter of Revenue Intercept with the State of New York, Office of Temporary and Disability Assistance (“State”) for the provision of medical assessment services, pursuant to the State’s contract for such services, for the Department’s customers for the term commencing on **January 1, 2011** and terminating on **December 31, 2011** at a cost not to exceed \$350,000; and be it further

RESOLVED, that the aforesaid cost will be deducted from Westchester’s RF-2 or RF-2A Federal or State settlement funds available for temporary and Disability Assistance; and be it further

RESOLVED, that the County Executive or his duly authorized designee is authorized to execute any and all documents necessary to effectuate the purposes hereof.

Account to be
Charged/Credited

	Fund	Dept	Major Program, Program & Phase Or Unit	Object/ Sub-Object	Trust Account	Dollars
2011	101	22	8900	9716	_____	<\$70,000>
2011	101	22	8900	9723	_____	<\$280,000>

Budget Funding Year(s) 2011 Start Date: 1/1/11 End Date: 12/31/11
(must match resolution)

		<u>9716</u>	<u>9723</u>
Funding Source	Tax Dollars	25%	50%
	State Aid	25%	50%
<u>(\$350,000)</u>	Federal Aid	50%	-0-%
(must match resolution)	Other	_____	