



TANF and Block Grants

**Temporary Assistance for Needy Families
Social Services Block Grant
Mental Health Block Grant**

Temporary Assistance for Needy Families



Purpose

Temporary Assistance for Needy Families (TANF) is a federal block grant that allows states flexibility in using funds to: help needy families care for children; end dependence on public benefits by promoting work; reduce out-of-wedlock pregnancies; and encourage the formation and maintenance of two-parent families.

Who Is Helped

TANF was created under the welfare reform legislation of 1996. Reform eliminated Aid to Families with Dependent Children (AFDC), ending federal entitlement and creating a flexible funding source for states to use in helping needy families achieve self-sufficiency.

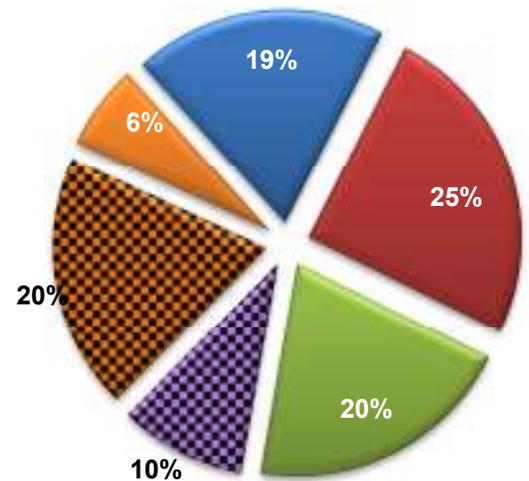
TANF funds are used to:

- Assist needy families so that children can be cared for in their own homes or in the homes of relatives.
- Reduce the dependence of needy parents on government benefits by promoting job preparation, work, and marriage.
- Prevent and reduce the incidence of out-of-wedlock pregnancies and establish annual goals for preventing and reducing the incidence of these pregnancies.
- Encourage the formation and maintenance of two-parent families.

Flexibility in the program allows transfer of a combined total of 30 percent of annual TANF funds to the Child Care Development Fund (CCDF) and the Social Services Block Grant (SSBG).

Utilization of TANF by Program SFY16

- Family Investment Programs (19%)
- Child Welfare (25%)
- Service Delivery (20%)
- SSBG Transfer (10%)
- CCDF Transfer (20%)
- Direct Child Care (6%)



Combined CCDF and SSBG Transfer = 30%.
 Combined CCDF Transfer and Direct TANF for CCA = 26%.

- ✓ *Cash assistance is limited to five years (lifetime) and assistance promotes work, responsibility, and self-sufficiency.*
- ✓ *The SFY17 Enacted Appropriation maximizes the combined amount of TANF transferred to CCDF and SSBG. Additional TANF funds are appropriated for direct child care assistance use.*

<p>Services</p>	<p>TANF funds are used for benefits and services targeted to needy families, as well as for service delivery and administrative expenses.</p> <p>The Family Investment Program (FIP) is the primary program that assists needy families so that children can be cared for in their own homes or in the homes of relatives.</p> <p>Programs designed to reduce dependence of needy parents on government benefits include:</p> <ul style="list-style-type: none"> • PROMISE JOBS • Family Development and Self-Sufficiency (FaDSS) • Family Self-Sufficiency Grants (FSSG) <p>Preventing and reducing the incidence of out-of-wedlock pregnancies and encouraging the formation and maintenance of two-parent families is supported by the following programs:</p> <ul style="list-style-type: none"> • Pregnancy Prevention • Child Abuse Prevention • Child Welfare (selected programs) • Promoting Healthy Marriage <p>Transfers to support other programs include</p> <ul style="list-style-type: none"> • Child Care Assistance • Social Services Block Grant • Service Delivery <p>✓ <i>Using a small portion of TANF funding for promoting healthy marriage allows the state to expand categorical eligibility for food assistance thus providing food assistance benefits to more lowans in need.</i></p>
<p>Goals & Strategies</p>	<p>Goals, strategies, and performance results for TANF are incorporated into the programs that TANF funds support.</p>
	<p>✓ <i>Use of TANF funds for administration of TANF programs is limited to 15 percent; Iowa spends less than 10 percent.</i></p> <p>✓ <i>Current funding and authorization for TANF expires September 30, 2016. The last true reauthorization of TANF was under the Deficit Reduction Act of 2005. Since then, authority and funding have continued under a number of continuing resolutions and similar legislation with no major policy changes.</i></p> <p>✓ <i>A number of bills have been introduced that would make selective changes to TANF; however, the most likely scenario is a one-year extension until September 30, 2017, without significant policy changes.</i></p>
<p>Funding Sources</p>	<p>The total SFY17 Enacted Appropriation for TANF funds is \$146,001,005.</p> <p>The Iowa Legislature allocates the grant award annually under the general categories described above. TANF funds not spent in the year awarded remain available to the state for future years.</p> <p>Iowa's annual TANF award is \$131,524,959. Federal law allows Indian Tribes to apply to operate Tribal Family Assistance programs. Tribes approved to operate Tribal TANF programs are allocated a portion of the state's annual TANF award based on the amount of federal funds expended by specified pre-TANF programs for Native Americans in the geographic area to be served by the Tribal TANF program.</p>

Two Tribal TANF programs currently operate in the state: the Winnebago Tribe has been allocated \$531,007 to provide TANF funded services to Native Americans in Woodbury County; while the Omaha Tribe has been allocated \$1,852 to provide TANF services to Native Americans in Monona County

The amount of funds from the state's annual TANF award available after allocations for Tribal programs is \$130,992,100.

- ✓ *Use of TANF funds for administration of TANF programs is limited to 15 percent; Iowa spends less than 10 percent.*
- ✓ *State funds of at least 80 percent of spending under the prior AFDC programs (pre-reform) must be expended as Maintenance of Effort (MOE). This requirement is reduced by the same proportion that TANF funds are allocated for Tribal TANF programs. Iowa's MOE requirement for TANF is \$65,826,383 after adjustment due to the Tribal TANF programs.*

Social Services Block Grant



<p>Purpose</p>	<p>Social Services Block Grant (SSBG) funded programs assist individuals or families to become less dependent on others for financial support or personal care; protect vulnerable children and/or adults; preserve or reunite families; support transition to independence; and avoid unnecessary or premature institutionalization.</p>	
<p>Who Is Helped</p>	<p>Iowa's intended use plan* for the state's SSBG allocation advances the following SSBG goals on behalf of Iowans:</p> <ul style="list-style-type: none"> • Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency. • Achieving or maintaining self-sufficiency, including reduction or prevention of dependency. • Preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating or reuniting families. • Preventing or reducing inappropriate institutional care by providing community-based care, home-based care, or other forms of less intensive care. • Securing referral or admission for institutional care when other forms of care are not appropriate or providing services to individuals in institutions. <p>*The 2017 SSBG Pre-Expenditure Report (intended use plan) is available on the DHS website under Reports.</p>	<p>SFY17 Projected Use of SSBG Funds, by Program</p> <ul style="list-style-type: none"> ■ Case Management (39%) ■ Protective Services-Adult (1%) ■ Foster Care - Adults (> 1%) ■ Foster Care - Children (5%) ■ Home - Based Services (25%) ■ Indep/Transitional Living Services (20%) ■ Special Services - Disabled (4%) ■ Other - Volunteers (> 1%) ■ Administrative Costs (6%)
	<ul style="list-style-type: none"> ✓ <i>Prior to the mandatory sequestration in March 2013, as outlined in the Budget Control Act of 2011, the federal SSBG allocation remained consistent at approximately \$16.6 million from 2008-2013.</i> ✓ <i>Sequestration and reallocations based on the most recent census reduced Iowa's allocation from \$16.6 million to \$15.8 million for FFY 2014 and to \$15.3 million for FFY 2015 - FFY 2017.</i> ✓ <i>This federal block grant continues to be threatened by Congressional actions:</i> <ul style="list-style-type: none"> • <i>Potential future reductions for non-exempt mandatory programs, including SSBG.</i> • <i>Total elimination of the block grant under various House of Representative Labor, Health & Human Services funding proposals.</i> 	
<p>Goals & Strategies</p>	<p>Goal: Promote Iowans' Behavioral Health Status</p> <p>Strategies:</p> <ul style="list-style-type: none"> • Provide access to mental health services. 	<p>SFY 16 key performance</p> <ul style="list-style-type: none"> • 16 people (unduplicated) were served by the State Payment Program (SPP). They all had a mental illness diagnosis.

	<p>Goal: Improve safety, permanency, and well-being for Iowa's children</p> <p>Strategies:</p> <ul style="list-style-type: none"> • Provide access to child welfare services. • Promote best practice in service delivery. 	<ul style="list-style-type: none"> • Although states are no longer ranked nationally on timeliness of adoption, DHS consistently finalizes over 50 percent of adoptions within 24 months of a child's removal from home, which exceeds the federal expectations for timeliness of adoptions. • 99.4 percent of abuse assessment reports meet timeliness requirements. • 92.2 percent of children are safe from re-abuse. 																												
	<p>✓ <i>HHS' Administration for Children & Families (ACF) has implemented new performance measure strategies to improve States' efficiency in planning for the use of SSBG funding.</i></p> <ul style="list-style-type: none"> • <i>States will receive an overall performance score reflecting the percentage of all SSBG allocated dollars that were spent as the state projected in their Intended Use Plan. The target is 85 percent. Iowa's performance on this measure has exceeded 90 percent for the the last nine years, based on aggregate SSBG expenditures.</i> • <i>In addition, ACF expects the percentage of SSBG funding used for administrative costs to be 10 percent or less; this will be formalized in a performance measure in the future. Iowa's intended use plans for 2015-2017 have anticipated administrative cost use of less than six percent.</i> 																													
<p>Funding Sources</p>	<p>In 2012, Iowa planned for an annual federal fiscal year SSBG award of over \$16.6 million. In addition, approximately \$13.9 million of TANF funds were transferred into SSBG to make nearly \$30.6 million available to achieve Iowa's annual intended use plan strategies.</p> <p>Since 2013, Iowa's SSBG allocation has gradually decreased. In part, this was due to the Budget Control Act of 2011, and sequestrations; an additional decrease in the overall award is due to state reallocations based on the most recent U.S. Census.</p> <p>Iowa allocates the grant award annually according to the percentages depicted on the chart on the preceding page.</p> <p>The projected annual federal fiscal year SSBG award in SFY17 is \$15.3 million. The planned transfer of approximately \$12.96 million TANF funds make nearly \$28.3 million available.</p>	<p>Total SSBG Expenditures*</p> <table border="1"> <caption>Total SSBG Expenditures (Millions)</caption> <thead> <tr> <th>Year</th> <th>SSBG (Millions)</th> <th>TANF (Millions)</th> <th>Total (Millions)</th> </tr> </thead> <tbody> <tr> <td>2012</td> <td>16.6</td> <td>13.9</td> <td>30.6</td> </tr> <tr> <td>2013</td> <td>15.5</td> <td>13.0</td> <td>28.5</td> </tr> <tr> <td>2014</td> <td>15.0</td> <td>13.0</td> <td>28.0</td> </tr> <tr> <td>2015</td> <td>14.5</td> <td>13.0</td> <td>27.5</td> </tr> <tr> <td>2016</td> <td>14.5</td> <td>13.0</td> <td>27.5</td> </tr> <tr> <td>2017</td> <td>15.3</td> <td>12.96</td> <td>28.3</td> </tr> </tbody> </table> <p>*2012-15 are actual; 2016-17 are projected</p>	Year	SSBG (Millions)	TANF (Millions)	Total (Millions)	2012	16.6	13.9	30.6	2013	15.5	13.0	28.5	2014	15.0	13.0	28.0	2015	14.5	13.0	27.5	2016	14.5	13.0	27.5	2017	15.3	12.96	28.3
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	<ul style="list-style-type: none"> ✓ <i>In SFY17, the vast majority of the SSBG funding will be used to fund case management and child welfare services.</i> ✓ <i>Up to 10 percent of TANF funds can be transferred to SSBG, however the percentage of TANF funds is decreasing due to other competing service needs.</i> 																													

Mental Health Block Grant



<p>Purpose</p>	<p>The Mental Health Block Grant (MHBG) is a federal formula grant awarded to each state based on a combination of population and other economic factors. The MHBG is administered by the U.S. Dept. of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) and is managed by the DHS, Division of Mental Health and Disability Services.</p> <p>The MHBG is required by federal statute to provide comprehensive, community-based mental health services to adults with serious mental illness and children with a serious emotional disturbance and to monitor progress in implementing a comprehensive, community-based mental health system. States are allowed to set aside up to 5 percent of the annual allocation for administrative costs.</p>
<p>Who Is Helped</p>	<p>Iowa law required that 95 percent of the MHBG be used for eligible community mental health services to carry out the plan submitted to, and approved by, SAMHSA. The legislation requires that providers use the MHBG funds for staff training or services to adults with a serious mental illness and children with a serious emotional disturbance. Of the 95 percent of the MHBG allocated to eligible providers, 70 percent is required to be distributed to accredited community mental health centers (CMHC).</p>
<p>Services</p>	<p>CMHC use the MHBG funds for the following purposes:</p> <ul style="list-style-type: none"> • Community-based mental health services for adults with serious mental illness and children with a serious emotional disturbance not otherwise covered by Medicaid or third party insurance; • Integrated Health Home care coordination for adults with a serious mental illness and children with a serious emotional disturbance who are not eligible for Medicaid; • Staff training in evidence-based practices such as Cognitive Behavioral Therapy, parent-Child Interactive Therapy, and Motivational Interviewing; • Development of trauma-informed service systems; • Mental Health First Aid training; • First Episode Psychosis (FEP) programs. <p>The remaining 25 percent is retained by the Department for projects and programs of benefit to the mental health system, including:</p> <ul style="list-style-type: none"> • Required data collection; • Consumer stipends for mental health education; • Peer support and family peer support training; • The Office of Consumer Affairs; <p>Support of the Mental Health Planning Council.</p>
<p>Goals & Strategies</p>	<p>Goal: Promote choice for people with disabilities.</p> <p>Strategy: Assure Iowans with mental health conditions can be effectively served in Iowa and have effective community-based options.</p> <p><i>The Goals and Strategies identified in the FFY16-17 MHBG Plan include:</i></p> <ul style="list-style-type: none"> ✓ <i>Improve the system of care for children with mental health needs and their families by improving interdepartmental coordination of children’s mental health services and creation of a plan for children’s mental health crisis services.</i> ✓ <i>Increase access to quality peer support services through increased training opportunities for persons wishing to become certified peer support and family peer support specialists.</i>

	<p>✓ <i>Increase access to regional crisis services for lowans experiencing a mental health-related crisis.</i></p>									
<p>Funding Sources</p>	<p>The MHBG is funded entirely through the federal allocation.</p> <ul style="list-style-type: none"> • The FFY16 MHBG allocation is \$4,067,863. • The FFY16 allocation includes an increase of \$381,568 from the FFY15 allocation of \$3,686,277. SAMHSA increased the amount of each state's allocation to allow for 10 percent of the MHBG to be set aside for FEP programs. • In the most recent fiscal year (FY2016), DHS had 33 contracts with a total of \$4,323,076 committed to those contracts. • The state has two years to expend each year's MHBG allocation. 	<p>Projected Distribution of MHBG Funds in SFY17</p> <ul style="list-style-type: none"> ■ Administration (5%) ■ CMHC (70%) ■ Other Mental Health Providers (25%) <table border="1"> <caption>Projected Distribution of MHBG Funds in SFY17</caption> <thead> <tr> <th>Category</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Administration</td> <td>5%</td> </tr> <tr> <td>CMHC</td> <td>70%</td> </tr> <tr> <td>Other Mental Health Providers</td> <td>25%</td> </tr> </tbody> </table>	Category	Percentage	Administration	5%	CMHC	70%	Other Mental Health Providers	25%
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<p>Legal Basis</p>	<p>Federal:</p> <ul style="list-style-type: none"> • Title XIX, Part B, Subpart II and Subpart III of the Public Health Service Act and Title 42, Chapter 6A, Subchapter XVI of the United States Code. <p>State:</p> <ul style="list-style-type: none"> • 2015 Iowa Acts, Chapter 130, Section 2. 									