

## **Cash and Medical Assistance Program Estimates Instructions for ORR-1 and Justification Statement**

CMA grants 45 CFR 400.11(b) (1). For quarterly grants for cash assistance, medical assistance and related administrative costs, including assistance and services to unaccompanied minors (“CMA grants”), a State must submit to the Director, or designee, yearly estimates for reimbursable costs for the fiscal year, identified by type of expense, and a justification statement in support of the estimates no later than 45 days prior to the beginning of the fiscal year in accordance with guidelines prescribed by the Director. **Submission should be in compliance with State Letters # 12-09, # 12-13, and #13-03, including the guidance clarification chart for State Letter #12-13.**

**Due Date:** August 15 (annually)  
**Submit To:** OLDC

### **1. Refugee Cash Assistance (RCA)**

***The estimate that each State provides should be developed using the following procedures:***

#### ***(a) RCA Recipient Costs***

1. Provide your State’s rationale for estimating the number of Refugee Cash Assistance (RCA) Recipients using the following procedures to derive estimates:
  - a. Obtain refugee and SIV arrival estimates from the Department of State/PRM and local voluntary resettlement agencies (volags) for all projected NEW arrival numbers, sponsored cases, and formulate estimates for other populations expected to be served (asylees, entrants, trafficking victims) based on historical data for the federal fiscal year beginning 10/1;
  - b. Include all local resettlement agencies’ Matching Grant program estimates for NEW enrollments and the historic self-sufficiency percentage at 120-180 days;
2. Consider using a client-loading chart to calculate average monthly numbers of recipients as they enter the RCA program and include the existing caseload anticipated to roll over from previous year:
  - a. From historical data, estimate the average case size. If RCA average case size is greater than 2 persons; provide an explanation in your narrative.
  - b. Enter the number of RCA recipients currently enrolled whose RCA eligibility will cross 2 federal fiscal years and then add those anticipated to enter each month in the new fiscal year, continuing to enter these numbers up to the estimated months of RCA utilization (if you are using an RCA utilization of less than 12 months), or up to 12 months if the State’s data indicates that refugees are using the full 12 months of RCA;
  - c. Multiply the monthly number of cases receiving RCA by the Monthly Assistance Payment (MAP) amount per case size;

3. Calculate the average of total monthly costs for your Estimated Average Monthly Unit Cost (Column B).
4. Calculate the average of total monthly recipients for your Estimated Average Monthly Recipients/Users (Column C).
5. Annualized amount of estimated RCA costs will automatically multiply (Column D). If using OLDC, the ORR-1 will also automatically calculate your Estimated Fiscal Year Expenditures.

**(b) RCA Administration**

1. Distinguish line-item costs incurred by the State agency in coordinating the provision of RCA, i.e., public assistance bureaus, application intake centers and eligibility determination functions.
  - a. Include charges estimated for intake staff time allocation, case management, training and monitoring by supervisors, etc.
  - b. If the State is a public/private partnership, provide detail on contracted volag recipients and cost factors from which the estimated allocation of RCA funds derive including administrative costs estimated by the volag contractors.
2. Enter annual RCA Administration estimated cost (Column D).

**(c) Subtotal**

1. The sum of amounts in Column D rows (a) and (b) will automatically calculate a subtotal of your estimated Fiscal Year RCA expenditures. If using OLDC, the ORR-1 will also automatically calculate the subtotal.

**2. Refugee Medical Assistance (RMA)**

**(a) Refugee Medical Assistance Recipients**

1. Provide rationale for estimating the number of Refugee Medical Assistance (RMA) Recipients:
  - a. Include arrival estimates from Department of State PRM and local voluntary resettlement agencies (volags) for projected NEW arrival numbers, populations, sponsored cases for the federal fiscal year beginning 10/1;
2. Consider using a loading chart to calculate average monthly RMA recipients as they enter the program and include caseload anticipated to roll over from previous year:
  - a. From historical data, calculate the average number of months of usage per RMA recipient;
  - b. Enter the number of RMA recipients currently enrolled whose RMA eligibility will cross 2 federal fiscal years because their 12-month RCA time eligibility will expire in the next federal fiscal year; continuing to enter these numbers up to the estimated months of usage;

- c. Multiply the total monthly number of RMA recipients (new and carryover) by an historical monthly average amount of RMA claims expended for this population;
3. Calculate the average of total monthly costs for your Estimated Average Monthly Unit Cost (Column B).
4. Calculate the average of total monthly recipients for your Estimated Average Monthly Recipients/Users (Column C).
5. Annualized amount of estimated RMA costs will automatically multiply (Column D). If using OLDC, the ORR-1 will also automatically calculate your Estimated Fiscal Year Expenditures.

**(b) RMA Administration - See State Letter 12-13 for Detailed Clarification**

1. Distinguish line-item costs incurred by the State agency in coordinating the provision of RMA, i.e., public assistance bureaus, application intake centers and eligibility determination functions.
  - a. Include charges estimated for intake staff time allocation, training and monitoring by supervisors, etc.
2. Enter annual RMA Administration estimated cost (Column D).

**(c) Medical Screening Recipients**

1. Provide a breakdown of costs for each medical service provided to calculate an estimated “unit” Refugee Medical Screening cost, with justification that these services are not currently covered by Medicaid and/or State/local public health programs.
2. Consider using a client loading chart to calculate the average monthly refugee medical recipients and include recipients anticipated to roll over from previous year.
3. Indicate average length of time from refugee arrival to health screening. Enter the number of medical screening recipients currently enrolled whose medical screening eligibility will cross 2 federal fiscal years and those anticipated to be screened each month in the new year, continuing to enter these numbers up to the eligibility limitation, as appropriate.
4. Multiply by month the number of Refugee Medical Screening Recipients by the average “unit” cost (from 1. above);
5. Calculate the average of total monthly costs for your Estimated Average Monthly Unit Cost (Column B)
6. Calculate the average of the total monthly medical screening recipients for your Estimated Average Monthly Recipients/Users (Column C).
7. Annualized amount of estimated Medical Screening costs will automatically multiply (Column D). If using OLDC, the ORR-1 will also automatically calculate your Estimated Fiscal Year Expenditures.

**(d) Medical Screening Administration<sup>a</sup> - See State Letter 12-13 for Detailed Clarification**

1. Provide line item amounts and detail of how costs were derived for administering the Refugee Medical Screening program, including those incurred by the State agency receiving funds directly from ORR and by the State health department administering and monitoring contracts or reimbursement of medical screening services and their costs, as appropriate. Line items should include overhead, personnel costs based on FTE, and operational costs such as travel and supplies and must be supported by estimator factors;
2. Submit copies of formal agreements between the State agency and State health department, as appropriate, and contractual agreements with amounts for medical practitioners, i.e., local public health clinics or other health care providers in the community, anticipated to receive RMA funds for medical screening services. Indicate if the contracted amount is based on an aggregate “unit” cost reimbursable per client; cost per medical procedure/service provided, or a negotiated budget.
3. Enter annual Medical Screening Administration estimated cost (Column D).

**(e) Subtotal**

1. The sum of amounts in Column D rows (a) through (d) will automatically calculate a subtotal of your estimated Fiscal Year RMA expenditures. If using OLDC, the ORR-1 will also automatically calculate the subtotal.

**3. Unaccompanied Refugee Minors (URM)**

**(a) Services for URMs**

1. Provide detail of a “unit” URM cost to determine the average derived from various placement and service costs:
  - a. Services for URMs includes the costs of contracted URM service provider agencies, counties and states related to direct provision of foster care and independent living services, such as case work, case review, establishing legal responsibility, development/training/oversight of foster care homes and other placements, coordinating with legal and other service providers, medical and mental health services, interpretation, tutoring, maintenance payments, independent living stipends and payments, and education and training vouchers. Unit costs on services should be based on specific placement or service costs, e.g., foster care, group home, therapeutic care, independent living, education vouchers, etc., toward calculating an average “unit” service cost. Considerations should also be made for any additional costs related to providing parity under your state’s Title IV-B plan or Title IV-E plan. Line item detail with estimates, FTE amounts for direct service staffing, and calculation factors should be provided for the above categories and other direct expenses, including anticipated medical coverage/expenses not covered by Medicaid or state/county resources.

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<sup>a</sup> Only for State Refugee Programs with the ORR Director’s written approval to charge medical screening costs to RMA per 45 CFR 400.107.

2. Provide rationale for estimating the number of Unaccompanied Refugee Minors to be served in the fiscal year:
  - a. Include information from Department of State PRM, national and local voluntary resettlement agencies (volags) with placement responsibility, and input from ORR to determine projected arrival numbers, populations, care needs, etc.; Using this information, provide rationale for anticipated number of URM to be served in the fiscal year.
3. Consider using a client-loading chart of arrival information to calculate the monthly number of URM recipients as they enter the URM program, including caseload anticipated to roll over from previous year as well as estimated emancipations. Use information from your URM service provider to gather estimated numbers of URM to be served on a monthly basis:
  - a. Enter the number of URM enrolled from the previous year and those anticipated to be placed each month during the new fiscal year. Take into consideration the estimated numbers of arrivals your URM service provider expects to receive as well as the residual caseload, and the number of anticipated emancipations throughout the year.
  - b. Multiply the monthly number of URM by the average “unit” cost (from 1. above);
4. Calculate the average of total monthly costs for your Estimated Average Monthly Unit Cost (Column B)
5. Calculate the average of the total monthly URM for your Estimated Average Monthly Recipients/Users (Column C).
6. Annualized amount of estimated URM service costs will automatically multiply (Column D). If using OLDC, the ORR-1 will also automatically calculate your Estimated Fiscal Year Expenditures.

***(b) URM Administration – See State Letter 12-13 and its Guidance Clarification Chart (attached to State Letter 13-03) for Detailed Clarification***

1. *State Administration.* Includes State Refugee Coordinator or other State personnel/office administrative costs of overall management, planning and coordination, policy, program development, oversight, consultation, training, data collection, and direct management and monitoring of URM where applicable. Provide line item amounts and detail of how costs were derived for administering the URM program. Line items should include overhead, indirect expenses, personnel costs based on FTE, and operational costs such as travel and supplies.
2. *County Administration (if applicable).* Includes county administrative and oversight costs for providing planning, coordination, management, monitoring and data collection of URM care provision, separate from actual direct foster care and independent living service provision. Provide line item amounts and detail of how costs were derived for administering the URM program. Line items should include overhead, indirect expenses, personnel costs based on FTE.
3. *Contractor Administration.* Includes contracted URM service provider administrative and oversight costs for providing planning, coordination, management, monitoring and data collection of URM care provision, separate from actual direct foster care and independent living

service provision. Line items should include overhead, indirect expenses, personnel costs based on FTE.

4. In the **written justification for cost estimates**, break out the three types of administrative costs so that it is clear how much of the administrative costs are State costs and how much are county or contractor costs.
5. Submit copies of any formal agreement between the State agency and State Children's Administration, as appropriate, with amounts for state oversight and review of URM cases. Provide copies of contractual agreement(s) including amount for URM service provider(s) anticipated to receive URM funds.
6. Enter annual URM Administration estimated cost (Column D).

**(c) Subtotal**

1. Amounts in Column D rows (a) and (b) will automatically calculate a subtotal of your estimated Fiscal Year URM expenditures. If using OLDC, the ORR-1 will also automatically calculate the subtotal.

**4. Administration – Program Coordination and Planning<sup>b</sup>-See State Letter 12-13 and its Guidance Clarification Chart (attached to State Letter 13-03) for Detailed Clarification**

1. Present line-item costs incurred by the State agency in the overall management of the Refugee Program, including overhead, personnel costs, operational costs, out-of-state travel (e.g., ORR National Consultation) and in-state travel. Include other functions such as finance and contracts not covered by overhead allocated costs. Per State Letter 12-13 and its Guidance Clarification chart, note that all URM administrative costs should appear in line 3b, URM Administration (as opposed to line 4 for Program Coordination and Planning).
2. For each line item, provide justification and/or cost factors for deriving the estimated amount based on: cost allocation plans (overhead); staff FTE and function and benefits; travel costs justified by number of staff and travel purpose, e.g., Consultation, training, quarterly meetings, technical assistance and monitoring.
3. If your program is administered through contracts with non-State organizations, include the administrative costs of the non-State organizations. In the **written justification for cost estimates**, break out the two types of administrative costs so that it is clear what portion is State administrative costs and which portion is contractor administrative costs.
4. Enter the total Program Coordination and Planning administrative amount as your Estimated Fiscal Year expenditures (Column D).

**5. Total Administration**

1. The sum of rows 1(b), 2(b), 2(d), 3(b) and 4 in Column D will automatically calculate your estimated Total Administration Fiscal Year expenditures.

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<sup>b</sup> In accordance with 45 CFR 400.13c.

## 6. Total Estimate<sup>c</sup>

1. Your total estimated Fiscal Year expenditures are automatically calculated. When using the OLDC, the ORR-1 still requires the user to enter manually the Total Estimate based upon entries provided. If the OLDC detects an error in the math upon final submission, the user receives an error message and can check calculations and entries to correct the estimate.

### ***THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN:***

The purpose of this information collection is to serve as the application for grants under the Cash and Medical Assistance (CMA) program. Public reporting burden for this collection of information is estimated to average 0.6 hours per grantee, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a mandatory collection of information required by ORR program regulations at 45 CFR 400.11(b). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0030 and the expiration date is XX/XX/20XX. If you have any comments on this collection of information, please contact [draprograms@acf.hhs.gov](mailto:draprograms@acf.hhs.gov).

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<sup>c</sup> Total equals sum of lines 1(c), 2(e), 3(c), and 4 of Column D.