Instrument 1: Child Support Administrative Data Extract

Variable Name	CPR Expected Output	SAVES Demonstration Site Output
Member ID	To be used for matching cases in payment and enforcement action files (if submitted separately)	
Violence Assessment (FVI = Family Violence Indicator)	Binary (yes/no)	
CP Race	Categorical	
NCP Race	Categorical	
CP Ethnicity	Binary or Categorical	
NCP Ethnicity	Binary or Categorical	
CP Age	Date of Birth (month/day/year)	
NCP Age	Date of Birth (month/day/year)	
CP Sex/gender	Binary or categorical	
NCP Sex/gender	Binary or categorical	
CP Zip code of residence	Categorical	
NCP Zip code of residence	Categorical	
Marital status on case	Categorical	
Number of children on case	Total number	
Age of youngest child on case	Date of birth (month/day/year)	
Number of cases CP has	Total number	
Number of cases NCP has	Total number	
CP Income (without CS)	Amount and frequency (ex per hour, annually etc.)	
NCP Income (without CS)	Amount and frequency (ex per hour, annually etc.)	
CP Employment Status	Full-time, part-time, seasonal, self-employed, unemployed	
NCP Employment Status	Full-time, part-time, seasonal, self-employed, unemployed	

The Paperwork Reduction Act Statement: This collection of information is voluntary and will be used to better understand efforts to increase safe access to child support, parenting time, and establishment of parentage services for survivors of domestic violence. Public reporting burden for this collection of information is estimated to average 180 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-0531, Exp: 09/30/2025. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Center for Policy Research; 1570 Emerson Street Denver, Colorado 80218.

County/Region	Categorical	
Case creation date	Date (month/day/year)	
Order establishment date	Date (month/day/year)	
Referral source (e.g., mandatory, self)	Categorical (e.g., mandatory, self)	
Order establishment method	Categorical (admin, judicial, default, etc.)	
CP attorney representation	Binary (yes/no)	
NCP attorney representation	Binary (yes/no)	
Case type	Categorical (child support, intrastate, Medicaid only, etc.)	
TANF status at establishment	Categorical (current, former, never)	
Monthly Support Obligation (MSO)	Amount of current support due per month (exclude arrears, interest, etc.)	
Arrears balance at order establishment	Total amount	
Arrears balance at extract	Total amount	
Method of paternity establishment	Categorical (VAP, court, etc.)	
Method of child medical coverage ordered	Categorical (NCP, CP, Medicaid, etc.)	
Method of child medical coverage provided	Categorical (NCP, CP, Medicaid, etc.)	
National Medical Support Notice (NMSN) issued to NCP Employer	Binary (yes/no)	
Verified Employer at extract	Binary (yes/no)	
Date employment verified (or previous 12 months)	Date (month/day/year)	
Was good cause application made?	Binary (yes/no)	
Good cause application date	Date (month/day/year)	
Good cause outcome	Categorical or binary	
Evidence of Case closure activity?	Binary (yes/no)	
Case closure reason	Categorical (interested in closure for safety)	
Case closure date	Date (month/day/year)	
Was there a request for FVI	Binary (yes/no)	
FVI Application	Date (month/day/year)	
Date FVI Assigned	Date (month/day/year)	
FVI Recertification	Binary (yes/no)	
FVI Recertification Date	Date (month/day/year)	

Date FVI Removed	Date (month/day/year)	
Enrolled in address confidentiality program	Yes/no/type?	
Can be submitted in separate spreadsheet		
Current support due (monthly for prior 12 months)	Month 1 amount due Month 2 amount due Month 3 amount due Month 4 amount due Month 5 amount due Month 6 amount due Month 7 amount due Month 8 amount due Month 9 amount due Month 10 amount due Month 11 amount due Month 12 amount due	
Current support paid (monthly for prior 12 months)	Month 1 amount paid Month 2 amount paid Month 3 amount paid Month 4 amount paid Month 5 amount paid Month 6 amount paid Month 7 amount paid Month 8 amount paid Month 9 amount paid Month 10 amount paid Month 11 amount paid Month 12 amount paid	
Was wage withholding or income assignment a method of payment in the prior 12 months? Or was the last payment in month 11 paid by wage assignment?		
Enforcement actions ever taken on case	Type and date action taken (credit bureau, driver's license, recreation license, passport, contempt, FIDM, etc.)	