

June 19, 2017

Chairman Brady
U.S. House Ways and Means Committee
1102 Longworth House Office Building
Washington, DC 20515

Ranking Member Neal
U.S. House Ways and Means Committee
1102 Longworth House Office Building
Washington, DC 20515

Dear Chairman Brady and Ranking Member Neal:

On behalf of First Focus Campaign for Children, a bipartisan children's advocacy organization dedicated to making children and families the priority in federal budget and policy decisions, we thank you for your leadership in bringing five important child welfare bills (H.R. 2866, H.R. 2742, H.R. 2857, H.R. 2834, H.R. 2847) to the floor of the U.S. House of Representatives.

Modernizing the Interstate Placement of Children in Foster Care Act (H.R. 2742) provides funding for states (\$5 million) in the development and implementation of the National Electronic Interstate Compact Enterprise (NEICE). NEICE is a web-based electronic case-processing system that supports the administration of the Interstate Compact on the Placement of Children (ICPC) by exchanging data and documents across state jurisdictions so that children in foster care can be placed in locations other than the state in which they currently reside. The current ICPC administrative process keeps children in limbo for far too long while caseworkers make copies of case files and mail them to the potential receiving state. There was a NEICE pilot project that launched in 2013 in six states and results showed that it significantly shortened the time to place children across state lines, and saved participating states thousands of dollars in mailing and copying costs.¹ This bill would require that all states join the NEICE system so all children will have the opportunity to be placed safely and securely across state borders more quickly. We are supportive of this bill.

Improving Services for Older Youth in Foster Care Act (H.R. 2847) extends the Chafee Foster Care Independence Program for older youth from age 21 to age 23. Recent data from the National Youth in Transition Database found that by age 21, of youth who had been in foster care, 43% reported having had a homeless experience, 32% reported having a child, 20% had been incarcerated in the past two years, and 38% were receiving public assistance other than educational assistance, or employment skills training.² This bill would help keep services available to youth in transition to adulthood and provide supports needed for youth to succeed. We are very supportive of this effort and request additional dollars be allocated for the Chafee program to compensate for the additional youth that would be eligible for services if this bill were to pass.

Reducing Barriers for Relative Foster Parents (H.R. 2866) directs the Secretary of Health and Human Services to establish model licensing standards that States must meet after enactment. The bill would help create uniformity in licensing standards and improve the current practice of ensuring a child is placed in a safe home. In addition it would ensure that relative caregivers have adequate training and preparation to care for and access resources for the child in their care. We are disappointed that this bill was amended to have states comply with licensing requirements through Title IV-B dollars rather than Title IV-E dollars because this will make it harder for many states to effectively improve their licensing standards., unless they reduce Title IV-B

¹ <http://www.aphsa.org/content/AAICPC/en/actions/NEICE.html>

² *Highlights from the NYTD Survey: Outcomes reported by young people at ages 17, 19, and 21 (Cohort 1)*, Data brief #5, November 2016. Accessed at: https://www.acf.hhs.gov/sites/default/files/cb/nytd_data_brief_5.pdf

funding from another program. Title IV-E dollars would provide more flexibility for states to implement the model licensing standards.

The Partnership Grants to Strengthen Families Affected by Parental Substance Abuse Act (H.R. 2834) was originally introduced to reauthorize the Regional Partnership Grants, which are aimed at improving child well-being, permanency and safety outcomes who are at risk of entering foster care or are currently in an out-of-home placement due to a parent's substance use. According to the most recent report to Congress by the U.S. Department of Health and Human Services, the Regional Partnership Grant (RPG) program established 53 partnerships and has served over 15,000 families, including more than 25,500 children during the five year grant period.³ Families were able to access more services for longer periods of time, and programs were able to expand their programs to more families and children in need through the RPGs. Overall, child and family well-being was improved as well as the program models themselves. Reauthorization of these grants are critical, as more and more children are entering foster care due to substance use including opioids. In fact, according to the last AFCARS report, 32% of children entering foster care is due to the drug abuse of a parent.⁴ RPGs have been shown to divert children from entering foster care and works to help stabilize families as a whole. It is critical that this program be reauthorized to ensure supports for families struggling with addiction where the safety of children is at risk.

In a similar vein to (H.R. 2834), the Supporting Families in Substance Abuse Treatment Act (H.R. 2857) allows family foster care maintenance payments for children placed with a parent in a licensed residential family-based treatment facility for substance abuse. The trauma that a child experiences from being removed from their caregiver can be reduced by allowing a child to stay with their parent as they seek treatment. By providing support to families undergoing treatment, states can prevent more children from entering foster care. This bill has been amended to cap the amount of foster care maintenance payments families in residential treatment can receive, instead of allowing the full cost to be reimbursed through IV-E dollars. We believe this will limit the services available to children and families in residential treatment programs.

These bills are important components of the Family First Prevention Services Act (H.R. 253) and we are hopeful that the bill in its entirety will be passed soon in the House and Senate, as many provisions of the larger child welfare reform effort are not addressed in the current bill package to be voted on. We appreciate your attention to these issues and hope you will consider reinstating the previous versions of (H.R. 2866, H.R. 2834, and H.R. 2857) as you vote tomorrow. Should you have any questions about this letter, please contact Rricha Mathur at r-richam@firstfocus.org. We look forward to continue working with you on these issues and other proposals to improve the well-being of America's children and youth.

Sincerely,



Bruce Lesley
President

³ Targeted Grant to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Methamphetamine or Other Substance Abuse: Fourth Annual Report to Congress, U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, http://www.cffutures.org/files/RPG_4th_Rpt_to_Congress_508.pdf.

⁴ U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, www.acf.hhs.gov/programs/cb Preliminary Estimates for FY 2015 as of June 2016 (23), Page 2.