

## I. ADMINISTRATION

### A. Authority and Organization

In October 2007, the State of Tennessee informed the Office of Refugee Resettlement (ORR) in writing of its desire to withdraw from the refugee program by June 30<sup>th</sup> of 2008. After numerous conversations between the two, ORR accepted Tennessee's request and began their search for a replacement designee.

ORR scheduled phone calls with all VOLAGs in the state – Catholic Charities in Nashville, World Relief in Nashville, Catholic Charities in Memphis, and Bridge in Knoxville and Chattanooga – and with Siloam Family Health Services (the medical screening provider statewide) to gauge interest in becoming the replacement designee for Tennessee. At the conclusion of these discussions and after securing required approvals at the federal level, ORR selected Catholic Charities of Tennessee (Nashville) as the interim provider of refugee services in the state.

Catholic Charities of Tennessee has been providing services to refugees since its inception in 1962, which the agency was created in order to facilitate the placement of Cuban refugee children in foster homes in the Nashville area. The agency's 21 programs and over \$18 million dollar budget is administered through five departments (TOR, Social Services, Mission Advancement (marketing and development), Family Assistance and Community Employment, Refugee and Immigration Services, and Administration). TOR's budget accounts for over \$10 million of the total agency budget. TOR's program records are stored primarily in a secure online database.

Catholic Charities is in compliance with all federal, state, and local government standards, as well as EEOC laws and standards. The mission of TOR is "to foster growth, integration, and self-sufficiency by providing financial, technical, and professional support to refugees and the agencies who serve them in the State of Tennessee."

In May 2008, a new department, the Tennessee Office for Refugees (TOR), was created within Catholic Charities. (See attached organizational chart for Catholic Charities of Tennessee.) In order to create separation between the existing local affiliate and the department administering the statewide program, the resettlement director of Catholic Charities, Holly Johnson, left her post in July 2008 to serve as the state refugee coordinator of Tennessee. The newly-established department has separate staff (program and fiscal) and office space from the local affiliate, and a committee of the Board was established to provide oversight of this new venture. This committee has included ad hoc members from Nashville, Knoxville, and Memphis, as well as a former state refugee coordinator.

On October 1, 2010, Tennessee officially became a Wilson-Fish state and Catholic Charities was named as the Wilson-Fish provider of the Tennessee PPP (public-private partnership) program.

Staffing the Tennessee Office for Refugees are the following qualified individuals:

- **Holly Johnson**, *State Refugee Coordinator* – ultimate responsibility for all Wilson-Fish (and other TOR) activities
- **Louisa Saratora**, *Assistant State Refugee Coordinator* – primary responsibility for all program monitoring and several program reports
- **Michael Evans**, *State Refugee Health Coordinator* – primary contact for all refugee health-related issues in the state, coordinates the medical screening program and RMA
- **Mattie Callahan**, *Refugee Cash Assistance Coordinator* – primary responsibility for coordinating the RCA program
- **Tajah Bohannon**, *Refugee Cash Assistance Specialist* – primary responsibility for RCA program support and data entry
- **Amy Callis**, *Database Administrator* – primary responsibility for maintaining data integrity, upgrades to database, and report generation
- **Maegen Hughes**, *Grants & Communication Specialist* – primary responsibility for grant support and internal and external communications
- **Joan McArdle**, *Office Manager* – primary responsibility for coordinating workflow in the TOR office, maintaining equipment, serving as receptionist, and recordkeeping and data entry
- **Debby Morrow**, *Controller* – primary responsibility for fiscal recordkeeping, report generation, and fiscal monitoring
- **Cathy Page**, *Staff Accountant* – primary responsibility is fiscal monitoring support
- **Ann Schmidt** – *Staff Accountant* – primary responsibility is fiscal bookkeeping

Please see attached TOR organizational chart for reporting relationships.

ORR funds the Tennessee Refugee Program, which has three mandatory program components: 1) cash assistance (RCA) 2) medical assistance (RMA), and 3) social services. Catholic Charities of Tennessee will provide these three components through subagreements with resettlement agencies in the state.

In addition to these mandatory components, ORR also funds other discretionary programs in the state. While these may change over time, the Tennessee Refugee Program currently offers a Targeted Assistance (formula) program, a School Impact program, a program that serves Elderly Refugees, and a Health Promotion program. These awards are also managed through subagreements, and are not limited to resettlement agencies.

Five national voluntary agencies are represented in the state of Tennessee. World Relief has an affiliate in Nashville and Memphis, and the United States Conference of Catholic Bishops has a Nashville affiliate. Bridge Refugee Services, a collaboration between two national voluntary agencies (Church World Service and Episcopal Migration Ministries), has program offices in both Knoxville (where the administrative office is also located) and Chattanooga. The Tennessee Refugee Program provides the flexibility to enable each agency to serve their clients in the manner best suited to its unique resettlement program and philosophy. See accompanying charts for a list of the name, location, and number of clients to be served.

Although the program operates primarily in the largest four counties in the state (Davidson/Nashville, Knox/Knoxville, Shelby/Memphis, and Hamilton/Chattanooga), the Tennessee Refugee Program is a statewide program and services are available to all eligible refugees in the state.

## B. Assurances

As the Wilson-Fish provider for the State of Tennessee, Catholic Charities' TOR will do the following, per 45 CFR 400.5 (g), (h), and (i):

- 1) Comply with the provisions of Title VI, Chapter 2 of the Act, and official issuances of the Director
- 2) Meet the requirements in Part 400
- 3) Comply with all other applicable Federal statutes and regulations in effect during the time that we are receiving grant funding
- 4) Amend the Plan to comply with ORR standards, goals and priorities established by the Director, as needed
- 5) Assure provision of services to all refugees without regard to race, religion, nationality, sex, or political opinion
- 6) Assure we will convene planning meetings of public/private sector at least quarterly, unless exempted by ORR

## II. ASSISTANCE AND SERVICES

### A. Coordination with other VOLAGs, State Agencies, and Mutual Assistance Associations

All resettlement agencies in Tennessee have strong relationships with local mainstream service providers and other programs for families. In every case, the goal of resettlement is self-sufficiency. In addition to financial self-sufficiency, resettlement agencies strive to ensure the client can access needed services on their own – true self-sufficiency. In doing this, they regularly access and utilize other community programs for which they are qualified. Staff network with staff in other agencies so that clients can be referred to other support programs.

Resettlement agencies are experts in assisting clients from arrival through self-sufficiency, and the Wilson-Fish program fits easily into this model. Clients are assessed and make a decision on their cash assistance program early into the resettlement process, usually during their primary orientation. At that time, clients are in the resettlement office learning about what to expect from the R&P program and options for cash and employment assistance. Eligibility Caseworkers attend that meeting and assist clients enrolling in RCA to complete the paperwork then.

In some locations, DHS staff also attend these orientations so that clients can apply for food stamps, TennCare, and Families First at the same time; those who definitely do not meet the eligibility criteria for TennCare are enrolled in RMA and either RCA or Match

Grant. Those who may meet the eligibility criteria for TennCare are not enrolled in RMA until TOR receives proof of a denial. Clients who may be eligible for Families First must provide proof of application with RCA enrollment. They may receive up to three RCA differential payments while waiting on an approval or denial notice from DHS. Once clients provide either the approval or denial letter from Families First, their RCA will continue as differential payments if Families First eligible, or become direct full payments if denied. An underpayment check will be issued to correct their RCA payments for the month(s) that they were eligible to receive a full payment but only received the differential payment.

Eligibility Caseworkers who make the initial eligibility determination for RCA and RMA assist the client in completing required paperwork and submit it to TOR for approval. Approval letters are generated from the TOR office and sent to the client, copied to the Eligibility Caseworker. RCA checks are given to the Eligibility Caseworkers with a receipt; the Eligibility Caseworkers are responsible for getting the check to the client and a signed receipt back to TOR.

In each agency, a staff member is responsible for coordinating the Medical Screenings with the local clinic provider. In Nashville, this process is started before the client arrives. In all cases, the medical screening is conducted over two visits and is in compliance with ORR/CDC recommended guidelines for screenings.

## **B. Coordination of Employment and ELT for RCA Clients**

All clients who are enrolled in RSS or TAG must complete a Family Self-Sufficiency Plan (FSSP). RCA clients must enroll in RSS within two weeks of applying for RCA. Clients are easily served with employment services through the same agency that provides their RCA management. TAG will only serve clients beyond their initial eight months in the US so that we can ensure the close coordination needed between RCA and the program providing employment services. ELT is provided either by the resettlement/RCA agency, through a tutor coordinated by the agency, or through another local ELT program that is convenient for clients. In all cases, if ELT is part of the client's FSSP, the client is required to attend classes and their attendance is documented to ensure compliance. If they do not attend ELT regularly, their RCA may be terminated for non-compliance.

## **C. Refugee Cash Assistance**

The objective of cash assistance is to provide financial support to help meet the subsistence needs of the refugee for up to eight months after arrival in the United States.

Tennessee's RCA program is statewide, and is a true partnership between TOR and its partners (local refugee resettlement affiliates of national VOLAGs). TOR enters into subgrantee agreements with all local affiliates for an Eligibility Caseworker(s) who handles the initial eligibility and enrollment functions of the state office at their

site. The Eligibility Caseworker determines initial eligibility for the program(s), assists clients in completing the enrollment paperwork, refers them for appropriate services for which they may be eligible (such as TANF/Families First and Medicaid/TennCare) and submits the completed RCA paperwork to TOR for approval. The Eligibility Caseworker is also charged with conducting follow-up with the client monthly to ensure their continued eligibility. In addition, the Eligibility Caseworker reviews the RCA Rights and Responsibilities and Due Process Procedures document with the client, and ensures that check receipts and other reports are completed accurately and submitted to TOR by established deadlines. Once the enrollment paperwork is received by TOR, it is reviewed by staff to determine final eligibility and to communicate the decision – via a letter in the client’s native language – to the client.

A client must meet immigration status and identification requirements or be the dependent children of, and part of the same filing unit as, individuals who meet the requirements.

Refugees that meet all other eligibility criteria are eligible to receive RCA as long as their household income does not exceed 150% of the Federal Poverty Level (FPL). The resource limit for eligibility is \$2,000 in cash/items of value, disregarding the value of one vehicle (this matches TANF guidelines).

- Resources remaining in the applicant’s country of origin will not be considered when determining eligibility.
- A sponsor’s income and resources (unless meeting the definition of Joining Spouses) will not be considered when determining eligibility.
- Any monies provided to the refugee through the Department of State or Department of Homeland Security (such as R&P initial cash allowance) will not be considered when determining eligibility.

Newly-arrived single adults and married couples without minor children are categorically eligible to receive RCA.

A single adult, even when arriving with other case members who share the same case number, will be considered a separate case and his/her income eligibility determination will also be conducted separately. For example, a 55-year-old woman arrives with her adult daughter and no other case members. Though they may share an apartment, the women are two separate cases and their income will be determined separately for eligibility purposes.

Families with children under 19 may be categorically eligible for TANF/Families First, and must first apply for that program.

- If denied for TANF/Families First, clients are eligible for the full amount of RCA if they meet all other eligibility criteria for RCA.
- If approved for TANF/Families First, clients are eligible for an RCA differential if they meet all other eligibility criteria for RCA.

A client is eligible for RCA beginning upon the date s/he arrives in the U.S. and remains eligible for eight months after this date, assuming all other program eligibility criteria are met. The month in which the refugee arrived is considered his/her first month of eligibility, with the next seven months rounding out the eight-month eligibility period for RCA. Cash assistance begins as of the date on which a complete application is received by TOR.

A client is only eligible for RCA as long as his/her permanent residence remains in Tennessee.

The affiliate must refer refugees who are 65 years of age or older, or who are blind or disabled, promptly to the Social Security Administration to apply for SSI (Supplemental Security Income). The affiliate should also determine eligibility for RCA and, if otherwise deemed eligible, enroll the client in RCA until the application for SSI has been approved or until the client no longer meets the eligibility criteria for RCA.

A client who is a full-time student of higher education is *not* eligible for RCA.

If spouses arrive separately, the established spouse's income will be considered when determining income eligibility for a newly-arrived spouse using the income criteria for a household of two. Spouses who are eligible for RCA but arrived in the U.S. on different dates will have separate closure dates for RCA. If the established spouse is no longer time eligible for RCA or not eligible for RCA due to his/her immigration status (i.e. citizen), the income eligibility determination for the newly-arrived spouse will be conducted using the income criteria for a household of two, even though the RCA case will be a case of one. If a newly-arrived spouse arrives with dependent children, s/he must first apply for TANF/Families First. If the case is denied, eligibility staff will conduct an income determination on the household size that includes the established spouse, newly-arrived spouse, and dependent children. The newly-arrived spouse is required to present a TANF/Families First denial letter to be considered for full RCA eligibility. An RCA differential payment may be provided to those cases who do qualify for TANF/Families First, assuming all other RCA eligibility criteria are met. If a newly-arrived spouse is deemed income ineligible for RCA, s/he is still eligible for employment services, English Language Training, and other social services.

Occasionally spouses will separate while still time eligible for RCA. If one of the spouses moves out of the household during the eight-month RCA eligibility period, TOR will consider these clients as two single households instead of a case of two.

An affiliate enrolling a secondary migrant in RCA must verify with the sponsoring agency in the originating city or with the welfare office in the originating state that any cash assistance the client may have been receiving in that state has been terminated. An affiliate enrolling a secondary migrant in RCA must also verify that

the refugee had not quit, refused a job, or been terminated from a job within 30 days of his/her application for RCA. A secondary migrant must still be time eligible for RCA and time eligibility begins when the secondary migrant entered the U.S. – *not* when the client migrated to Tennessee.

Clients who are currently participating in other federally-funded cash assistance programs (such as Match Grant and SSI) are not eligible to also participate in RCA. The exception to this is those participating in the TANF/Families First program. Clients enrolled in this program may also be eligible for an RCA differential payment if all other eligibility criteria for the RCA program are met.

All full RCA payments will be issued by check made payable to the principal applicant or head of the case as indicated on the RCA enrollment form. A voucher accompanies each check; the client signs this voucher to confirm receipt of the RCA payment for that month, and to confirm that there is no additional information about the client’s case that has not yet been reported. Tennessee’s RCA program does not include employment incentives or income disregards.

Maximum RCA payment levels in Tennessee are as follows:

<b>Family Size</b>	<b>Amount</b>
1	\$335
2	\$450
3	\$570
4	\$685
5	\$755
6	\$825
7	\$895
Each additional member	\$70

Maximum TANF/Families First payment levels in the state are significantly lower than RCA levels. They are as follows:

<b>Family Size</b>	<b>Amount</b>
1	\$95
2	\$142
3	\$185
4	\$226
5	\$264
6	\$305
7	\$345
Each additional member	Approximately \$41

The difference between the TANF/Families First payment level and the RCA payment level is the RCA differential that will be paid to eligible clients who qualify for both programs. The maximum differentials are as follows:

<b>Family Size</b>	<b>Amount</b>
1	\$240
2	\$308
3	\$385
4	\$459
5	\$491
6	\$520
7	\$550
Each additional member	\$29

Tennessee’s TANF/Families First program meets the following requirements which deem client eligible for receiving the differential RCA payment:

1. Tennessee’s TANF/Families First rate is lower than the ORR Wilson-Fish rate listed at 45 CFR 400.60 (and above) and
2. Tennessee provides the full amount of TANF/Families First funding to the eligible refugee and
3. TOR will offer the RCA differential payment in the form of a direct vendor payment to ensure that the client’s TANF/Families First and/or Medicaid assistance will not be negatively impacted when determining financial eligibility for these programs.
4. Tennessee agrees to refer the TANF/Families First clients to the resettlement agencies for services.

Additionally, during the first eight months after the client’s arrival in the United States and as long as they are also participating in the RCA program, the TANF/Families First work participation requirements will be considered as being met. Please see attached DHS guidelines that outline this agreement.

All eligible refugees in the state will have reasonable access to RCA. Enrollment services are available in all resettlement agencies in Tennessee (located in Chattanooga, Knoxville, Memphis, and Nashville); clients that reside outside of these communities may enroll in the RCA program but will also be required to comply with program guidelines in order to remain eligible for RCA. RSS employment services are provided by resettlement agencies; this makes for easy coordination of RCA and accompanying employment services.

All clients enrolled in the RCA program (full or differential) must enroll in employment services (usually through the Refugee Social Services program offered through each resettlement agency) within two weeks of enrolling in RCA, and must participate in employment services within 30 days of enrolling in RCA. A Family

Self-Sufficiency Plan (FSSP) will be developed jointly by the client, the case manager, and the employment specialist.

Clients must continue to meet eligibility criteria in order to remain in the program. Eligibility staff will conduct an initial determination upon enrollment and will re-determination each client's eligibility every month until the client is working or is no longer time-eligible.

All clients receiving RCA must be employable and willing to be employed, unless they are exempt from this requirement. Clients must accept any appropriate job offer.

An RCA recipient will be considered employable unless the individual is:

1. 18 years old or younger and a full-time student;
2. Ill, when determined on the basis of sound medical evidence that the illness or injury is serious enough to temporarily prevent entry into employment or training;
3. Incapacitated, when determined by a physician or licensed or certified psychologist that a physical or mental impairment, by itself or in conjunction with age, prevents the individual from participating in employment or training;
4. 65 years of age or older;
5. Caring for another member of the household who has a mental or physical impairment which requires, as determined by a physician or licensed or certified psychologist, care in the home on a substantially continuous basis, and no other appropriate member of the household is available;
6. A parent or caretaker relative of a child under the age of one who personally provides full-time care of the child with only very brief and infrequent absences from the child;
7. Working at least 30 hours a week in unsubsidized employment expected to last a minimum of 30 days. This exemption continues to apply if there is a temporary break in full-time employment expected to last no longer than 10 workdays.
8. Pregnant, if it has been medically verified that the child is expected to be born in the month in which such registration would be required or within the next 3 months.

Inability to communicate in English does not exempt a refugee from enrolling in employment services, participating in employability service programs, carrying out a job search, or accepting an appropriate offer of employment.

A re-determination of eligibility will be conducted monthly for each client enrolled in the RCA full or differential program. The purpose of this re-determination is to ensure that the client is still fully in compliance with his/her FSSP (including attendance at English classes, if applicable) and to ensure that all income earned over the past month is documented in the client's case file (via a copy of the client's paystub). This re-determination is conducted by the eligibility caseworker and information on each client (even those who are in compliance) is provided, in writing, to the RCA Coordinator on a monthly basis. The period considered during the re-determination is the previous 30 days, except for income verification. To determine income eligibility, we use a two calendar month lookback (comparable to TANF).

Compliance with the client's FSSP is monitored by his/her caseworker, employment specialist, and/or eligibility caseworker. All progress toward meeting goals outlined in the FSSP (and any issues with compliance) will be documented in the client's case file.

All clients will receive a written notice at least ten days before their RCA is either reduced or terminated. This notice will be provided in the native language of the client; when written translation is not possible, the client will receive a verbal translation of the written notice.

An underpayment is an RCA payment that is less than the amount for which the client was eligible. An underpayment may result from administrative or client error. When an underpayment occurs, TOR will notify the client of the underpayment, in writing, stating the month(s) in which the underpayment occurred, the amount of the underpayment, the reason for the underpayment, and the method in which the underpayment will be corrected. If a client is identified as having been underpaid, TOR will correct the underpayment by issuing a check for the amount of the underpayment within two weeks of the underpayment notice.

Any retroactive underpayment corrections are not counted as income when determining eligibility for continued cash assistance.

An overpayment is an RCA payment that exceeds the amount for which the client was eligible. An overpayment may result from administrative or client error, or from willful misrepresentation by the client. Clients will be notified of the overpayment, via a letter from TOR, at least ten calendar days prior to any attempts to recover the overpayment. The letter will include the following information:

1. The amount of the overpayment,

2. The month(s) in which the overpayment(s) occurred,
3. The reason for the overpayment, and
4. The methods of repayment available to the client.

If the client is still time-eligible for RCA, and the amount of the overpayment is less than the amount of the client's next cash assistance payment(s), the overpayment will be deducted automatically from the client's next RCA check(s). If the amount of the clients' remaining RCA benefit is less than the amount owed to TOR, the client will need to repay the remaining balance via another method.

In the case of an overpayment that needs to be repaid, clients will be instructed to contact the eligibility caseworker at his/her enrolling agency to negotiate repayment. The VOLAG shall attempt to negotiate a reimbursement plan with the affected client(s). Methods of reimbursement include:

- Lump sum payment of the total amount owed
- Monthly installment payments
- A combination of the above options, with the client making a "down payment" and paying the remainder in monthly installments

Suggested criteria to follow in considering a repayment schedule are as follows:

- Repayments should be made as quickly as possible, ideally within three (3) to six (6) months.
- Monthly installments generally should not exceed 10% of a household's gross monthly income, but should be deemed appropriate on a case by case basis in order to account for extenuating circumstances in the household.

Upon enrolling in RCA, all clients receive a copy of the RCA Rights and Responsibilities and Due Process Procedures document (see attached) in their native language. If a document in their native language is not available, it will be verbally interpreted for them. This document serves as the client's official consent to enroll in the program, and that consent is documented with their signature (and the interpreter's, if applicable) at the bottom.

If the client fails to meet his/her responsibilities under the RCA program as agreed to in the Rights and Responsibilities document – and does not have good cause for failing to meet these responsibilities – s/he may be subject to sanctions which could result in the loss of benefits for one month for the first failure to cooperate and two months for any subsequent failure.

The Sanctioning/Due Process Procedures are as follows:

1. *Warnings and Notices.* Before any action is taken to reduce, suspend, or terminate RCA benefits, the client's caseworker will discuss the situation with the client and give the client the opportunity to correct the action without any

consequences. If the action is not corrected, the client will receive a written notice at least ten calendar days before the date on which the action is to take effect that will tell the client what action is to be taken and the reasons for that action.

- A. If the reason for the action is a failure to remain in compliance with his/her FSSP, the written notice will also notify the client of his/her right to mediation and then a hearing (if the issue is not resolved through the mediation).
  - B. If there is another reason for the action, the written notice will notify the client of his/her opportunity to request mediation and the right to request a hearing.
2. *Mediation.* Mediation is a conciliation process through which the client and the staff of the Tennessee Refugee Program have an opportunity to explore the circumstances of the proposed action and possibly resolve the issues through consultation and agreement. The written notice will advise the client that s/he can request mediation by contacting his/her caseworker within five business days of the date of the written notice.

In the mediation process, the client will have the opportunity to explain his/her actions and why benefits should not be reduced, suspended, or terminated. The mediation process is conducted by staff of the resettlement program and may be conducted over the telephone if necessary. The client may bring someone to assist him/her in explaining his/her position. If necessary, an interpreter will be provided.

Either party can end the mediation process at any time if they believe the dispute cannot be resolved through mediation. If the dispute is not resolved through the mediation process, the client will be provided an opportunity to request an oral final appeal hearing on the dispute and proposed action.

If the client failed to contact his/her caseworker to schedule a mediation within five business days of the date of the written notice, the Tennessee Refugee Program will treat that failure as a decision to not participate in the mediation process.

3. *Oral Hearing and Right of Final Appeal.* If the dispute is about the client's failure to meet his/her responsibilities under the FSSP, s/he has a right to an oral hearing. If the dispute concerns another reason for the reduction, suspension, or termination of assistance, the client has a right to request an oral hearing that may or may not be granted depending on the circumstances. In either case, the client will have five business days from the conclusion of the mediation process to submit a written request for a hearing, as instructed in the written notice. If the client fails to request mediation within five business days of the date of the written notice and therefore did not participate in the mediation process, the

client will have ten business days from the date of the written notice to submit a written request for a hearing to TOR.

After receiving the written request for a hearing, the client will be provided with a Final Appeal Hearing Form which will need to be completed and returned to TOR within five business days. TOR will review this form and notify the client in writing about whether a final appeal hearing will be scheduled, and, if a hearing is scheduled, where and when the hearing will be held.

If the client fails to request a hearing in writing within five business days following the conclusion of the mediation process or, if the client did not make a timely request for mediation, within ten business days from the date of the written notice, the adverse determination will be final. When that determination becomes final, it will take effect on the date noted in the original written notice which advised the client of the determination.

If a hearing is set, TOR will designate an impartial individual who has not been directly involved in the initial determination of the action or the mediation as the hearing officer who will hear and decide the dispute. TOR will provide the client with an interpreter upon request. The client may designate any person s/he chooses to serve as an advocate in the hearing process.

Following the conclusion of the oral hearing, the hearing officer will issue a written decision based on the governing law, regulations, policies, and the evidence presented at the oral hearing, that sets for the decision on the issue in dispute, the reasons for the decision, and the evidence supporting the decision.

While the client is participating in the mediation and/or hearing process, his/her benefits will not be terminated until the mediation and, if necessary, the hearing process is completed. But, if the final administrative action upholds the decision to reduce, suspend, or terminate benefits, the client will be responsible to repay the benefits that were received during that process.

Regardless of the final decision in the appeal, RMA (Refugee Medical Assistance) coverage will not be terminated unless the client no longer meets the eligibility requirements for that program.

If a member of the client's household is non-compliant with the FSSP and receives a reduction or termination of benefits and services, the other compliant household members may continue receiving benefits and services.

All programs funded by ORR will provide culturally- and linguistically-appropriate services to clients as required by Title VI (Prohibition Against National Origin Discrimination) and as required by 45 CFR 400.55 and 45 CFR 400.156.

TOR emphasizes the need for bi-lingual/bi-cultural staff in all funded partner organizations so that clients can be served in the best manner possible.

Additionally, the following types of documents are translated into primary client languages (currently Somali, Arabic, Burmese, Nepali, and Spanish):

1. Documents that need a client's signature
2. Documents that explain program services
3. Documents that explain client rights and responsibilities
4. Documents that explain key elements of the program
5. Documents that provide notice of change of benefits or opportunity for hearings
6. Documents that explain eligibility, duration and amount of cash assistance payments, and participation requirements, including penalties for non-cooperation

If translated documents are not available, resettlement staff will ensure a verbal translation is provided to the client. This verbal translation is documented by a client signature and caseworker/interpreter signature. The language needs of clients are reviewed at least annually to ensure that we have written translations available for most clients.

Client record confidentiality is taken very seriously by TOR staff. All client data is stored in an online secure database and in locked filing cabinets in TOR's locked office in a locked building (three levels of security). Information is never provided without a release from the client. Clients do sign releases that allow TOR and the resettlement agency, as well as TOR and the medical screening clinic, to share information that is in the interest of helping the refugee successfully resettle.

#### **D. Refugee Medical Assistance and Medical Screening**

##### *Refugee Medical Assistance*

The objective of medical assistance is to ensure that refugees who are not eligible for Medicaid/TennCare have access to medical services comparable to those provided by Medicaid/TennCare.

TOR contracts RMA through IMG (International Medical Group) to provide this coverage through a private insurer. The partnership with IMG has worked

extremely well over the past year and we anticipate that that relationship will continue.

Eligibility caseworkers are charged with making initial eligibility determinations for RMA; final determinations are made once all required application materials are received by TOR. Additionally, eligibility staff is responsible for providing orientation to all new enrollees about what is covered under IMG as well as a basic introduction to the American health care system as it exists in Tennessee. This caseworker will also assist clients in enrolling in their employer-provided health plan once the client begins working. The orientation provided to each enrollee includes information related to the requirement for pre-authorization for certain medical expenses as well as the need to use a participating provider. This orientation is provided in written format in the client's native language; if the document is not available in that language, a verbal translation is provided. See attached copy of RMA Orientation paperwork.

Refugees that meet all other eligibility criteria are eligible to receive RMA as long as their household income and resources at the date of application is 200% of the FPL or less. If a refugee earns over 200% of FPL after s/he starts working, s/he is still eligible for RMA until the time eligibility period expires. There is no monthly re-determination of eligibility for RMA. Eligibility caseworkers may not consider any cash assistance payments provided to the client in determining eligibility for RMA. Additionally, the following cannot be considered in making an eligibility determination:

- Resources remaining in the applicant's country of origin.
- A sponsor's income and resources.
- Any monies provided to the refugee through the Department of State or Department of Homeland Security (such as R&P initial cash allowance).

A client is eligible for RMA beginning upon the date s/he arrives in the U.S. and remains eligible for eight months after this date, assuming all other program eligibility criteria are met. Medical assistance begins as of the date on which all completed paperwork is received by TOR – regardless of when s/he arrived in the U.S. Eligibility can be retroactive to as far back as the date of arrival in the US if necessary.

A client is only eligible for RMA as long as his/her permanent residence remains in Tennessee.

Newly-arrived single adults and married couples without minor children are categorically eligible to receive RMA and do not need a denial letter from TennCare before enrolling. Families with children under 19 may be categorically eligible for Medicaid/TennCare, and must first apply for that program. If they are denied but meet all other eligibility criteria for RMA, they will be eligible for the program as long as they submit a copy of their Medicaid/TennCare denial letter with their RMA

application. If the children are eligible for Medicaid/TennCare but the parents are denied, the parents may apply for RMA with a copy of the letter that verifies their denial.

A client who is a full-time student of higher education is not eligible for RMA.

Clients aged 65 – 79 may be enrolled in RMA while they are waiting for their Medicare/TennCare approval notice.

If a refugee is unemployable due to physical or mental health problems, s/he should apply for SSI (disability) within one week of his/her 31<sup>st</sup> day in the U.S.. The refugee will be eligible for RMA while awaiting a response from SSI only with a signed application that provides an SSI application date.

Refugees who are time eligible and lose their Medicaid/TennCare eligibility due to income from employment should be transferred to RMA without conducting an eligibility determination. This is to ensure that refugees who enter employment within the first few weeks after arrival in the U.S. are not penalized for accepting early employment. A copy of the denial letter must accompany the application. The refugee will continue to receive medical assistance until s/he reaches the end of the eight-month eligibility period.

IMG coverage mirrors Medicaid/TennCare pretty closely. The highlights of the plan are as follows:

- No deductible or co-pay for in-network providers
- \$75,000 policy period maximum
- Hospital room and board charges based on the semi-private room rate
- Office visits for illness covered at 100%, as well as diagnostic lab tests, x-rays, ultrasounds, CT scans, and MRIs related to the illness
- Surgery and anesthesia charges by a physician
- Radiation and chemotherapy
- Well-woman visit and pap smear, plus a screening mammogram for women over age 40
- Ambulance transport if resulting in hospitalization (maximum of \$2,500)
- Emergency room charges if directly admitted to the hospital
- Hearing aid, up to \$1,400 per year, and related services by audiologist
- Extended care facility and home nursing: daily maximum of \$100, policy maximum of \$5,000
- Emergency dental treatment to alleviate acute onset of pain: \$250 maximum per policy period; treatment must be obtained within 24 hours of the sudden and unexpected occurrence of pain
- No co-pay for prescriptions that are medically necessary and related to a covered condition

RMA coverage for refugees also includes the Refugee Assistance Program (RAP), a short-term mental health counseling program (primarily telephonic) for clients who present mental health concerns. This resource is also available to TOR and partner staff for advice on mental health issues for their clients. After the maximum of three sessions with RAP staff, clients will be referred (if necessary) to a local mental health provider that will continue to assist them. The services under RAP are often provided by a counselor who speaks the client's native language (rather than involving an interpreter in the confidential counseling session). This year, we are especially excited to offer our clients Teledoc, a telephonic/webcam/FaceTime service that provides basic medical assistance over a computer or smartphone rather than having to go to the doctor's office for service. We believe this will provide not only the same level of service as the client would receive at the doctor's office, but will be a huge time saver for resettlement staff, as well.

Any refugee who is offered health coverage by his/her employer should accept this coverage. A client cannot receive both RMA coverage and coverage provided through an employer's plan.

A client who is enrolled in the health insurance plan provided through his/her employer and therefore no longer enrolled in RMA may request reimbursement for his/her share of the employer-provided insurance premium, up to the monthly amount that would be paid on his/her behalf to IMG (currently \$640.25 per person per month; next fiscal year will be \$608.25 per person per month).

All client information will be treated with the strictest of confidence, and will be accessed by TOR on a need-to-know basis only. Information requests by other organizations will not be honored. Business Associate Agreements or other releases will be signed, as needed, with partner agencies so that information can be shared.

### *Refugee Medical Screening*

The objective of the refugee medical screening program is to verify the results of the overseas medical assessment and identify any health conditions that pose a threat to the individual's or public's health. Critical to the success of this program is to ensure that follow-up occurs (evaluation, treatment, observation and/or referral) for Class A and B conditions identified overseas, to identify persons with communicable diseases of potential public health importance and facilitate public health surveillance, and to identify personal health conditions that adversely impact on effective resettlement (e.g. job placement or attending school).

Tennessee's refugee medical screening program is statewide in scope and serves all new arrivals and other eligible refugees. The screening follows the recommended CDC/ORR Medical Screening Protocol, and also the Center for Disease Control's (CDC) recommendations for adult immunizations. Additionally, Zoster and HPV are provided to certain populations under the doctor's discretion. All refugees are tested for the HIV virus as this testing is no longer conducted as part of the overseas

medical assessment. A chart showing the services included in the Medical Screening is included in the Appendix.

Eligibility for refugee medical screenings is limited to new arrival refugees within their first 90 days in the U.S. In many cases, the screening will be completed within the refugee’s first 30 days in the U.S.

Siloam Health Care Services, Inc. provides medical screenings for refugees resettling in the Middle Tennessee area and has contracted with community clinics in east and west Tennessee (Chattanooga, Knoxville, and Memphis) to provide medical screenings in their respective areas. This provides a comprehensive and coordinated approach to health care delivery that is accessible to the client, flexible in its approach, and utilizes a variety of community resources to ensure that refugees are introduced effectively to local health resources and to the health care system in general. Simultaneously, these coordinated services also lend themselves to improving the overall health care delivery system for newly-arrived refugees and to improving the cultural competence of the medical providers responding to health issues of refugee populations.

The screening is normally conducted in two appointments held a few days apart. Scheduling the screening appointment(s) and follow-up on any necessary health issues is coordinated by the resettlement agency that sponsored the refugee.

The method of payment for the refugee medical screening program will be a per capita amount based on an estimate of refugee arrivals for the year. The contract will be reimbursed at a rate of approximately \$418 per capita for the screening, plus a variable rate for the adult immunizations based on the age and gender of the client.

The additional cost of immunizations for adults will be reimbursed at the following rates, with HPV and Zoster being provided under the Doctor’s discretion (based on 1,987 refugees of which 66% are adults):

No. of indiv.	Vaccine	Followup Rate	Total # shots	Shots		Total per shot
				Etc Fee <sup>9</sup>	Admin. Fee <sup>10</sup>	
1246	Tdap <sup>1</sup>		1,246	\$75.00	\$3.00	\$78.00
1246	Td #1 <sup>2</sup>	60%	748	\$65.00	\$3.00	\$68.00
748	Td #2 <sup>2</sup>	50%	374	\$65.00	\$3.00	\$68.00
872	MMR #1 <sup>3</sup>		872	\$100.00	\$3.00	\$103.00
623	MMR #2 <sup>3</sup>	55%	343	\$100.00	\$3.00	\$103.00
1246	Varicella #1 <sup>4</sup>		1,246	\$150.00	\$3.00	\$153.00

1246	Varicella #2 <sup>4</sup>	55%	685	\$150.00	\$3.00	\$153.00
598	Influenza <sup>5</sup>		598	\$35.00	\$3.00	\$38.00
274	HPV x3 <sup>6</sup>		274	\$185.00	\$3.00	\$188.00
37	PPV <sup>7</sup>		37	\$110.00	\$3.00	\$113.00
75	Zoster <sup>8</sup>		75	\$220.00	\$3.00	\$223.00
<b>TOTAL:</b>			6,497			

**NOTES:**

- 1 All Adult Refugees to receive Tdap x 1
- 2 All refugees from camps in Nepal and Thailand receive Td x 1; all others receive x 2
- 3 All refugees from Thailand, Malaysia, Nepal and Kenya who have received MMR x2 abroad need no MMR.  
All refugees from Iraq receive MMR x2. All refugees from countries where 1 MMR was given pre-departure receive MMR x 1
- 4 All refugees receive Varicella x 2
- 5 All non-pregnant adults receive Influenza vaccine x 1 (seasonal)
- 6 All adult females age 18-26 receive HPV x 3
- 7 All adults age ≥ 60
- 8 All adults age ≥ 65
- 9 Includes administering of shot
- 10 Coordination cost at clinic level (not statewide administration)

Periodically, health advisories or screening recommendations are issued by the CDC or ORR. Refugee health providers are expected to implement all screening and treatment recommendations for refugees endorsed by the CDC or ORR, as they are able.

In addition to coordinating statewide goals and objectives for the refugee health program and working collaboratively with other organizations in the implementation of these goals, TOR will work independently and with partner organizations to:

- Identify emerging health issues among newly-arrived and longer-term resident refugees based upon health assessment data, and recommend appropriate responses to these problems in consultation with medical experts,
- Determine gaps in service and/or utilization and conduct follow-up to determine how to fill those gaps,
- Conduct or coordinate training for providers and interested parties in cultural competency in primary care, public health and other health education topics,
- Establish and develop networks and communities of practice addressing and serving refugee health priorities, and
- Advocate for improved health care services to refugees in Tennessee toward the goal of improving health outcomes and quality of life for refugee populations across the state.

**E. Refugee Social Services**

a. Employability Services

The objective of the employment services is to place employable clients in an appropriate job as quickly as possible, ensuring that the household is self-sufficient as soon as possible (preferably before the 8-month RCA eligibility period expires).

Employment services are a critical – perhaps the most critical – component to helping a refugee achieve self-sufficiency. Employment services usually includes not only job placement, but coaching prior to the job interview, transportation to and from the job interview, and regular follow-up with the client and his/her employer. Regular follow-up ensures continued satisfaction by both the employer and the client, and is a required service under the RSS program.

A client is eligible for Employment Services under the Refugee Social Services (RSS) grant for up to five years after date of arrival/eligibility.

A client is employable if s/he is between the ages of 18 and 64 and is not exempt from participation in employment services. Additionally, in some cases, a client under 18 or over 64 chooses to participate in employment services. All employable adults should participate in employment services unless one wage-earner is sufficient for the household to be self-sufficient.

Lack of English may not be used as a reason to refuse a job offer or employment services. English language training and a job search/employment can occur simultaneously.

Priority for serving clients under the RSS program is defined by the federal regulations (45 CFR 147) and is listed below:

1. All newly arriving refugees during their first year in the U.S.
2. Refugees who are receiving cash assistance
3. Unemployed refugees who not receiving cash assistance
4. Employed refugees in need of services to retain employment or to attain economic independence

Service will be provided to the client from the point of enrollment until s/he is self-sufficient (or sanctioned from employment services), regardless of whether or not the client has exceeded their eight-month eligibility period for RCA.

Services to each client are unique and based on the individual needs reflected in the Family Self-Sufficiency Plan and on the education, skills, and barriers noted in the client's Employment Plan.

Although employment services will strive to place a client in the most suitable job based on the client's interests and skills, it may be necessary at times to place clients in entry level positions in order for them to become self-sufficient in a reasonable timeframe. Employment staff may seek job upgrades for clients who are not completely satisfied in an entry level position, however, clients are required to accept the first appropriate job offer.

Clients who are interested in becoming self-employed because of a particular skill they possess will be assisted through the process of obtaining business licenses, etc., and a copy of this documentation will be kept in the case file.

Employment services includes the following:

- Job development – ongoing process of networking with employers and potential employers to develop job opportunities for clients
- Job counseling – ongoing communication with the client regarding his/her concerns, fears, and questions about work in the U.S., the need to secure early employment to become self-sufficient, the importance of being self-sufficient, the consequences of refusing a job offer, and the importance of job retention
- Job placement – the act of matching a client to an appropriate job; this includes
  1. contacting prospective employers
  2. scheduling job interviews
  3. preparing clients for job interviews
  4. following-up on results of job interviews

Each affiliate will have a staff person who is primarily responsible for providing or overseeing provision of these services to clients. This staff member may provide these services on behalf of the client, assist the client in doing so him/herself, or coordinate the efforts of volunteers in helping provide these services.

- Follow-up with employer and employed clients – contacting the employer (if possible and appropriate) and the employed clients within two weeks after the client's date of employment to sort out any adjustment issues and assist in resolution of any issues identified; these follow-up activities will occur for a minimum of 90 days after placement in employment
- Job upgrade services – especially when necessary in order for the client to achieve self-sufficiency
- Recertification skills – when meeting the requirements of 45 CFR 400.81 (b)

- Child care services – referring for this service when required in order for the client to accept or retain employment
- Translation and interpretation – resettlement agencies are in the best position to provide culturally appropriate interpretation and translation services when needed; in some cases, staff provide interpretation during the client’s job orientation
- Transportation – until refugees are secure in their ability to use public transportation or have other means to get to work and other appointments, resettlement agency staff provide transportation to and from these appointments to ensure the refugee is served well
- Limited citizenship and naturalization services may be provided under the RSS program unless the agency is also providing these services under another federally-funded grant

b. Intensive Case Management for New Arrivals with Special Needs

In an effort to not duplicate services to clients, and to maximize funding, we have established the following eligibility criteria for a client’s enrollment into the ICM program:

- Addiction
- DCS/APS Issue
- Domestic Violence
- Disabled (not the medical component of the disability but the access component)
- Elderly (unless the program receives funding under the Refugee Elders grant program)
- Legal Issue
- LGBT
- Medical Case Management (this would be the wrap-around coordination component that relates the medical component provided under the Health Promotion Program grant – this would not be the medical component itself)
- Single Head of Household
- Children with Special Needs/Behavioral Issue (unless the program receives funding under the Refugee School Impact Program for a school liaison)
- TennCare Delay
- Other

Caseworkers in the ICM program typically provide more intense case management to clients enrolled in the program because of the inherent challenges that come with these eligibility categories. Additionally, in most cases, the entire family unit may be enrolled even if only one client in the family is affected. Resettlement is not an individual effort but involves the entire family unit.

In FFY 2016, we expect that 325 clients will be served in the ICM program. These clients will not be simultaneously enrolled in Match Grant and will be served for up to one year after arrival.

c. Other Case Management Services for Refugees

The objective of case management is to ensure that services are provided in a planned, effective, and timely manner to eligible clients, are appropriate to the needs of the clients; and contribute to their community integration, early employment, and self-sufficiency.

Case management begins when a client enrolls in RSS or TAG, and may continue for up to five years (though a client would typically not remain in the program for more than a year). The responsibility for case management may be divided between more than one staff member based on the particular needs of the client.

The goal of case management is to support and strengthen clients' motivation and capacity to become self-supporting. All client contact will reflect this philosophy, and will be documented in the client's case file.

Case management is typically related to employment services under the RSS and TAG programs because GPRA measurements relate primarily to employment services only. Family members of employable adults are served under these grants but those numbers are not reflected in reports.

d. English Language Training (ELT)

The objective of English language training is to provide refugees with English classes that will assist them in learning to read, write, and speak English – and therefore improve their employment options while adjusting better to life in the U.S. Classes are aimed at early employment and self-sufficiency.

Affiliate staff will refer clients to the RSS- or TAG-funded ELT program, or to another program that best meets the unique needs of the client as specified in the client's Family Self-Sufficiency Plan.

A client is eligible for English Language Training under the Refugee Social Services (RSS) and Targeted Assistance (TAG) grants for up to five years after date of arrival/eligibility. The target population for these classes, however, are clients within their first year of arrival.

The provision of English language training occurs in different ways to meet the needs of different levels.

1. Low-level English learners: Most ELT classes are aimed at low-level English learners (Levels I and II), and the immediate focus is on English for work so that clients can quickly obtain sufficient ability to communicate in the workplace.
2. Medium-level English learners: Those refugees who arrive with an ability to communicate in English are usually provided a tutor in the home to expand their language capacity. These tutors are orientated and provided with ongoing guidance to ensure they are delivering the service in coordination with an ELT curriculum.
3. Advanced English learners: Those who arrive with advanced English communication skills are sometimes referred for college courses in English to expand their skills.

ELT classes are free to the client, and scheduled so as not to inhibit the search for employment and employment itself. When possible, classes will be scheduled in the evening. Classes are scheduled in locations and at times convenient for clients. In some cases, classes are available on a mobile ESL van that provides services in the apartment complexes where many clients reside.

Affiliates will document attendance in ELT classes or tutoring sessions and proficiency at enrollment and again at regular intervals if ELT is indicated as an issue to be addressed in the client's Family Self-Sufficiency Plan.

e. TAG

The Refugee Social Services and Targeted Assistance Programs compliment each other nicely. RSS is provided as a basic program for refugee employment for those who are generally easier to serve. TAG serves as an employment program for those with additional challenges – women; skilled and highly educated; and those who are hard to serve because they have low literacy levels and no employable skills. Clients cannot be served by both programs simultaneously and this is confirmed by checking the TOR database when an enrollment form is received. In some cases, clients are referred from the RSS to the TAG program because it is determined that the client may need the special services provided by TAG. TAG is meant to be a creative solution to solving the employment challenges of certain clients. ELT is also provided through the TAG program via a mobile ESL van that provides classes on-site at refugee apartment complexes.

### III. PROGRAM PERFORMANCE

#### A. Narrative discussion of performance

TOR is pleased with the GPRA results so far this FFY as we are on track to meet or exceed most of our goals. The entered employment percent noted here is lower than we

believe it actually is; this is due to inaccurate reporting of caseload numbers by our affiliates. This issue is currently being addressed through additional reporting requirements and database updates to ensure we have solid numbers by the end of FFY 2015. The termination and reduction numbers are also lower here than in reality because of current database and affiliate reporting mechanisms that are also being revised this FFY. We feel that we are on track with all of our outcome goals for the year.

A few years ago, the job market was more challenging than it currently is, and we were averaging over eight months for self-sufficiency. Currently, however, clients are reaching self-sufficiency at a quicker rate. Our goal for FFY 2016 would be self-sufficiency in seven months; this goal is achievable, but takes into consideration the possibility of changes in the job market or economy.

The beauty of a Wilson-Fish program is the flexibility and creativity it allows. Each agency in each city has the opportunity to create a program that best meets the needs of its clients and takes into consideration the factors that make that community unique. The strongest benefit to our Wilson-Fish program, we believe, is the partnership that exists between TOR and the affiliates. The program is not run by a machine and it's not run by a state agency rich in red tape. Affiliate staff can reach TOR staff when they have a question. Most have the cell phone number of the State Refugee Coordinator. Emails are answered almost anytime, day or night, or on a weekend. It's a true partnership and we cherish and appreciate the relationships we have with our partners. This is usually not the case in state-administered programs. Please see attached letters of support from our partners.

TOR collects a great deal of data from its partners. Demographic and program data is collected and entered into our database so that we can generate reports for ORR, our partners, and other individuals who ask for aggregate information on refugees. Because our database is so robust, we are able to pull and analyze just about anything we'd like. Currently, we are looking closely at RSS and TAG GRPA outcomes by agency and asking for explanation of why they are not meeting goals and will be working with them to make more accurate projections in the future.

The standard for program and fiscal monitoring of our partners is twice annually. Agencies that are struggling or are new subgrantees will receive more than two visits, while agencies with a history of solid monitoring visits may receive just one. While program and fiscal monitoring prefer to visit affiliates simultaneously, if one component needs an additional monitoring visit and the other does not, only the one that needs to go back for a second visit will do so. All programs are visited first within the first half of the FFY; if a second (or additional) visit is needed, it is scheduled in the second half of the year. In every case, a written report is prepared, and agencies respond to the recommendations and findings in the report. These reports are attached to our ORR-6 and send to ORR on a regular basis.

## **B. Government Performance and Results Act (GPRA) Performance Outcomes**

	<b>FY 2015 Goal</b>	<b>FY 2015 TPR 1-2</b>
<b>Entered Employment %:</b>	64%	26%*
<b>Employment Retentions %:</b>	68%	78%
<b>Entered Employment With Health Benefits %:</b>	72%	73%
<b>Cash Assistance Terminations %:</b>	46%	26%
<b>Cash Assistance Reductions %:</b>	30%	**
<b>Average Hourly Wage \$:</b>	\$9.07	\$9.35

\*The caseload numbers reported on the TPR 1-2 are likely not accurate; our actual entered employment % is much higher and will be corrected on the AOGP.

\*\*Cash assistance reductions are not reported on the TPR 1-2.

### C. W/F Self-Sufficiency Outcome

Number of RCA recipients completing 8 months in FY 15 (TPR 1 & 2) who are not exempt from employment based on 400.76:	943
Total number from above who are self-sufficient prior to 240 days due to earnings from employment:	397
Percent of RCA recipients who are self – sufficient:	42%

## IV. BUDGET AND BUDGET JUSTIFICATION

See attached line-item budget, budget narrative justification, and client loading charts to support the budget request.

## V. APPENDIX

### A. Chart of W/F Providers, Funding, Clients and Resettlement Agencies

#### a. W/F Service Providers

<b>Name/Location</b>	<b>WF-CMA \$1/</b>	<b>WF-RSS \$1/</b>	<b>Unduplicated WF Clients # 1/</b>
Bridge – Chattanooga	*	*	94
Bridge – Knoxville	\$145,147	\$168,884	201
Catholic Charities – Nashville	252,652	376,635	895
NICE – Nashville	90,935	93,211	307
World Relief – Memphis	**	**	280
World Relief - Nashville	220,351	368,601	754

\*Bridge – Chattanooga is a suboffice of Bridge – Knoxville; the subgrantee agreement and funding provided to Bridge – Knoxville includes services provided by the Bridge – Chattanooga suboffice

\*\*World Relief – Memphis was a suboffice of World Relief – Nashville in FFY 2014, so their grant expenditures for the period June 2014 through September 2014 are part of what is reported here for World Relief – Nashville. In FFY 2015, World Relief -

Memphis because a separate office but has had significant difficulty in invoicing us; they are now almost current on their invoices but they have not been sufficiently reviewed and approved. The grant expenditures for World Relief – Memphis for the period October 2014 – May 2015, therefore, are not yet determined and therefore not listed here.

b. VOLAGs/Resettlement Sites

<b>Local Resettlement Agency</b>	<b>National Volag</b>	<b>Location</b>	<b>MG Agency (Yes or No)</b>
Bridge	EMM	Chattanooga	Yes
Bridge	EMM	Knoxville	Yes
Bridge	CWS	Knoxville	Yes
Catholic Charities	USCCB	Nashville	Yes
NICE	ECDC	Nashville	Yes
World Relief	World Relief	Memphis	Yes
World Relief	World Relief	Nashville	Yes

c. Demographic Information

Please see attached additional charts that detail demographic information for clients.

**B. Resumes**

Please see attached resumes of TOR staff.

**C. Third-Party Agreements**

Written, signed agreements between TOR and its subgrantees will be provided once they are executed.

**SUBSTANTIAL INVOLVEMENT UNDER THE COOPERATIVE AGREEMENT**

TOR acknowledges and agrees to submit the following for Federal review and approval:

- 1) description of services and assistance and how they are coordinated and delivered
- 2) proposed amendments to the model as applicable
- 3) proposed number of RCA and RMA (if applicable) recipients and any changes to the number when they are expected to be higher than originally planned
- 4) policy manual and proposed amendments to manual
- 5) staffing component and prompt notification to ORR of any changes regarding key staff
- 6) tri-annual program performance and quarterly expenditure reports

- 7) schedule for monitoring sub-grantees with respect to location, dates and topics
- 8) reports documenting site visits
- 9) sub-agency allocations including the methodology by which the allocations were derived
- 10) all sub-contractual agreements, budgets and staffing pertaining to sub-recipient agencies
- 11) letters of agreement from the local resettlement agencies that indicate support for the WF project
- 12) assurances as required under 45 C.F.R. §§400.5 (g), (h) and (i)
- 13) client demographics which follows a suggested template provided by ORR
- 14) annual budget with a narrative justification of the WF-CMA components (RCA, RMA, intensive case management and administration associated with the provision of RCA/RMA and statewide coordination and oversight), including client loading charts and an RCA budget that clearly delineates the costs related to TANF-type clients
- 15) an agreement between the TOR and the state TANF agency that supports the differential requirements