

State Plan Template for Grants to States and Replacement Designees for Refugee Resettlement

In order to receive refugee resettlement assistance, a state or Replacement Designee (RD) must submit a State Plan that is signed by the Governor, the Governor's designee, or, in the case of an RD, by the RD's authorized representative, and that is approved by ORR. The State Plan should outline detailed plans for a state's and RD's implementation of the required components. This template outlines the required components and mandatory sequence of a State Plan. A state or RD may include additional information either at the end of the relevant section (e.g., additional information about medical screening after D.4) or as a separate attachment to the State Plan.

I. ADMINISTRATION

A. Organization - 45 CFR Parts 75 and 400 Subpart C, 45 CFR § 400.5¹, and Policy Letter (PL) 16-01²

1. Designate the state agency or RD responsible for developing and administering or supervising the administration of the State Plan.

RESPONSE: The West Virginia Department of Health and Human Resources (DHHR) has been designated as the agency responsible for developing, administering, and/or supervising administration of West Virginia's Refugee Resettlement Program Plan (the "Plan"). (400.5 (a)).

2. Provide the name and title of the State Refugee Coordinator (SRC) designated by the Governor or the Governor's designee. Provide copies of the signed documentation showing the chain of designation from the Governor, through the Governor's designee, if applicable, to the SRC. For an RD, provide the name and title of the Statewide or Regional Refugee Coordinator (as applicable) and indicate whether the person is responsible for administering the entire Refugee Resettlement Program (RRP) or a specific element of it.

RESPONSE: Janee Scott, Health and Human Resources Specialist Senior, who is employed by the state, has been designated by the Governor of West Virginia as the State Refugee Coordinator, as defined in 45 CFR 400.5 and will have the responsibility and authority to ensure coordination of public and private resources for refugee resettlement in the state. (400.5 (d)).

3. Provide the name, title, and agency of the Refugee Health Coordinator (RHC), as applicable.

RESPONSE: DHHR does not employ an RHC.

4. Describe the organizational structure and functions of the state agency or RD.

¹ Applicable citations for the entirety of the section will be provided at the beginning of each section. An additional citation(s) may be provided after a subitem (e.g., B.7), if the subitem requires an additional reference.

² Citations may include ORR PLs or other guidance documents, which are subject to revision or being superseded by later guidance. If this occurs, ORR will notify states and RDs that the revised or subsequent guidance applies to the relevant section or item within this template.

RESPONSE: The DHHR includes the Bureau for Family Assistance (BFA) which is divided into several offices and divisions. The State Refugee Coordinator and BFA report to an Office Director at the BFA who reports to the Deputy Commissioner for the Office of Programs and Resource Development. This deputy reports to Commissioner of BFA. The Commissioner reports to the Deputy Secretary of DHHR. The BFA is responsible for the planning, grant programs and policy development functions of the Temporary Assistance for Needy Families (TANF) program, Supplemental Nutrition Assistance Program (SNAP), formerly known as the Food Stamp Program, and will operate the Refugee Resettlement Program. **The 55 counties in the state are structured into two administrative regions.** There are two regional directors whose responsibilities include the TANF, Medicaid, and SNAP determination. These regional directors report directly to the Deputy Commissioner of Field Operations, who reports to the Commissioner of BFA.

5. Describe the state's or RD's process for convening quarterly meetings of state and local governments and private stakeholders in localities where refugees are resettled, including the proposed invitees for each meeting.

RESPONSE: Catholic Charities of West Virginia (CCWVA) hosts Quarterly Consultations via Zoom. They currently have 42 people on the invitation list: Catholic Charities members, state and county DHHR offices, county Health Departments, WV Department of Education, numerous city and county officials, and various local nonprofit groups. The attendees are primarily located in cities and counties that host WV refugee populations. DHHR holds quarterly meetings with CCWVA to provide/receive updates and share information.

6. Describe program and fiscal oversight for the overall RRP delineating individual components as applicable (Refugee Cash Assistance, Refugee Medical Assistance and Medical Screening, and Refugee Support Services (RSS), and RSS Set-Aside programs). Include a detailed description of the state's or RD's protocol to monitor and evaluate subrecipient operations.

RESPONSE: The Department has a responsibility to monitor the activities of its grantees as necessary to provide reasonable assurance that the grantee uses grant funds for the intended and authorized purposes; complies with laws; regulations and provisions of contracts or grant agreements; and achieves performance goals. To achieve this responsibility, the State Refugee Coordinator attends quarterly calls with Catholic Charities of WV (CCWVA) and interacts with them regularly, to make sure they are acting within state and federal regulations; we discuss all aspects of the refugees and the services they provide to them for their current caseload as well as any new and anticipated arrivals. The SRC also collects and reviews annual and semi-annual reports from CCWVA as required by state and federal statutes/regulations and as necessary for grant monitoring and oversight.

The reports are closely scrutinized to ensure that ORR grant funds are being effectively utilized. The State Finance Department reviews documentation sent for all payments. The DHHR meets with CCWVA on a quarterly basis and communicates with them regularly to make sure they are acting within state and federal regulations. Quality Assurance reviews RCA cases on a periodic bases to check for accuracy. Yearly re-certifications are completed by the case worker to maintain program integrity and review every component of the case for any changes.

7. Describe the procedures the state or RD uses to verify client immigration status or category to ensure initial and continued client eligibility for ORR funded refugee assistance and services.

RESPONSE: When an immigrant applies for ORR programs and services (RCA/RMA) and/or DHHR programs, the worker and/or CCWVA (RSS provider) will send an email to the State Refugee Coordinator (also WV's SAVE coordinator) to check for current immigration status. They will either provide the immigrant's current immigration documentation, or they will provide the SRC with the immigrant's name, birthdate and either an Alien Registration (USCIS) number, passport number and country of origin, I-94 number, SEVIS number or Naturalization/Citizenship number. The State Refugee/SAVE Coordinator utilizes the Systematic Alien Verification for Entitlement (SAVE) system to verify current immigration status. The SRC pays close attention to category codes in determining client eligibility for ORR funded refugee assistance and services and DHHR assistance and services. Once the SAVE response is received, the SRC sends an email back to the worker/CCWVA to let them know the current status and if the individual (s) are eligible for benefits and if not eligible for benefits, why they are not eligible. The SRC maintains a copy of the SAVE response for her files, and she also keeps a log of all SAVE inquiries.

8. Describe the procedures the state or RD uses to safeguard the disclosure of client information.

RESPONSE: DHHR is bound by client confidentiality and follows the policies in the Health Insurance Portability and Accountability Act (HIPAA). All DHHR employees are required to sign a confidentiality agreement as a condition of their employment. DHHR also operates on a 'need to know' basis. The SRC follows those same policies and procedures to safeguard client information. The SRC uses client information solely for the purpose of verifying immigration status and providing eligibility information only to the eligibility worker who requested it and is processing the application. The information is not shared with any other entity. CCWVA uses a number of procedures to safeguard personal identifiable information. All CCWVA staff and volunteers are required to sign a confidentiality agreement prior to working with CCWVA. CCWVA has email

encryption capabilities for sending PII via email. CCWVA keeps all cases in locked filing cabinets.

9. Describe data systems used by the state or RD to collect and maintain records necessary for federal monitoring and how the state or RD reviews data to ensure accurate and timely submission of reports, including, but not limited to, the ORR-5 and ORR-6.

RESPONSE: DHHR operates an integrated eligibility system (eRAPIDS) which captures and reports information for specific TANF, SNAP and Medicaid households and other benefits, to include Refugee Cash and Medical Assistance. The system contains coding specific to identifying an individual as a refugee for reporting purposes. The system also has controls established to terminate RCA benefits at the end of the eighth month after the refugee's arrival into the U.S. The state also utilizes the records of its resettlement agency, Refugee Resettlement and Immigration Services (RRIS) which is run by Catholic Charities of West Virginia, to comply with ORR reporting requirements.

10. Provide the location of the state or RD headquarters. For RDs, provide the location of both in-state and out-of-state headquarters, as applicable.

RESPONSE: DHHR headquarters is located at 350 Capitol Street, Charleston, WV 25301.

11. Describe how the state's or RD's procurement process to acquire services supports a transparent (1) merit-based selection of subrecipients, and (2) distribution of funding between subrecipients based upon objective factors.

RESPONSE: There is no distribution of funding between subrecipients. WV has only one subrecipient/resettlement agency (CCWVA) and all of the funding to WV is allocated to CCWVA.

RDs should address items #12 and #13, per PL 18-03.

12. Briefly describe the RD's written code of conduct to ensure that administrative decisions, including the monitoring of a provider that is part of the same 501(c)(3) organizational structure as the RD, do not result in a conflict of interest that unduly benefits the RD.

RESPONSE: N/A. WV is not an RD.

13. Briefly describe the RD's policy for resolving disputes that may arise between the RD and subrecipient agencies, as well as between the RD, providers that are part of the same 501(c)(3) as the RD, and clients.

RESPONSE: N/A. WV is not an RD.

B. Assurances - 45 CFR § 400.5

Provide an assurance the state or RD will:

RESPONSE: The State provides that it will under 45 CFR 400.5:

1. Comply with the provisions of Title IV, Chapter 2 of the Refugee Act (8 U.S.C. § 1522), and official issuances of the ORR Director (Director).
2. Meet the requirements in 45 CFR Part 400.
3. Comply with all other applicable federal statutes and regulations in effect during the time that it is receiving grant funding.
4. Amend the State Plan (as needed) to comply with ORR standards, goals, and priorities established by the Director.
5. Provide all ORR-eligible populations with the assistance and services described in the State Plan without regard to race, religion, nationality, membership in a particular social group, sex, or political opinion.
6. Convene, not less often than quarterly, meetings where representatives of local resettlement agencies, local community service agencies, and other agencies that serve refugees meet with representatives of state and local governments to coordinate the appropriate services for refugees in advance of the refugees' arrival. Such meetings shall include outreach and invitation to, at a minimum, public school officials, public health officials, welfare and social service agency officials, and police or other law enforcement officials, for jurisdictions in which refugees resettle.
7. Act in accordance with 45 CFR §§ 75.351-75.360 and 400.22(b) (2) with regard to subrecipient monitoring and management.
8. Act in accordance with 45 CFR §§ 75.371-75.380 for remedies for subrecipient noncompliance.

II. ASSISTANCE AND SERVICES

A. Coordination and Access - 45 CFR § 400.5

1. Describe how the state or RD will coordinate Cash and Medical Assistance (CMA) with support services to promote employment and encourage economic self-sufficiency for ORR-eligible populations.

RESPONSE: To coordinate cash and medical assistance with support services, a service referral form is completed for every refugee who applies. WV Works (TANF) cases are referred to the WV Works Program and the service providers; Refugee Cash Assistance (RCA)/Refugee Medical Assistance (RMA) cases are referred to the service providers. This means the state will promptly notify the resettlement agency whenever refugees apply for RCA (400.68(a)).

2. Describe how assistance and services will be coordinated among resettlement agencies, state and county agencies, and service providers in the community, and how the state or RD will communicate with subrecipients.

RESPONSE: The service provider, Refugee Resettlement and Immigration Services, receives a copy of the initial referral on all applicants/recipients and develops a personal responsibility/self-sufficiency plan to promote employment and economic self-sufficiency as quickly as possible. The self-sufficiency plan requires participation in employment services within (30) days of receipt of RCA for all non-exempt refugees. The State Refugee Coordinator is responsible for monitoring compliance

3. Describe how ORR-eligible populations residing in the state or applicable region will have reasonable access to ORR cash assistance and services, including access to remote services.

RESPONSE: New arrivals come into WV and speak with CCWVA. If they don't come to DHHR on their own, CCWVA will connect refugees to the Department of Health and Human resources, providing transportation on a case-by-case basis. CCWVA will help them apply for ORR eligible programs and services as well as DHHR programs such as SNAP, West Virginia School Clothing Assistance, Heating assistance, etc. as needed. Cash assistance is linked to the refugee's willingness to accept employment or training designed to lead to employment by strictly applying sanctions in cases where recipients' refuse to register and/or accept appropriate employment, including entry-level and minimum wage jobs. (400.5(b)). The state will contact the applicant's sponsor or local resettlement agency at time of application for RCA concerning offers of employment, etc. (400.68(b)).

CCWVA provides resettlement case management services to all ORR-eligible populations in the state of West Virginia, regardless of location. Incoming refugees and SIVs are connected directly with CCWVA through our R&P MOU with USCCB. Victims of Trafficking are connected directly with CCWVA through our TVAP MOU with USCRI. Asylees are either referred to CCWVA via their attorney once their asylum has been granted or they can reach out to CCWVA directly. Second migrants are either referred to CCWVA via their previous resettlement case manager or they can reach out to CCWVA directly. CCWVA does not have any Cuban and Haitian entrants, Amerasians, or Unaccompanied Refugee Minors in the caseload currently, but these populations could contact CCWVA directly for an intake into the program.

All potential CCWVA clients meet in-person with the Refugee Outreach Worker to conduct an intake. Following the intake and the assessment of needs, services are provided in-person, remotely via Zoom, email, phone call, and text message, or hybrid (mix of in-person and remotely). All CCWVA clients have the Refugee

Outreach Worker's cell phone and email address to allow for multiple open pathways of communication.

In 2021, CCWVA served clients in eight West Virginia cities. Aside from the clients that reside in the same city as CCWVA's refugee resettlement office, the clients lived anywhere from 110 to 210 miles away. CCWVA relies on an active pool of volunteers to support the clients in every community as well as the numerous CCWVA outreach offices that are throughout the state. CCWVA has 18 offices throughout West Virginia. See attached map.

4. Describe how ORR-eligible populations will have access to other programs in the community, such as child care, older adult services, and other support programs for working families and individuals.

RESPONSE: CCWVA connects refugees, asylees, victims of trafficking, and SIVS to support programs in their communities. This could include GED, ESL, and community college classes, nonprofit organizations that provide childcare (such as Head Start and Catholic Charities Childcare Resource Center), and Successful Renters Programs. CCWVA provides transportation when necessary and connects refugees to volunteers in their communities who can help support the refugee in various ways.

5. Describe how the state or RD will ensure that language training and employment services are made available to ORR-eligible populations, including efforts to actively encourage registration for employment services.

RESPONSE: It is a condition of eligibility that all employable refugees who apply for the AFDC-Related Medicaid or Refugee Cash Assistance Program must register with and cooperate with Workforce WV. The DHHR has a purchase-of-services contract with Refugee Resettlement and Immigration Services. The purpose of this agreement is to provide necessary services to enable the refugee to become self-sufficient as soon as possible. Emphasis is placed on employment services, job placement, ESL training, counseling, translation by the bilingual staff, and cultural adjustments and registration with Workforce WV. DHHR will provide trained and competent interpreters to provide services to eligible clients served through its office by completing as appropriate: 1. Hiring bilingual staff; 2. Hiring staff interpreters; 3. Using volunteer staff interpreters; 4. Arranging for the services of volunteer community interpreters. 5. Developing a notification and outreach plan for clients.

6. Describe how the state or RD will prepare itself and subrecipients to continue services to the highest level possible in an emergency, including plans for collaboration with state emergency response agencies to ensure refugees' ongoing access to mainstream services during emergencies.

RESPONSE: A Continuity Plan for DHHR Entities for Emergency Preparedness and Response was written in 2020 and it is included in the overall State Plan. In

addition, the Administration for Children and Families has a brochure on its website titled “Preparing for Emergencies: Guide for Refugees” that CCWVA provides to the refugees during their Cultural Orientation portion of their first 90 days (link: <https://www.acf.hhs.gov/orr/outreach-material/emergency-preparedness>). Additionally, CCWVA provides Disaster Recovery Relief Services. As funding permits, CCWVA can provide financial assistance to families that have experienced a household disaster such as a fire. They also work closely with the Long-Term Recovery Groups when natural disasters occur in WV. In this way, they are able to connect families to needed resources and help them determine the appropriate next steps toward recovery. A COOP for this is still in the planning stage. That being said, DHHR and CCWVA continued to provide services during the COVID public health emergency. DHHR offices remained open and allowed families to apply for benefits either in person or by mail, phone or online. CCWVA continued to provide services as well. CCWVA services are open by appointment only. Most in-person meetings are held at the client’s homes or in public spaces (restaurants, parks, libraries, etc.). All clients are provided with the outreach worker’s phone number. WhatsApp appears to be the preferred method of communication between clients and the refugee outreach worker for informal communication. Virtual meetings are held via Microsoft Teams. Most CCWVA clients prefer the in-home and virtual meetings instead of office meetings because it removes the burden of finding transportation to the CCWVA offices.

B. Refugee Cash Assistance (RCA) and Employment Services - 45 CFR 400 Subparts E and F

1. Indicate whether RCA is publicly administered or is administered through an ORR-approved public/private partnership (PPP) program.
RESPONSE: RCA is administered and or supervised by the West Virginia Department of Health and Human Resources. The benefit is loaded onto an Electronic Benefits Transfer (EBT) card or is directly deposited into the bank account of the RCA recipient.
2. If RCA is administered differently across the state, list the geographic service areas in which RCA is publicly administered and the geographic service areas in which RCA is administered under the PPP program.
RESPONSE: RCA is administered consistently across the state.
3. Describe how the state or RD will ensure that RCA participants are informed about the program in a language they understand.
RESPONSE: In accordance with 45 CFR 400 subpart E, the state agency will provide trained and competent interpreters to provide services to eligible clients

serviced through its office. The state will utilize volunteer staff interpreters and the services of volunteer community interpreters

4. Describe how the state Temporary Assistance for Needy Families (TANF) program considers the State Department's Reception and Placement cash assistance when determining eligibility for TANF and payment levels.

RESPONSE: R&P payments count differently for TANF depending on how the payment is received by the refugee. R&P funds disbursed as a one-time payment or issued more than one payment in the same month, this is considered a non-recurring lump sum payment and is counted as income in the month of receipt and resources (assets) in the following months if retained. R&P funds disbursed over a several months are counted for TANF as unearned income for each month received. And as with every TANF denial for refugees, the refugee would then have their eligibility determined for RCA.

5. Describe how the state or RD will follow the mediation and fair hearing standards and procedures outlined at 45 CFR § 400.83.

RESPONSE: An RCA applicant/recipient will be provided the opportunity for a hearing using the same procedures and standards set forth in Section 400.54 to contest a determination concerning employability, refusal to carry out job search, or to accept an appropriate offer of employability services or employment, resulting in denial or termination of assistance (400.83 (b)).

Hearing procedures for the RCA Program will be followed in the state as outlined in the DHHR Common Chapters Manual, and the Income Maintenance Manual. These procedures contain specifications as set out in Section 400.54.

Timely and adequate notice:

Providing notice to an applicant or recipient to indicate that assistance has been authorized, denied, reduced, suspended or terminated which clearly states the action that will be taken, the reasons for the action and the right to request a hearing.

Specify the program (s) to which the notice applies when providing notice to an applicant or recipient to indicate that assistance has been authorized, denied, reduced, suspended or terminated, clearly distinguishing between RCA and other assistance programs.

All applicants for and recipients of refugee cash assistance must be provided an opportunity for a hearing to contest adverse determinations and meet due process standards. The written notice of any hearing determination adequately explains the basis for the decision and the refugee's right to request any further administrative or judicial review. A refugee's benefits may not be terminated prior to completion of final administrative action but are subject to recovery by DHHR if the action is sustained.

A hearing need not be granted when federal law requires automatic grant adjustments for classes or recipients unless the reason for an individual appeal is an incorrect grant computation.

A hearing need not be granted when assistance is terminated because the eligibility time period imposed by law has been reached, unless there is a disputed issue of fact that is unresolved by the process in Section 400.23. It is a condition of eligibility that all employable refugees who apply for the State's Aid to Families with Dependent Children (AFDC) or AFDC-related Medicaid or the RCA must register for work.

6. Describe the criteria for an exemption from registration for employment services, participation in employability service programs, and acceptance of appropriate offers of employment.

RESPONSE: The following individuals are exempt from registering for employment services:

- (a) A caretaker of a child under the age of three. Only one caretaker is exempt per household.
- (b) A child under 16 years of age.
- (c) A child 16-18-years old who is in school full-time.
- (d) Mandatory Services (400.105), a. Provides assurances that RMA will cover at least the same services in the same manner and to the same extent as Medicaid.
- (e) A person who is ill, disabled, or over 65 years of age. The determination of illness or disability must be verified by a doctor's statement.
- (f) A person whose presence in the home is required because of illness or disability of another member of the household. This must be verified by a doctor's statement.
- (g) Any member of an assistance group who is enrolled and participating in a training program. The training program must be part of an employability plan which has been approved by the Department of Family Assistance and/or Refugee Resettlement and Immigration Services and intended to have a definite short-term (less than one year) employment objective.
- (h) A caretaker under the age of 20 without a high school diploma is exempt regardless of the age of the child.

States and RDs that operate a publicly administered RCA program should address items #7 and #8.

7. Eligibility and payment levels
- a. Provide a brief description of the provisions of the state's TANF program that will be used in the RCA program.

RESPONSE: Determination of benefit amounts is based on the size of the assistance unit and income disregards. (400.66.(a)(2) & (4)).

- b. If not addressed within item a., above, describe the state’s or RD’s policy and procedures regarding the beginning of RCA eligibility, the timing and frequency of RCA payments throughout the client’s eligibility period, the method of distribution of RCA payments (e.g., check mailed, electronic benefits transfer, direct deposit), and the (optional) use of proration.

RESPONSE: The date of the application will be the date RCA begins. (400.66 (e)). The RCA beginning payment will be prorated from the date of the month in which the application was made. The RCA payment will come monthly, on the first day of the month, and will be deposited into the client’s Electronic Benefits Transfer (EBT) account, throughout the eligibility period. The eligibility period is 8 months for refugees whose date of eligibility for ORR benefits is on or before 9/30/22. ORR recently extended the eligibility period to 12 months for those refugees whose eligibility date for ORR benefits is on or after October 1, 2021. The date of eligibility differs for each of the following ORR eligible populations: For Refugees, the date of eligibility is the date of entry into the U.S. For Afghan Parolees the date of eligibility is the date they arrived in their final resettlement community after departing the safe haven. For Asylees, the date of eligibility is the date they are granted asylum.

- c. Provide the RCA and TANF payment standards for case sizes 1-5.

RESPONSE:

Household Size	Payment Amount
1	\$417
2	\$480
3	\$542
4	\$612
5	\$670

- d. Provide an assurance that the state or RD will consider resources and income as outlined in 45 CFR § 400.66(b)-(d).

RESPONSE: Income will be treated as it is treated with any other applicant, with the following exceptions:

1. Income and resources from any income producing property in the refugee’s homeland.
2. Sponsor’s income and resources accessible to the refugee solely because the person is serving as a sponsor. (At the time of the application and each re-determination, the sponsor should be contacted to determine the amount of income, if any, he voluntarily contributes to the refugee).

3. Cash grants received by the refugee under the Department of State or Department of Justice Reception and Placement Programs.
4. Earnings of a child or parent under the age of 18 who is enrolled in a secondary education or a GED Program.
5. Tax refunds
6. Earned Income Tax Credit (EITC).
7. Monthly Supplemental Security Income (SSI) payments for children and adults.
8. Earnings deposited into an approved individual Development Account.

ASSETS: The family allowable asset limit is \$2,000. Assets will be treated in the same manner as any other applicant with the following exceptions:

1. Resources remaining in the applicant's county of origin will not be counted in determining eligibility.
2. The value of one vehicle is disregarded regardless of the value of the vehicle. One vehicle per work eligible individual in the household is excluded.
3. Monies held in approved individual Development Accounts.

8. Notification to local resettlement agency
 - a. Describe how the state or RD will promptly notify the local resettlement agency whenever an individual applies for RCA.
RESPONSE: Whenever a refugee applies for cash or medical assistance, the Worker must notify the Refugee Resettlement and Immigration Services (RRIS) that provided for the initial resettlement of the refugee, of the fact that the refugee has applied.
 - b. Describe how the state or RD will contact an applicant's sponsor or local resettlement agency concerning offers of employment.
RESPONSE: At the time of the application for cash or medical assistance, the worker must determine if the refugee has refused on offer of employment or has voluntarily quit a job without good cause. A yearly recertification of RCA benefits is conducted by the DHHR case worker and at that time, income and employment are two of the many components that are reviewed. The worker verifies total gross income from the employment known to DHHR, for the last 30 days prior to the recertification, as well as inquires about any new employment DHHR is unaware of. In the event the refugee has become unemployed, the loss of employment is verified and a referral to register for employment is issued.

States and RDs that operate an ORR-approved PPP program should address item #9.

9. Eligibility and payment levels - 45 CFR §§ 400.56-400.63 and ORR's Guidance for Public-Private RCA Programs
 - a. Describe how the state or RD will determine initial eligibility for RCA, and the program's process for determining continued eligibility each month, on the basis of compliance with the client's Family Self-Sufficiency Plan and on the basis of the client's income from employment.
RESPONSE: N/A. WV does not administer a PPP Program.
 - b. Indicate and justify the income eligibility standard established by the state or RD after consultation with local resettlement agencies in the state. Describe how the standard meets the RCA program objective of economic self-sufficiency, indicate how the standard compares to the state TANF income eligibility standard, and whether the income eligibility standard will disqualify ORR-eligible populations for other means-tested benefit programs (e.g., SNAP, Medicaid). If the income eligibility standard will disqualify ORR-eligible populations for other means-tested benefit programs, thoroughly describe how the establishment of the standard represents the effective coordination of public and private resources in refugee resettlement in the state (45 CFR § 400.5(d)) and how the disadvantages to clients of being disqualified from those other means-tested benefit programs will be outweighed by the advantages of the proposed income eligibility standard.
RESPONSE: N/A. West Virginia does not administer a PPP Program.

States that operate a publicly administered RCA program, and states and RDs that operate a PPP program, should address item #10.

10. RCA program administration - 45 CFR § 400.13
 - a. Indicate which agency is responsible for determining RCA eligibility (e.g., state TANF office, private resettlement agency).
RESPONSE: Refugee Cash Assistance is administered and or supervised by the West Virginia Department of Health and Human Resources. RCA determination for benefit eligibility and benefit distribution is completed by the county offices of DHHR by the TANF workers. Any questions or policy clarification is sent to the State Refugee Coordinator for handling. The benefit is loaded onto an Electronic Benefits Transfer (EBT) card or it is directly deposited into the bank account of the RCA recipient.

- b. If eligibility determinations occur at the state level, describe how staff is allocated between TANF and RCA.
RESPONSE: West Virginia uses the same field staff to determine TANF and RCA. All TANF field staff have this caseload.
- c. Indicate which agency is responsible for distributing RCA benefits (e.g., state TANF office, private resettlement agency).
RESPONSE: WV DHHR TANF workers are responsible for the distribution of RCA. The county office TANF workers receive the application and determine the disposition.
- d. Describe how many full-time equivalents are allocated to RCA administration (e.g., RCA eligibility determinations, RCA distribution).
RESPONSE: There are no full-time equivalents assigned to RCA. County office TANF staff receive the applications and determines their disposition; these cases are part of their regular caseloads. Any time spent on these services will be allocated on a monthly basis by each employee. The time required on the program is minimal and takes less than one full-time equivalent employee.
- e. If the agency is charging indirect costs to CMA, provide the rate and describe how the rate is determined, what it covers, and if HHS is the cognizant agency.
RESPONSE: The state of WV does not charge an indirect cost rate. There is no charge to the implementing agency. HHS is the cognizant agency.

C. Refugee Medical Assistance (RMA) - 45 CFR 400 Subpart G

RDs that collaborate with ORR's Medical Replacement Designee (MRD) for the provision of RMA should skip to and address item #5.

- 1. Describe the administration of the RMA program (e.g., agency responsible for RMA administration and distribution of benefits, SRC and/or RHC responsibilities).
RESPONSE: Refugee Medical Assistance is administered by the West Virginia Department of Health and Human Resources. RMA determination for benefit eligibility and benefit distribution is done by the DHHR county offices by the TANF workers. Any questions or policy clarification is sent to the State Refugee Coordinator for handling.
- 2. Applications, eligibility determinations, and furnishing medical assistance
 - a. Describe the process for determining eligibility for Medicaid and CHIP.

RESPONSE: Eligibility for Medicaid and WV Children's Insurance Program (WV CHIP) will be determined prior to eligibility determination for Refugee Medical Assistance (RMA). The state will base eligibility for Medicaid and WV CHIP on the applicant's income on the date of application. There is no asset test for Modified Adjusted Gross Income (MAGI) groups nor WV CHIP. The RMA health insurance delivery system is a medical card which is sent by mail.

- b. Describe how new arrivals apply for RMA. Include a description of any procedural or programmatic changes to the administration of RMA that resulted from changes in federal, state, or local laws, regulations, or policies.

RESPONSE: Refugees can apply for RMA several ways. They can apply by visiting their local DHHR office worker, online, by phone or by mail. They can be assisted by CCWVA or the DHHR case worker in making all applications. A lot of times, the CCWVA Case Manager is the person who brings the refugee to the local DHHR office when the refugee has no transportation or needs assistance. If the refugee chooses to apply by phone, the Office Of Constituent Services has electronic signature available, to avoid forms having to be sent to the refugee to sign. The state must determine Medicaid and WV Children's

Health Insurance Program (WVCHIP) eligibility under its Medicaid and WVCHIP State Plans for each individual member of a family unit that applies for medical assistance. A state that provides Medicaid to medically needy individuals under its state plan must determine a refugee or asylee applicant's eligibility for Medicaid as medically needy. A state must provide medical assistance under the Medicaid and WVCHIP programs to all refugees/asylees eligible under its state plan. If the appropriate state agency determines that the refugee/asylee applicant is not eligible for Medicaid or WVCHIP under its state plans, the state must determine the applicant's eligibility for Refugee Medical Assistance (RMA). A determination is made for RMA following the same guidelines as for its AFDC-related Medicaid. The difference in the Refugee Program is that certain eligibility requirements are waived. The following eligibility requirements are waived for individuals:

- A child does not have to be living with a specified relative in order to be eligible for this program.
- Individuals are not required to have an eligible child in the home in order to be eligible for this program.
- The eligibility requirement of assignment of support rights is waived for the program. If the applicant has child support income, it will be treated as a resource against the assistance check.

3. Eligibility for RMA

- a. Describe the income standard and income methodology used to determine RMA eligibility. Income standard is the maximum income one can make and still qualify for RMA. Income methodology is the method used to count income (e.g., Aid to Families with Dependent Children (AFDC), Modified Adjusted Gross Income (MAGI)).

RESPONSE: RMA operates as a Statewide Publicly Administered Program. In determining eligibility for Refugee Medical Assistance, the state will use either the state's AFDC payment standards and methodologies in effect as of July 16, 1996, including modifications elected by the state under Section 1931 (b) (2) of the Social Security Act; or a financial eligibility standard established at up to 200% of the national poverty level. (400.102 (b)).

- b. Provide an assurance that the state or RD will consider income and resources as outlined at 45 CFR § 400.102.

RESPONSE:

1. As stated above in 3.a in determining eligibility for Refugee Medical Assistance, the state will use either the state's AFDC payment standards and methodologies in effect as of July 16, 1996, including modifications elected by the state under Section 1931 (b) (2) of the Social Security Act; or a financial eligibility standard established at up to 200% of the national poverty level. (400.102 (b)).
2. Income for RMA and Medicaid/WV Chip for refugees will be treated as with any other applicant for any other Medicaid program, with the exception only the income available to the refugee or asylee will be treated as income. Any income producing property that is in his or her homeland will not be considered available to meet the needs of the refugee/asylee.
3. In-kind services and shelter provided to an applicant by a sponsor or resettlement agency will not be used in determining eligibility for and receipt of RMA.
4. The state will not count Reception and Replacement, RCA Assistance and Matching Grant Assistance on the date of application.
5. The state will base eligibility for RMA on the applicant's income and Resources on the date of application (400.102 (d)).

- c. Provide an assurance that the state or RD will provide continued coverage of recipients as required by 45 CFR § 400.104.

RESPONSE:

1. A refugee who is receiving RMA and is receiving income from earnings from employment, the earned income will not affect the refugee's continued medical assistance eligibility.
 2. A refugee who loses eligibility for Medicaid due to employment during the first twelve months will be transferred to RMA without an eligibility determination.
 3. The refugee shall continue to receive RMA until he/she reaches the end of his/her time period. The eligibility period is 8 months for refugees whose date of eligibility for ORR benefits is on or before 9/30/22. ORR recently extended the eligibility period to 12 months for those refugees whose eligibility date for ORR benefits is on or after October 1, 2021. The date of eligibility differs for each of the following ORR eligible populations: For Refugees, the date of eligibility is the date of entry into the U.S. For Afghan Parolees the date of eligibility is the date they arrived in their final resettlement community after departing the safe haven. For Asylees, the date of eligibility is the date they are granted asylum.
 4. In cases where a refugee is covered by employer-provided health insurance, any payment of RMA for that individual will be reduced by the amount of the third-party payment.
4. Scope of medical services
- a. Provide an assurance that RMA will cover at least the same services in the same manner and to the same extent as Medicaid.
RESPONSE: RMA will cover the same services as Medicaid, in the same manner and to the same extent as Medicaid.
 - b. Describe the RMA health insurance delivery system (e.g., managed care, fee-for-service). Describe direct services provided through RMA that are non-medical (e.g., interpretation, transportation). Do not include actual cost estimates.
RESPONSE: The RMA insurance delivery system is a medical card that is sent by mail. The medical screening payment model is based on a fee-for-service. Most medical services are covered. WV has a purchase of services contract with the Refugee Resettlement and Immigration Services (RRIS), also CCWVA, and the purpose of this agreement is for CCWVA to provide the necessary services to enable the refugee to become self-sufficient as soon as possible; part of these services are transportation. CCWVA provides these services with ORR funds so they would be billed to RMA, in addition to any medical related services not covered by Medicaid, they would be billed to RMA.

- c. Describe any additional medical services and justify the need to provide such services. If the service is provided as part of the medical screening program, describe it in the Refugee Medical Screening section of the State Plan.

RESPONSE: N/A; no additional medical services.

RDs that collaborate with ORR's Medical Replacement Designee (MRD) for the provision of RMA should address item #5. WV is not an RD.

5. RD collaboration with the MRD for the provision of RMA
 - a. Describe the process to determine eligibility for Medicaid and CHIP.
 - b. Provide assurance that the RD will subcontract with local resettlement agencies for initial RMA eligibility determinations and monitor subcontract activities to ensure adherence with federal and MRD policies and procedures pertaining to RMA.
 - c. Provide an assurance that the RD will coordinate with the MRD regarding RMA policies and procedures to ensure refugees are enrolled in RMA in a timely manner, including establishing a process to identify refugees who are categorically ineligible for Medicaid.
 - d. Provide assurance that RMA eligibility determinations will be conducted in accordance with 45 CFR §§ 400.100-400.104, as applicable, and PL #16-01.

D. Refugee Medical Screening (RMS) - 45 CFR §§ 400.5(f), 400.107

1. Coordination of RMS program
 - a. Describe the administration of the medical screening program (e.g., RHC responsibilities).

RESPONSE: The state of WV does not employ a Refugee Health Coordinator. The Medical Screening Program administration services are administered by CCWVA. The WV State Refugee Coordinator is merely an overseer of the program. Medical screenings are in accordance with the requirements prescribed by the Director (400.107 (a) (1)). The document, Refugee Health Screening Protocol Care Screening Procedures – All Refugees, as published by ORR FY 2012, is and will be followed. The screening services that are covered by Medicaid ensure that vaccinations are up to date. The refugee has all the medical records he or she had before arriving in the U.S.
 - b. Describe the procedure for identifying new arrivals in need of medical screenings and/or immediate medical care. Describe the procedure

established to monitor any necessary treatment, observation, or follow-up care.

RESPONSE: All refugees resettling in the state with medical conditions requiring treatment or observation are referred to Refugee Resettlement and Immigration Services (RRIS) by the voluntary placement agency or individual sponsor. The United States Catholic Conference usually makes most placements in West Virginia. The service provider is sent the actual copies of overseas telexes which are entered into the client's file. Because WV does not employ a Refugee Health Coordinator, when verifying a refugee to come to WV, CCWVA completes a review of their outstanding medical needs (Class A or Class B) and informs the State Refugee Coordinator if there are specific needs. The refugee discusses any medical concerns with the doctor; monitoring of any necessary treatment, observation, or follow-up will be completed by the physician. The State nor CCWVA does any monitoring or follow-up.

- c. Describe the access that the state or RD and clinic(s) have to the Centers for Disease Control and Prevention's Electronic Disease Notification (EDN) system and how this information is used during medical screening.
- RESPONSE:** State and clinic access to the CDC's Electronic Database Notification (EDN) is communicated to the RSS. Only one person has access to the EDN. Any notification is always shared. County health departments receive medical information from the Centers for Disease Control and Prevention for each arriving refugee case.
- d. Describe the state's or RD's coordination of medical screenings with screening providers (e.g., contracts with providers). Describe any coordination that is provided to facilitate the medical screenings and how the coordination is funded.
- RESPONSE:** WV and CCWVA do not have not contracts with the screening providers. Since WV does not employ a State Refugee Health Coordinator, when verifying a refugee to come to WV, CCWVA completes a review of their outstanding medical needs (Class A or Class B) and informs the State Refugee Coordinator if there are specific needs. CCWVA makes appointments for medical screenings at clinics and the local health department. CCWVA will call the health department to schedule an appointment to update the individual's vaccinations. If the health department does not have available dates soon enough, they will schedule an appointment with the the nearest medical provider who will accept WV Medicaid. Refugees use Medicaid to fund their medical screenings until they have medical insurance through employment or until

their income disqualifies them from receiving Medicaid. The medical screening coordination is part of WV's contract with CCWVA and Medicaid pays for the medical screenings.

- e. Provide a description of medical screening providers, by location, categorized by type (e.g., FQHC, private clinics, local public health departments).

RESPONSE: CCWVA coordinates appointments at private clinics that will accept WV Medicaid and local health departments for the refugees' initial medical screenings and vaccinations. Because CCWVA/RRIS are located in Morgantown, and most refugees are resettled in Morgantown WV, CCWVA will use local clinics and health departments in that area. For refugees not located in Morgantown, CCWVA will use clinics and health departments located close to the refugee. **WV has refugees in 9 counties in WV: Berkeley, Cabell, Hardy, Jefferson, Monongalia, Putnam, Raleigh, Wetzel and Wood.** For urgent but non-emergency needs, they connect refugees to their closest Urgent Care facility. They also teach the refugees about when to access emergency medical services during the cultural orientation portion of their first 90 days in WV. After a refugee has a job and medical insurance through their work, they are connected to their first PCP.

- 2. Indicate if the state or RD is requesting to operate a medical screening program with RMA funding pursuant to 45 CFR § 400.107. This may either be a request to continue operating a medical screening program or a first-time request to use RMA funding.

RESPONSE: The state of WV is not requesting to operate a medical screening program with RMA funding.

- 3. Scope of RMS services - 45 CFR § 400.107

- a. Provide an assurance that the RMS program is operated in accordance with the requirements prescribed by the Director.

RESPONSE: The RMS program is operated in accordance with the requirements described by the Director. (400.107 (a) (1)).

- b. Provide an assurance that medical screening costs are reasonable (e.g., comparable to Medicaid rates).

RESPONSE: Medical screening costs are reasonable and comparable to Medicaid rates.

- c. Describe the medical screening payment model (e.g., flat rate, fee-for-service).

RESPONSE: There are no medical screening checklists that are not covered by or billed to Medicaid. The Medical screening payment model operates as a fee-for-service.

- d. Describe how the state or RD will ensure that medical screenings will be completed in the first 90 days after initial date of entry or eligibility, if any part of the screening is billed to Medicaid.
RESPONSE: CCWVA ensures that all refugees receive medical screenings through a primary physician within 30 days of arrival. The medical screening is billed to Medicaid.
- e. Describe medical screening services outlined in ORR’s medical screening checklist that are covered by Medicaid. Include a description of services provided based on age and risk factors. The medical screening protocol must be provided as an attachment. **RESPONSE:** There are no medical screening checklists that are not covered by or billed to Medicaid. Medicaid pays for the costs of all screening. CCWVA does not have a Medicaid screening protocol. Because the state of West Virginia does not employ a State Refugee Health Coordinator, CCWVA provides the doctor with the “ORR’s Domestic medical Screening Guidelines Checklist:” and the doctor determines the medical screenings and immunizations per client. CCWVA assists refugees to identify and receive needed services provided by health care providers and assists in scheduling medical screenings. All of the refugees’ medical services are covered by Medicaid until the refugee obtains a job that provides health insurance or has a job that increases their income above the allowable limit for Medicaid. Services provided based on health and risk factors would be specific and unique to the individual refugee.
- f. Describe services outlined in ORR’s medical screening checklist that are not covered by or billed to Medicaid. Include a description of services provided based on age and risk factors. Describe why Medicaid is not paying for these services, if known.
RESPONSE: There are no medical screening checklists that are not covered by or billed to Medicaid. Medicaid pays for the costs of all screening. Within the first seven days of a refugee’s arrival, CCWVA applies for medical assistance (Medicaid). Within the first 30 days of a refugee’s arrival, CCWVA schedules their initial health screening and immunizations. They don’t have to wait for the Medicaid card to arrive, because Medicaid can be retroactively applied to services for up to three months. If a refugee has Class A or Class B medical conditions, this information is communicated to DHHR by CCWVA prior to verifying the case to come to WV.
- g. Describe direct services provided through RMS that are non-medical (e.g., interpretation, transportation). Do not include actual cost estimates.

RESPONSE: There are no direct services provided through RMS that are non-medical.

- h. Describe additional services beyond those outlined in ORR's medical screening checklist, and justify the need to provide such services.

RESPONSE: No additional services.

E. Refugee Support Services (RSS) - 45 CFR 400 Subpart I

1. List and describe the support services the state or RD provides. List services outlined in 45 CFR § 400.154, 45 CFR § 400.155, or PL 16-07, then any support services that are not outlined in policy. For all services, outline the strategy for service delivery, addressing program structure, procurement timeframes, the roles of contracted providers, geographic service areas projected, target population(s), and activities.

RESPONSE: CCWVA provides services to refugees, approved asylees, victims of trafficking (VoT) and special immigrant-visa (SIV) holders across the entire state of West Virginia. Incoming refugees and SIVs are referred to CCWVA through USCCB. Approved asylees are referred to CCWVA via their immigration attorney after they are granted asylum. VoTs are referred to CCWVA via the TVAP program through USCRI. Secondary migrants of any of these categories are also eligible for services if they are still within their service window (5 years). The Refugee Outreach Worker is responsible for providing the bulk of the services to each client. Services such as transportation and cultural orientation are also provided by CCWVA volunteers. **Due to the recent evacuations in Afghanistan and the Ukraine, DHHR and CCWVA will serve Afghans and Ukrainians in the same way as they serve refugees, asylees, VoTs and SIVs and they will receive the same benefits and services as refugees.**

Program Structure – CCWVA's Refugee Resettlement and Immigration Services department is comprised of three roles: Managing Attorney & Program Director, Associate Immigration Attorney, and Refugee Outreach Worker. The Refugee Outreach Worker is responsible for providing all services outlined in the R&P program (through USCCB), TVAP program (through USCRI), and RSS program (through WV DHHR).

Procurement Timeframes – Within the first thirty days of a client's enrollment in a CCWVA program (whether that be R&P, TVAP, or RSS), the Refugee Outreach Worker conducts a Needs Assessment and creates a SMART goals-based Service Plan with the client. Based on the individual needs of the specific client and the Service Plan, the Refugee Outreach Worker works hand-in-hand

with the client to help them work towards their goals. As a client progresses through their service period, these goals can be adjusted. Some initial services are provided on a stricter timeframe, including:

- a. Within 7 days: Application for benefits, including cash assistance, medical assistance, and nutrition assistance; Application for SSN
- b. Within 14 days: Assistance in accessing Employment Services and ESL (if necessary)

Geographic Service Area – CCWVA provides resettlement case management services to all ORR-eligible populations in the state of West Virginia, regardless of location. In 2021, CCWVA served clients in eight West Virginia cities. Aside from the clients that reside in the same city as CCWVA’s refugee resettlement office, the clients lived anywhere from 110 to 210 miles away.

Target Populations - All ORR-eligible populations in the state of West Virginia.

Service Delivery – CCWVA provides trauma-informed, needs-based services to clients. Depending on the needs of the client, some services are provided directly by CCWVA while others are referred out to more specialized organizations. For example, CCWVA refers clients to English as a Second Language instruction providers in their own communities, as well as virtual ESL tutoring programs. CCWVA provides direct Employment Services, but also refers some clients to specific training programs, such as CNA certificate programs, LPN classes, computer classes, etc. CCWVA provides immigration services, but also refers specific clients to more specialized immigration attorneys, when necessary.

Contracted Providers – CCWVA does not have any contracted providers

CCWVA provides the following support services:

- a. English as a Second Language (ESL) instruction will be provided in a concurrent time period with employment or with other employment related services (400.154 (c)). ESL training programs for refugees are arranged through county Adult Basic Education (ABE) and they have ESL and ABE classes in all counties. However, if ESL is not available through Adult Basic Education, the service providers are responsible for providing the material and instruction through the use of volunteers, community resources or its own staff. Most ESL classes are structured to increase basic survival language proficiency and to increase employability skills of refugee participants. Part-time ESL classes will be offered outside normal working hours to enable

refugees to conduct job searches and to accept employment. Refugees are also connected to virtual ESL classes and tutoring programs.

- b. The employment service contractor is required to develop a personal/employment responsibility contract (individual employability plan) as part of a family self-sufficiency plan where applicable for each nonexempt recipient of RCA or a filing unit and provide them with employment counseling and job development, job referral, job placement, and follow-up. Job placements shall be focused on non-subsidized jobs with at least a 90-day retention period and at minimum wage or higher. Employment providers are required to show that obstacles to employment of hard-to-place groups among the clients are being addressed. (400.5 (c)) (400.154).
- c. The following employability services and social services will be provided (400.154 – 400.155):
 - (1) Employment
 - (a) Employment services, including development of a family self-sufficiency plan and an individual employability plan, job orientation, job development, referral to job opportunities, job search, job placement and follow-up.
 - (b) On-the-job training, when such training is provided at the employment site and is expected to result in full-time, permanent, unsubsidized employment with the employer who is providing the training.
 - (c) English language instruction, with an emphasis on English as it relates to obtaining and retaining a job.
 - (d) Vocational Training, including driver education and training when provided as part of an individual employability plan.
 - (e) Skills recertification, when such training meets the criteria for appropriate training in 400.81 (b) of this part.
 - (f) Day care for children, when necessary, for participation in an employability service or for the acceptance or retention of employment.
 - (g) Transportation, when necessary, for participation in an employability service or for the acceptance or retention of employment.

- (h) Translation and interpreter services, when necessary, in connection with employment or participation in an employability service.
 - (i) Case Management services, as defined in 400.2 of this part, for refugees who are considered employable under 400.76 and for recipients of TANF who are considered employable, provided that such services are directed toward a refugee's attainment of employment as soon as possible in the United States.
- (2) Other Services
- (a) Information and referral services.
 - (b) Outreach services, including activities designed to familiarize refugees with available services, to explain the purpose of these services, and facilitate access to these services.
 - (c) Social Adjustment services, including:
 - Emergency services, as follows: Assessment and short term counseling to persons or families in a perceived crisis, referral to appropriate resources, and the making of arrangements for necessary services.
 - Health-related services, as follows: referral to appropriate resources, assistance in scheduling appointments and obtaining services, and counseling to identify their physical and mental health needs and maintain or improve their physical and mental health.
 - Home management services, as follows: Formal or informal instruction to individuals or families in management of household budgets, home maintenance, nutrition, housing standards, tenants' rights, and other consumer education services.
 - (d) Day care for children, when necessary, for participation in a service other than an employability service.
 - (e) Transportation, when necessary, for participation in a service other than an employability service.
 - (f) Translation, and interpreter services, when necessary, for a purpose other than in connection with employment or participation in an employability service.

- (g) Case management services, when necessary, for a purpose other than in connection with employment or participation in employability services.
- (h) Any additional service, upon submission to and approval by the Director of the Office of Resettlement (ORR), aimed at strengthening and supporting the ability of a refugee individual, family or refugee community to achieve and maintain economic self-sufficiency, family stability, or community integration which has been demonstrated as effective and is not available from any other funding source.
- (i) Citizenship and naturalization preparation services, including English language training and civics instruction, to prepare refugees for citizenship, application assistance, and the provision of interpreter services for the citizenship interview.

Services under the Plan are refugee specific services which are designed specifically to meet refugee needs and are in keeping with the rules and objectives of the Plan. These services will be provided to the maximum extent feasible in a manner that is culturally and linguistically compatible with a refugee's language and cultural background. Except for vocational or job skills training the job training or English language training need not be refugee specific. (400.156 (d) and (e)).

The state and the service providers will ensure that women have the same opportunities as men to participate in all services including job placement services. (400.145 (c)).

- d. Services will be provided to the maximum extent feasible in a manner that includes the use of bilingual/bi-cultural women on service agency staff to ensure adequate service access by refugee women. (400.156 (f)).
- e. A personal/employment responsibility contract (family self-sufficiency plan) will be developed for recipients of refugee cash assistance who receive employment-related services. (400.156 (g)).

- f. The state and service providers will ensure that services are provided to refugees in the following order of priority, except in extreme circumstances:
- All newly arriving refugees during their first year in the U.S., who apply for services;
 - Refugees receiving cash assistance;
 - Unemployed refugees who are not receiving cash assistance; and
 - Employed refugees in need of services to retain employment or to attain economic independence.
- g. The state, pursuant to Subpart H, Child Welfare Services Section 400.110, and the service providers will ensure that all refugee services are limited, except for interpretation and referral services and citizenship and naturalization services, to the refugee population in the U.S. less than 60 months. (400.162 (b)).
- h. Citizenship and Naturalization Preparation Services and assistance in obtaining Employment Authorization Documents (EAD) are provided by a social service agency, but cannot include the actual application fee as part of the cost.
2. Describe the plan for ensuring the completion and use of a Family Self-Sufficiency Plan (FSSP) for all refugees receiving RSS-funded employment-related services (and their family members living in the same household) to include initial assessment, referral, and follow-up, as delineated in ORR PL 19-07.
- RESPONSE:** CCWVA prepares a Resettlement Service Plan for each refugee within their first 30 days of being resettled in WV. This form is provided by USCCB. The plans are made by first listing the present needs (such as ‘needing money’), making a SMART goal for the specific need (such as ‘obtain a job making \$10+/hour within two months’), making action plans for the SMART goal (such as ‘apply for two jobs per week’), listing the person responsible for the specific action plan, listing target completion dates, and following up by the 90th day. If the SMART goal is not complete by the 90th day, CCWVA makes follow-up plans and referrals with the refugee.
3. If the state or RD receives RSS set-aside funding for specific services or populations (e.g., Refugee School Impact, Services to Older Refugees, Youth Mentoring and Refugee Health Promotion), describe those services, as outlined at 45 CFR § 400.155 and in the relevant policy letter(s) (e.g., ORR PLs 19-01, 19-

02, 19-03, 20-05, or any subsequent policy letter pertaining to an RSS set-aside). Describe each set-aside's program structure, procurement timeframes, the roles of contracted providers, geographic service areas projected, target population(s), and services. Describe how these set-aside services complement services provided under RSS base funding.

RESPONSE: N/A

F. Unaccompanied Refugee Minors (URM) Program - 45 CFR 400 Subpart H, ORR Guide to Eligibility, Placement, and Services for Unaccompanied Refugee Minors (URM)

States and URM Replacement Designees (URDs) receiving funding to operate a URM program must address all items in this section, as applicable.

RESPONSE: The state of West Virginia does not receive funding for nor operate an Unaccompanied Refugee Minor (URM) Program.

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

The purpose of this information collection is to ensure that a state or Replacement Designee administering an ORR-funded refugee assistance program has prepared a plan that meets the requirements of title IV, Chapter 2, of the Immigration and Nationality Act and of 45 CFR 400 Subpart B – Grants to States for Refugee Resettlement.

Public reporting burden for this collection of information is estimated to average 18 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, per 45 CFR § 400.4(a).

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 0970-0351 and the expiration date is XX/XX/XXX. If you have any comments on this collection of information, please contact draprograms@acf.hhs.gov.