



**MEMORANDUM**

February 20, 2018

**Subject: Family First Prevention Services Act (Family First): Final Enacted Provisions  
Compared to Earlier House-Approved Language and Prior Law**

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The Family First Prevention Services Act (Family First) is an omnibus child welfare bill that amended multiple programs included in Title IV-B and Title IV-E of the Social Security Act. A brief (1000-word) overview of Family First is available on the CRS website at <http://www.crs.gov/Reports/IN10858>.

This table provides a detailed description of changes made by Family First (as enacted in Division E, Title VII of P.L. 115-123) to child welfare programs and policy. With limited modifications, including some changes to effective and implementation dates, the enacted provisions closely follow the Family First provisions previously acted on by the House in 2016.

The following table shows relevant law as it read just prior to enactment of Family First, the provisions of Family First as passed the House in June 2016 (H.R. 5456, 114<sup>th</sup> Congress) and those of Family First as it was enacted in February 2018 (Division E, Title VII of P.L. 115-123).

**Table I. Side-by-Side Comparison: Prior Law, Family First Prevention Services Act of 2016 (H.R. 5456, 114<sup>th</sup> Congress); and the Family First Prevention Services Act (Family First), as enacted (Division E, Title VII of P.L. 115-123)**

Section numbers cited in the prior law column, and any reference to “Title IV-E” or “Title IV-B,” regardless of the column refer to the Social Security Act.

<b>Provision</b>	<b>Prior Law</b> <i>This column describes provisions of the law in place just prior to enactment of P.L. 115-123. To the extent the enacted provision, as described, added to but did not change that law (or is not yet effective) the provision remains current law.</i>	<b>H.R. 5456, 114<sup>th</sup> Congress</b> <b>(as passed by the House, June 2016)</b> <i>This column describes provisions in Family First as it passed the House in June 2016.</i>	<b>Division E, Title VII of P.L. 115-123</b> <b>(enacted February 9, 2018)</b> <i>This column describes final enacted provisions of Family First.</i>
<i>Short Title</i>	Not applicable.	Family First Prevention Services Act of 2016.	Expected to be the same. <sup>a</sup>
<b>INVESTING IN PREVENTION AND FAMILY SERVICES</b> <i>Title I in H.R. 5456; Div. E, Title VII in P.L. 115-123</i>			
<i>Purpose</i>	Not applicable.	The purpose of this title is to enable states to use federal Title IV-E and Title IV-B funds to enhance their support to children and families and prevent foster care placements.	Substantively same as H.R. 5456, but refers to purposes of this subtitle. <sup>b</sup>
<b>PREVENTION ACTIVITIES UNDER TITLE IV-E</b> <i>Title I, Subtitle A in H.R. 5456; Part I in Div. E., Title VII of P.L. 115-123</i>			
<b>Foster Care Prevention Services and Programs</b> (Sec. 111 in H.R. 5456; Sec. 50711 in P.L. 115-123)			
<i>State Option to Provide Prevention Services and Programs</i>	Federal Title IV-E funding is available to help states, territories, and tribes pay the cost of providing foster care and adoption or legal guardianship assistance to children meeting federal Title IV-E eligibility criteria. Title IV-E funding is generally available only after a child has been removed from his/her home. It may not be used to provide services, including those identified as necessary to prevent a child’s removal from the home and placement in foster care. (Sec. 474(a)(1)(2)(3)and(5))	Will give states, territories, and tribes the option to receive federal Title IV-E funding for a part of their cost of providing services directly related to preventing the need for children to enter foster care or for their safety, permanency or well-being. This funding would be available for a maximum of 12 months to provide – (1) mental health and substance abuse prevention and treatment services (offered by qualified clinicians) and (2) in-home parent skill-based programs, including parenting skills training, parent education, and individual and family counseling. These title IV-E prevention services and programs may be provided to eligible children and their parents or kin caregivers.	Same as H.R. 5456.
<i>Eligible Child</i>	Generally, a Title IV-E agency (i.e., the single public child welfare agency administering the Title IV-E program in any of the 50 states, the District of Columbia, or any territory or tribe with an approved Title IV-E plan) may receive federal IV-E foster care support for children after they are placed in foster care, and only if they have been removed from families with very low income. (Sec. 472(a) and Sec. 472(i)(2))	A child is eligible for Title IV-E foster care prevention services or programs if – (1) the state determines the child is at imminent risk of entering (or re-entering) foster care, but that he or she can remain safely at home (or with kin) so long as Title IV-E prevention services or programs are provided; or (2) the child is a pregnant or parenting youth in foster care. No income test would apply.	Same as H.R. 5456.

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<i>Determining 12-month Period of Service Availability</i>	There is no time limit on provision of Title IV-E foster care maintenance payment support. (However, children may “age out” of eligibility.)	Title IV-E prevention support will be available for up to 12 months, beginning on the date a child is identified in his or her prevention plan as (1) at imminent risk of entering or re-entering foster care; or (2) as a pregnant or parenting foster youth in need of IV-E prevention activities.	Same as H.R. 5456.
<i>Prevention Plan</i>	A Title IV-E agency must develop a written case plan for each child in foster care. (Sec. 422(b)(8)(A)(ii) and Sec. 471(a)(16); see also Sec. 475(1) and (5).)	A Title IV-E agency must develop a written prevention plan for each child to whom, or on whose behalf, Title IV-E prevention services or programs will be provided.  <i>For a child determined at risk of entering or re-entering foster care (a “candidate for foster care”), this plan must specify the programs or services that will be provided to prevent foster care placement and allow the child to remain safely at home or with kin.</i>  <i>For a pregnant or parenting youth in foster care, the prevention plan must list the services or programs to be provided to ensure the foster youth is prepared or able to be a parent, describe what services or programs will be provided to prevent any child born to the youth from entering foster care, and be incorporated in the child’s existing written case plan.</i>  In either case, to claim Title IV-E funding for their provision, the Title IV-E agency will need to stipulate services and programs to be provided to, or on behalf of, eligible children in advance of providing them and must meet any additional requirements to be made for these plans by the U.S. Department of Health and Human Services (HHS).	Same as H.R. 5456.
<i>Programs Must Use Trauma-Informed Approach and Meet Evidence-Based Criteria</i>	No provision.	To be eligible for federal Title IV-E support, prevention services and programs would need to (1) be provided under an organizational structure and treatment framework that uses a trauma-informed approach; and (2) meet certain evidence criteria defining them as “promising,” “supported,” or “well-supported.”	Same as H.R. 5456.
<i>Criteria Applicable to All Categories</i>  <b>General Practice Requirements</b>	No provision.	To be determined as “promising,” “supported,” or “well-supported,” a service or program must meet specified general practice criteria, and its relative benefit must have been shown in one or more study.  All of the following must be true: (1) There is documentation on what the practice consists of and how it is administered. (2) There is no empirical basis or case data suggesting or showing risk of greater harm than benefit to those served. (3) The overall weight of evidence supports the benefits of the practice. (4) Outcome measures are	Same as H.R. 5456.

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<p style="text-align: center;">Relative Benefit Shown</p> <p><i>Criteria Specific to a Given Category</i></p> <p style="text-align: center;">Criteria for a “Promising” Practice</p> <p style="text-align: center;">Criteria for a “Supported” Practice</p> <p style="text-align: center;">Criteria for a “Well-Supported” Practice</p>		<p>reliable, valid, and consistently administered.</p> <p>The program or service must have been found superior to an appropriate comparison practice in achieving improvements on important child and parent outcomes (e.g., child safety and well-being, mental health). This finding must be based on conventional standards of statistical significance, and as part of a study independently rated as well-designed and carried out.</p> <p>In addition to meeting the criteria applicable to all categories, the following criteria apply to specific evidence-level categories:</p> <p>For a “<i>promising practice</i>,” the finding of improved outcomes must be based on at least one study that used some form of control group (e.g., wait list study, placebo group) to determine effect.</p> <p>For a “<i>supported practice</i>,” the finding of improved outcomes must be based on the results of at least one study that used a random control or quasi-experimental trial to determine effect. Additionally, that study must have been carried out in a usual care or practice setting, and it must have found a sustained effect of the practice (for at least 6 months beyond the end of treatment).</p> <p>For a “<i>well-supported practice</i>,” the finding of improved outcomes must be based on the results of at least two studies that used a random control or quasi-experimental trial to determine outcomes. Additionally, these studies must have been carried out in a usual care or practice setting, and at least one of them must have found a sustained effect of the practice (for at least one year beyond the end of treatment).</p>	<p>Same as H.R. 5456.</p> <p>Same as H.R. 5456.</p> <p>Same as H.R. 5456.</p> <p>Same as H.R. 5456.</p>
<p><i>HHS Guidance on Practice Criteria; Programs Meeting Practice Criteria</i></p>	<p>No provision.</p>	<p>HHS must issue guidance on these practice criteria no later than October 1, 2018, including a list of pre-approved services and programs that meet the requirements. This guidance must be updated as often as HHS determines it necessary.</p>	<p>Same as H.R. 5456.</p>
<p><i>Outcome Assessment and Reporting</i></p>	<p>No provision.</p>	<p>A state will be required to collect and report to HHS certain information on every child to whom, or on whose behalf, Title IV-E mental health and substance abuse prevention and treatment services, or in-home parent skill-based programs, are provided. The information must include (1) the specific prevention services or</p>	<p>Same as H.R. 5456.</p>

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		<p>programs provided during the child’s 12-month period of eligibility; (2) the total costs of each of the services or programs; and (3) the length of time these services were provided.</p> <p>Further, if the child served was determined at imminent risk of entering care, the Title IV-E agency must also report where the child lived at the beginning and end of the 12-month period of eligibility for prevention services and programs, as well as, whether the child entered foster care in any of the first 12 months that immediately followed the end of the eligibility period.</p>	
<p><i>Prevention Component of Title IV-E Plan</i></p>	<p>A state, territory, or tribe must have an approved Title IV-E plan in order to receive direct federal support under Title IV-E. (Sec. 471(a); Sec. 474(a))</p> <p>[The public agency in a state, territory, or tribe that administers or supervises the administration of the Title IV-E plan is referred to as the “Title IV-E agency.”]</p>	<p>A state, territory, or tribe seeking Title IV-E support for foster care prevention activities must submit a prevention component to its Title IV-E plan. This component, which must be resubmitted every five years (so long as the state continues to claim Title IV-E support for prevention activities), must describe the prevention services and programs the Title IV-E agency intends to use, including whether they are “promising,” “supported,” or “well-supported practices,” how they were selected, and what populations will be targeted. It must also discuss:</p> <ul style="list-style-type: none"> <li>• How providing these Title IV-E services or programs is expected to improve outcomes for children and families.</li> <li>• How children and parents or kin caregivers will be assessed to determine eligibility.</li> <li>• How the Title IV-E agency will monitor the safety of children who receive Title IV-E prevention services or programs, including through periodic risk assessments.</li> <li>• How the provision of Title IV-E prevention services and programs will be continuously monitored to determine outcomes achieved, ensure fidelity to the practice model, and/or refine and improve practices.</li> <li>• How each Title IV-E prevention service or program implemented will be evaluated through a well-designed and rigorous process, which may be an ongoing cross-site evaluation approved by HHS.</li> <li>• How the Title IV-E agency consults with other public and private agencies offering health, mental health, substance abuse treatment and prevention, and child and family services to develop and implement a continuum of foster care prevention</li> </ul>	<p>Same as H.R. 5456.</p>

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		<p>services and programs.</p> <ul style="list-style-type: none"> <li>• How the Title IV-E agency will train and support its workforce to competently deliver trauma-informed services or programs consistent with the evidence-based practice models.</li> <li>• How the size and type of caseloads for prevention case workers will be determined, managed, and supervised.</li> <li>• How Title IV-E prevention services and programs provided to a child or family will be coordinated with any other child and family services provided to them under Title IV-B.</li> </ul> <p>Finally, the state must also assure in its prevention component, that it will provide any information required by HHS, including any data necessary to determine the state’s compliance with the maintenance of effort (MOE) provision and to allow HHS to calculate performance measures.</p>	
<i>Evaluation of Services Required for Federal Support; Limited Waiver</i>	No provision.	<p>Generally, a Title IV-E agency is not permitted to receive federal funding under Title IV-E for any “promising,” “supported,” or “well-supported” practice, unless the prevention component of its Title IV-E plan includes a well-designed and rigorous evaluation strategy concerning implementation of the practice.</p> <p>However, in the case of a “well-supported” practice, HHS may waive this requirement, provided the Title IV-E agency follows the continuous quality improvement requirements (described in its prevention component).</p>	Same as H.R. 5456.
<i>Prevention Services Measures to Be Established, Tracked, Updated and Made Public</i>	<p>Title IV-E agencies must regularly report to HHS on the characteristics of each child in foster care (e.g., age, race/ ethnicity, date of entry to care, placement setting in care, and more). (Sec. 479)</p> <p>HHS was required to develop outcome measures related to children in foster care and must annually report state-level performance on these measures. (Sec. 479A)</p>	<p>A state will be required to report certain program and outcome information for each child to whom, or on whose behalf, Title IV-E prevention services and programs are provided.</p> <p>Beginning with FY2021, HHS must use those data to establish (and annually update) prevention services measures regarding – (1) the per child cost of providing Title IV-E prevention services and programs (which may take into account regional price differences); and (2) the percentage of children served who were determined at risk of entering foster care but who did not enter care during the 12-month period they were eligible for the services and for one year after that.</p> <p>HHS is required to annually update these two prevention services</p>	Same as H.R. 5456.

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		measures based on the median values reported by states for the three most recent years (taking into account price differences for the cost measure). Further it must annually make public each state's prevention services measures.	
<i>Maintenance of Effort (MOE) Requirement</i>	<p>Title IV-B authorizes funds to states, territories, and tribes for the provision of services to children and their families and requires them to provide non-federal "matching" dollars to receive Title IV-B funds.</p> <p>Under the Temporary Assistance for Needy Families (TANF) block grant (Title IV-A), states, territories, and tribes receive funding that may be used to provide cash aid for low-income families with children, as well as services. To receive these funds, states must spend non-federal dollars up to a specific maintenance of effort (MOE) level through TANF or related programs.</p> <p>Under the Social Services Block Grant (SSBG) (Title XX, Subtitle A), states and territories receive funding that may be used for a variety of protective, preventative, and support services for children and adults, including the elderly. There is no federal matching or MOE requirement under SSBG.</p>	<p>A Title IV-E agency that opts to claim federal support for Title IV-E prevention services and programs must spend – outside of the Title IV-E program – no less on "foster care prevention" than it spent on those prevention services and activities in FY2014. This FY2014 spending level is the state's required maintenance of effort (MOE). A state must not use any of this MOE spending to draw down federal Title IV-E prevention funding.</p> <p>To establish MOE spending levels, HHS must determine which activities under Title IV-B, the TANF block grant, the SSBG and other state programs are foster care "prevention services and activities." A Title IV-E agency's MOE spending level would include federal, state, and local dollars spent for those foster care prevention services and activities under those programs. (Prevention spending done under a Title IV-E waiver is excluded.)</p> <p>HHS must require each Title IV-E agency seeking Title IV-E prevention funding to report the spending information needed to establish its MOE and to determine compliance.</p>	Same as H.R. 5456, except that any state with a child population of fewer than 200,000 (as determined by the Census Bureau for 2014) is permitted to set its MOE spending levels based on its foster care prevention expenditures in any of FY2014, FY2015 or FY2016.
<i>No Effect on Eligibility for Other Programs in the Social Security Act</i>	Receipt of Title IV-E aid or assistance may affect a child's eligibility for other programs authorized under the Social Security Act.	Stipulates that provision of Title IV-E foster care prevention services and programs to, or on behalf of, a child must not be considered receipt of Title IV-E aid or assistance for purposes of eligibility for any other program authorized under the Social Security Act.	Same as H.R. 5456.
<i>Title IV-E Foster Care Eligibility Maintained</i>	<p>To be eligible for Title IV-E foster care payments a child must meet income, asset, and "deprivation" tests under the Aid to Families with Dependent Children (AFDC) program as it was in effect on July 16, 1996. These tests must be met in the home that the court finds is "contrary to the welfare" (or the home of the parent/guardian who voluntarily places the child in foster care under an agreement with the Title IV-E agency).</p> <p>Generally, the AFDC tests must be met in the month the child left this home to enter foster care. However, if</p>	Same as prior law column.	Provides that children who receive Title IV-E prevention services or programs in the home of a kin caregiver do not lose Title IV-E eligibility solely because the child lived with a kin caregiver for more than six months. All other Title IV-E foster care eligibility criteria will continue to apply.

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	a child left that home to live with a relative, and has been living with the relative for no more than six months, he/she may still be found IV-E eligible (based on the conditions of the home he/she left to live with the relative). (Sec. 472(a)(3))		
<i>Definition of Candidate for Foster Care</i>	The term “candidate for foster care” is not defined in Title IV-E. Federal law, however, permits some Title IV-E administrative support for children at imminent risk of entering foster care, provided (1) the child would meet all the Title IV-E eligibility criteria (including income test) if he/she entered foster care; and (2) the state has petitioned the court to remove the child from the home or is making “reasonable efforts” to prevent removal. This Title IV-E administrative support is available for 6 months only (unless the child is re-determined to be at imminent risk of removal). (Sec. 472(i)(2))	Defines “child who is a candidate for foster care” as a child identified in a prevention plan as being at imminent risk of entering foster care, but who can remain safely at home, or with a kin caregiver, as long as Title IV-E prevention services or programs are provided to, or on behalf of, the child. No income test would apply. The term includes a child at risk of entering foster care due to disruption or dissolution of an adoption or guardianship arrangement.  Title IV-E funds for prevention services and programs, as well as related administrative costs, provided to or on behalf of a candidate for foster care, will be available for 12 months.	Same as H.R. 5456.
<i>Federal Share of Support for Title IV-E Prevention Services and Programs</i>	States, territories, or tribes with an approved Title IV-E plan are entitled to federal reimbursement for a part of the costs of making foster care maintenance, adoption assistance, and kinship guardianship assistance payments on behalf of eligible children. The federal share of this Title IV-E assistance equals the Federal Medical Assistance Percentage (FMAP) of the given jurisdiction, which may from 50%-83%. (Sec. 474(a)(1)(2)and(5))	Any Title IV-E agency with an approved prevention component in its Title IV-E plan will be entitled to receive federal support for a part of its cost of providing “promising,” “supported,” or “well-supported” Title IV-E prevention services and programs to, or on behalf of, eligible children. The federal share of those program costs (subject to use of the “well-supported” practices rule) will be <ul style="list-style-type: none"> <li>• 50% of the total cost for each of FY2020-FY2025; or</li> <li>• the jurisdiction’s FMAP (which may range from 50%-83%) for FY2026 and every year thereafter.</li> </ul> <i>Use of “Well-Supported” Practices:</i> In every year (i.e., as of FY2020) federal support for Title IV-E prevention services and program support will only be available to the extent that no less than 50% of a state’s <i>total</i> Title IV-E prevention spending is used for “well-supported” practices.	Same as H.R. 5456, except that the federal share of support for prevention services and programs will remain at <ul style="list-style-type: none"> <li>• 50% through FY2026 and will be set at</li> <li>• the jurisdiction’s FMAP (50%-83%), beginning with FY2027 (October 1, 2026).</li> </ul>
<i>Federal Support for Training and Other Administrative Costs Related to Title IV-E Prevention Services</i>	States, territories, or tribes with an approved Title IV-E plan are also entitled to federal reimbursement for costs related to the proper and efficient administration of that Title IV-E plan, including for training. Federal support for administrative costs generally is 50% and for training	Beginning with FY2020 and for every year thereafter, a Title IV-E agency with an approved prevention component in its Title IV-E plan is entitled to reimbursement of 50% for the proper and efficient administration of the prevention component of its Title IV-E plan, including for training, data collection and reporting, certain	Same as H.R. 5456.



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<i>and Programs</i>	costs is 75%. These rates apply in all states. (Sec. 474(a)(3))	implementation activities (as approved by HHS) and other administrative work.	
<i>Support Available Without Cost Allocation</i>	Federal Title IV-E support for maintenance or assistance payments, as well as for related training and most other administrative costs of the Title IV-E program, is generally available only for children who meet Title IV-E federal eligibility requirements. In addition to other criteria, for children in foster care, and all those leaving foster care for kinship guardianship, this includes an income test (applied to the home from which the child was removed). (Sec. 474(a)(3))	Federal Title IV-E support will be available for 50% of the cost of administering Title IV-E prevention services and programs, including training costs, for all eligible children to whom or on whose behalf they are provided. No income or other current law Title IV-E eligibility criteria will apply.  A Title IV-E agency is not permitted to claim support for its prevention component administrative activities under any of the current law Title IV-E administrative claim categories for which support is provided only for those meeting Title IV-E eligibility criteria, (including an income test).	Same as H.R. 5456.
<i>Technical Assistance; Clearinghouse, Data Collection and Evaluations; Reports to Congress; Appropriation</i>	HHS is authorized to provide technical assistance to states, territories, and tribes to assist them in development of child welfare programs. (Sec. 476)	HHS is required to offer technical assistance on implementing services and programs meeting the “promising,” “supported” and “well-supported” practices criteria and to ensure establishment of a public clearinghouse to evaluate research and provide information on those practices and their outcomes (including kinship navigator programs).  HHS may also carry out, or support, research, evaluation and data collection to assess the extent to which Title IV-E prevention services and programs reduce the likelihood of placement in foster care, increase use of kinship care, and improve child well-being.  HHS is further required to provide periodic reports to the House Ways and Means and Senate Finance committees on the provision of Title IV-E prevention services and programs, and these reports must be made publicly available.  Beginning with FY2016, annually appropriates \$1 million to enable HHS to carry out these duties.	Same as H.R. 5456, except that the annual \$1 million appropriation begins with FY2018.
<i>Application to Tribes</i>	Effective with FY2010, tribes (or tribal consortia) were permitted to directly operate a Title IV-E program under an HHS-approved Title IV-E plan.  With limited exceptions, tribes seeking to receive direct federal Title IV-E funding must meet each of the program rules and requirements made of states operating a Title IV-E program. (Sec. 479B)	Explicitly permits a tribe/tribal consortium operating a Title IV-E program to include a prevention component in its IV-E plan.  Requires HHS to specify the Title IV-E requirements and performance measures applicable to a tribe offering Title IV-E prevention services and programs. Stipulates that the requirements and measures must permit adaptation to the culture, and context, of tribal communities served while remaining “to the greatest	Same as H.R. 5456.

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		extent practicable” consistent with requirements and performance measures applied to states.	
<i>Application to Territories: Social Services Spending Cap Does Not Apply to Title IV-E Prevention Funding</i>	Title IV-E funding to the 50 states, DC, and any tribe with an approved Title IV-E plan is available to pay a certain percentage of their eligible program costs (open-ended funding). By contrast, the amount of Title IV-E funding a territory (American Samoa, Guam, Puerto Rico, and the U.S. Virgin Islands) may receive each year under Title IV-E is limited by a specific “social services” funding cap set in law as a fixed dollar amount.  Funding counted under the social services spending cap includes federal dollars authorized to be paid to the territory under Title IV-E, the Temporary Assistance for Needy Families (TANF) block grant, and certain assistance authorized in the Social Security Act for aged, blind, or disabled individuals.  [As of FY2017, two territories have an approved Title IV-E plan (Puerto Rico and the U.S. Virgin Islands) and their spending caps are \$107,255,000 and \$3,554,000, respectively.] (Sec. 474(a) and Sec. 1108(a) and (c))	Maintains this prior law.	Excludes from a territory’s social services spending cap, any federal Title IV-E funding the territory receives for providing prevention services and programs under an approved Title IV-E plan.
<b>Foster Care Support for Children with Parents in Licensed Residential Family-Based Substance Abuse Treatment Facility</b> (Sec. 112 in H.R. 5456; Sec. 50712 in P.L. 115-123)			
<i>Foster Care Maintenance Payment Available for Child Placed with Parent in Family-Based Facility for the Treatment of Substance Abuse</i>	A child may only be eligible for Title IV-E foster care maintenance payments if the child has been formally removed from the home of his/her parent or other related caretaker; the child meets low-income criteria (based on income of home the child was removed from); and the child is placed in a licensed foster family home or child care institution. (Sec. 472(a) and (c)). There is no limit on the length of time a child may be eligible for Title IV-E foster care maintenance payments.  Each child in foster care must have a case plan specifying, among other things, the appropriateness of where the child is placed while in foster care. (Sec. 475(1))	Permits Title IV-E foster care maintenance payment support, for up to 12 months for a child in foster care who is placed with a parent in a licensed residential family-based treatment facility. Although the child must be formally placed in foster care, no income eligibility test applies to determining eligibility for these time-limited foster care maintenance payments.  To be eligible for these Title IV-E payments, the child’s placement with a parent in the treatment facility must be recommended in the child’s case plan and the facility must incorporate trauma-informed parent education, parenting skills training, and counseling as part of its substance abuse treatment.	Same as H.R. 5456.  Same as H.R. 5456.

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	Children who receive Title IV-E foster care maintenance payments are deemed low-income for purposes of determining Medicaid eligibility. (Sec.473(b)(3)(B))	A child's receipt of these Title IV-E foster care maintenance payments does not make a child eligible for Medicaid under the Title IV-E eligibility pathway, (unless he or she meets low-income requirements applicable to all other children eligible for IV-E foster care maintenance payments).	Same as H.R. 5456.
<b>Title IV-E Support for Evidence-Based Kinship Navigator Programs</b> (Sec. 113 in H.R. 5456; Sec. 50713 in P.L. 115-123)			
<i>Support for Kinship Navigator Programs</i>	Kinship navigators were among the activities supported with Family Connection Grants, (which were last funded in FY2014). Under that competitive grant program, kinship navigator programs were required to <ul style="list-style-type: none"> <li>• establish information and referral systems that link kinship caregivers to other kin caregivers/support groups, public benefit eligibility and enrollment information, and relevant training and legal services;</li> <li>• be planned and operated in consultation with kin caregivers, youth raised by kin, organizations representing kin caregivers and relevant public and private agencies;</li> <li>• provide outreach to kinship care families; and</li> <li>• promote public and private partnerships to increase knowledge about the needs of kinship families (as well as families fostering teen parents in foster care) and to improve services for these families. (Sec. 427(a)(1))</li> </ul>	Permits federal funding (i.e., 50% of a Title IV-E agency's total cost) for the support of kinship navigator programs under the Title IV-E program, provided the program <ul style="list-style-type: none"> <li>• meets the requirements for kinship navigators established under the now defunct Family Connection Grant program; and</li> <li>• is operated in accordance with "promising," "supported," or "well-supported" practices (as defined for purposes of the Title IV-E foster care prevention component discussed above).</li> </ul> Federal support will be available for these kinship navigator programs without regard to whether the child being cared for by kin is in foster care, or meets the income or other Title IV-E eligibility criteria for receipt of foster care maintenance payments.	Same as H.R. 5456.
<b>ENHANCED SUPPORT UNDER TITLE IV-B</b> (Subtitle B in H.R. 5456; Part II in Div. E, Title VII of P.L. 115-123)			
<b>Elimination of Time Limit for Family Reunification Services While in Foster Care and Permitting Time-Limited Family Reunification Services When A Child Returns Home from Foster Care</b> (Sec. 121 in H.R. 5456; Sec. 50721 in P.L. 115-123)			
<i>Redefine and Rename a Certain Category of Services Supported under the Promoting Safe and Stable Families (PSSF) Program</i>	States must spend a part of their Promoting Safe and Stable Families (PSSF) program funding for "time-limited family reunification" services. (Sec. 432(a)(4))  For purposes of PSSF these are defined as specific services provided to a child who entered foster care within the last 15 months – and/or to the parent(s)/ primary caregiver of such a child -- to enable safe and timely family reunification. (Sec. 431(7))	Renames "time-limited family reunification" services under the PSSF program as "family reunification services."  Permits the renamed services to be used for any child in foster care (including parents/caregivers), regardless of the amount of time the child has been in care.  Allows this funding to be used for services provided <i>after</i> a child and his/her parent(s) have been reunited, but only during the 15-month period that begins on the date the child returns home.	Same as H.R. 5456.

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<p><b>Reducing Bureaucracy and Unnecessary Delays When Placing Children in Homes Across State Lines</b> (Sec. 122 in H.R. 5456; Sec. 50722 in P.L. 115-123)</p>			
<p><i>Title IV-E Plan Requirement to Include Use of Electronic Interstate Case Processing System</i></p>	<p>States, territories, and tribes operating a Title IV-E program are required to have procedures to enable timely placement of children across state lines. (Sec. 471(a)(25))</p> <p>For purposes of meeting Title IV-E plan requirements the District of Columbia (DC) and any territory operating a Title IV-E program is defined as a “state.” (Sec. 1101(1))</p> <p>Except as otherwise provided in the law, Title IV-E requirements apply to Indian tribes operating a Title IV-E program in the same manner as they apply to any state. (Sec. 479B(b))</p>	<p>No later than October 1, 2026, would require each state, territory, or tribe operating a Title IV-E plan to include use of an electronic interstate case processing system as part of its procedures for timely placement of children across state lines.</p>	<p>Same as H.R. 5456, except that the new requirement applies as of October 1, 2027, and then only to the 50 states and DC. (The territories and the tribes are excluded.)</p>
<p><i>Funding for the Development of an Electronic Interstate Case-Processing System</i></p> <p>Distribution of Funding</p> <p>Use of Funds</p> <p>Evaluation; Report to Congress</p>	<p>A portion of funding for the PSSF program (Title IV-B, Subpart 2) is authorized to be funded on a discretionary basis. Annually, out of any funding provided under this authority, HHS must reserve certain funds for particular grants or activities. (Sec. 437 (a) and (b))</p>	<p>Requires the HHS Secretary to reserve a total of \$5 million out of any FY2017 discretionary funding provided for the PSSF program to make grants for the development of an electronic interstate case-processing system. The funds reserved will remain available through FY2021.</p> <p>HHS is authorized to make grants to states, territories and tribes that successfully apply, including by submitting the required information on (1) their plans for use of funds, (2) goals expected to be achieved, (3) strategies for integrating services and programs for children placed across state lines, and (4) any other information sought by HHS.</p> <p>Funds awarded under this authority must be used to help grantees connect with an interstate electronic case-processing system and to enable them to achieve safe and appropriate interstate placements for children in less time and at less cost.</p> <p>No later than one year after the last grant awarded for this purpose, requires HHS to report to Congress on state progress in</p>	<p>Same as H.R. 5456, except that the funds are to be reserved out of any FY2018 discretionary PSSF funding, and must remain available through FY2022.</p> <p>Same as H.R. 5456, except that HHS is authorized to provide these funds, outside any specific grant-making process, to any of the 50 states and DC that submits the required information. However, it must give priority to those states that aren't yet connected to the interstate electronic case processing system.</p> <p>Same as H.R. 5456.</p> <p>Same as H.R. 5456.</p>

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		implementing electronic interstate case processing. The report must include information on – the number of interstate placement cases processed within, and outside of, the system; how use of the electronic interstate case-processing system has affected child safety and permanency, including the time it takes to place children across state lines; and administrative cost, including caseworker time spent on placing children across state lines.	
<i>Data Integration</i>	<p>A state that operates a Title IV-E program is required to conduct fingerprint-based criminal records checks, using Federal Bureau of Investigation (FBI) databases, on all prospective foster or adoptive parents and certain relative guardians. (Sec. 471(a)(20)(A) and (C))</p> <p>They must also conduct checks of state child abuse registries for those same individuals, including any adults in the households. The checks must include any state registry where one or more of the individuals lived in the last five years. (Sec. 471(a)(20)(B))</p> <p>Additionally, any state operating a Title IV-E foster care program must immediately (or within 24 hours) report information it receives on child or youth sex trafficking victims to law enforcement authorities, and separately, on missing or abducted children, to the National Center for Missing and Exploited Children (NCMEC) (Sec. 471(a)(34) and (35)).</p>	<p>HHS, in consultation with states and the Secretariat for the Interstate Compact on the Placement of Children (ICPC), must assess how the electronic interstate case-processing system may be used to</p> <ul style="list-style-type: none"> <li>• improve a Title IV-E agency’s ability to quickly comply with required background checks for prospective foster and adoptive parents and relative guardians, including completing checks of federal criminal records and of state child abuse and neglect registries;</li> <li>• connect with federal and state law enforcement agencies and judicial agencies to better protect missing or trafficked children; and</li> <li>• simplify and improve Title IV-E agency-required reporting to other agencies regarding missing or trafficked children that come to its attention.</li> </ul>	Same as H.R. 5456.
<b>Enhancement to Grants to Improve Well-Being of Families Affected by Substance Abuse</b> (Sec. 123 in H.R. 5456; Sec. 50723 in P.L. 115-123)			
<i>Regional Partnership Grants (RPGs) Heading</i>	Authorizes “Targeted Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Substance Abuse.” (Sec. 437(f))	Changes this section heading to include the goal of “implementing Title IV-E prevention service” and to mention improving outcomes specifically for children <i>and families</i> affected by heroin and opioid abuse, along with other substance abuse.	Same as H.R. 5456.
<i>Definition of Regional Partnership</i>	Defines “regional partnership” as a collaborative agreement, established on an intrastate or interstate basis, between two or more public or private entities and individuals. (Sec. 437(f)(2))	In addition, explicitly permits partnerships that operate on a statewide basis.	Same as H.R. 5456.
State agency	Stipulates that a regional partnership may not consist solely of the state child welfare agency and the state	Removes the prohibition on partnerships composed solely of the state child welfare agency and the state agency that administers the	Same as H.R. 5456.

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<p>partnerships</p> <p>Mandatory and optional partners</p> <p>Partnerships with tribal entities</p>	<p>agency that administers the federal substance abuse prevention and treatment services block grant. (Sec. 437(f)(2)(B)(iii))</p> <p>Stipulates that the state child welfare agency must be a partner in every regional partnership except for certain partnerships including tribes (as discussed below).</p> <p>List of potential partners:</p> <ul style="list-style-type: none"> <li>• the state agency that administers the federal substance abuse prevention and treatment block grant;</li> <li>• non-profit, or for-profit child welfare service providers;</li> <li>• community health service or mental health providers;</li> <li>• local law enforcement agencies</li> <li>• judges and court personnel</li> <li>• juvenile justice officials, school personnel;</li> <li>• an Indian tribe, tribal child welfare agency, or tribal consortia.; and</li> <li>• any other individuals or entities concerned with provision of services to children and families. (Sec. 437(f)(2)(A))</li> </ul> <p>If a partnership is led by an Indian tribe or tribal consortium, participation of the state child welfare agency is optional. However, the Indian tribe or consortium may not form a regional partnership solely with a tribal child welfare agency. (Sec. 437(f)(2)(B)(ii))</p>	<p>federal substance abuse prevention and treatment block grant.</p> <p>Along with the state child welfare agency, <i>additionally</i> requires every partnership to include the state agency that administers the federal substance abuse prevention and treatment block grant. Further, if the partnership intends to serve children placed out of home, it must also include the court that handles child abuse and neglect proceedings in the region as a partner.</p> <p>Retains all other potential partners as “optional” and adds an explicit reference to community health service providers, offering substance abuse treatment.</p> <p>Maintains exceptions for tribal led partnerships, (as discussed below).</p> <p>Maintains these provisions. Further, adds that if the partnership includes a tribe or tribal consortium and it intends to serve children in out-of-home placement, it may include tribal court entities in place of other judicial representatives.</p>	<p>Same as H.R. 5456.</p> <p>Same as H.R. 5456.</p>
<i>Regional Partnership Grants to Be Awarded</i>	Required HHS to award grants to regional partnerships for the purpose of improving outcomes of children affected by parental substance abuse in each of FY2012-FY2016. (Sec. 437(f)(3)(A))	Requires HHS to award these grants to regional partnerships in each of FY2017-FY2021.	Same as H.R. 5456.
<i>Grant Amount and Duration; Planning and Implementation Phases</i>	HHS may not make an annual award to a regional partnership that is less than \$500,000 nor more than \$1,000,000. Further, grants must be awarded for a period of no less	Requires that any grant made to a regional partnership be done in two phases – planning and implementation. Lowers the minimum annual award to \$250,000 generally, with the further stipulation that total funding awarded for the planning phase	Same as H.R. 5456.

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	than two years and no more than five years (although a grantee may seek a two-year extension of an initial grant period). (Sec. 437(f)(3))	(which may extend for maximum of two years) must not exceed \$250,000. Otherwise maintains the maximum annual grant award of \$1,000,000 along with the limits on duration of the grant.	
<i>Application Requirements</i>	To be eligible for a grant, a regional partnership must submit a written application to HHS that describes how the goals proposed to be achieved will improve outcomes for children and meets other specific application requirements. (Sec. 437(f)(4))	Revises the regional partnership grant application requirements to ensure that each partnership sets goals and outcomes that focus on improving the well-being of <i>families</i> as a whole (children <i>and</i> parents), including successful substance abuse treatment and recovery for parents.  Also requires a description of how these goals will facilitate implementation of evidence-based prevention work under Title IV-E and permits HHS to require any information needed to determine that the partnership carries out its work consistent with evidence-based practices. Further requires applicants to describe how they intend to sustain the partnership’s work after the end of RPG funding, including through use of Title IV-E prevention services.	Same as H.R. 5456.
<i>Partnership Must be Cooperating and Progressing Toward Goals</i>	No provision.	Before awarding funding (and for each fiscal year) requires HHS to determine that sufficient progress was being made toward meeting project goals and that members of the partnership were coordinating to a “reasonable degree.”	Same as H.R. 5456.
<i>Use of Funds by Partnership</i>	RPG funds may be used for early intervention and prevention services, child and family counseling, mental health services, parenting skills training, family-based comprehensive long-term substance abuse treatment, and replication of successful long-term substance abuse treatment models. (Sec. 437(f)(5))	Retains each of these uses and further stipulates that the family-based comprehensive treatment services may include medication-assisted treatment and related in-home treatment and recovery services.	Same as H.R. 5456.
<i>HHS to Consider Success of RPG in Collaboration Before Making an Award</i>	In awarding the grants on a competitive basis, HHS must take into consideration a number of factors. (Sec. 437(f)(7))	Adds that, when considering awarding an RPG, HHS must consider if the applicant partnership has a track record of successful collaboration among child welfare, substance use disorder treatment, and mental health agencies.	Same as H.R. 5456.
<i>Review Current Performance Measures; Establish Core Indicators</i>	Required HHS to establish indicators to assess the performance of regional partnerships after consulting with the Administration for Children and Families (ACF) and the Substance Abuse and Mental Health Services Administration (SAMHSA), as well as certain state and tribal representatives. (Sec. 437(f)(8))	After reviewing current performance indicators and lessons learned from prior rounds of RPG awards, and after consulting with ACF, SAMHSA and other stakeholders, HHS must establish a set of core performance indicators (related to child safety, parental recovery and parenting capacity, and family well-being) to assess grantee performance.	Same as H.R. 5456.

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Grantee Reports	Regional partnership grantees must submit annual reports to HHS regarding the services provided and activities carried out with the grant funds. (Sec. 437(f)(9))	Regional partnerships must provide semi-annual reports to HHS with information on the services and activities carried out with the funding, including the number of children, adults and families served, progress made toward meeting program goals, and other information as determined necessary by HHS. They must also include performance indicator data from the grantee's evaluation.	Same as H.R. 5456.
Limitation on Use of Funds for Federal Administrative Purposes	In each of FY2012-FY2016, HHS was permitted to use no more than 5% of the funding provided to make regional partnership grants for expenses related to administering the grants, including salaries. (Sec. 437(f)(10))	Applies this same limitation for each of FY2017-FY2021.	Same as H.R. 5456.
<b>MISCELLANEOUS</b> (Subtitle C in H.R. 5456; Part III in Div. E, Title VII of P.L. 115-123)			
<b>Reviewing and Improving Licensing Standards for Placement in a Relative Foster Family Home</b> (Sec. 131 in H.R. 5456; Sec. 50731 in P.L. 115-123)			
Identification of Model Licensing Standards for Foster Family Homes; Comparison to State Standards	States, territories, and tribes operating a Title IV-E program must set and maintain licensing standards for foster family homes and child care institutions. They are generally free to set these standards as they choose, as long as the standards permit the use of the "reasonable and prudent parenting standard," as defined in federal law and are "reasonably in accord" with standards recommended by relevant national organizations with regard to admission policies, safety, sanitation, and protection of civil rights. (Sec. 471(a)(10))	Requires HHS to identify reputable model standards for licensing foster family homes not later than October 1, 2017.  No later than April 1, 2018 each Title IV-E agency must submit information to HHS on whether its own licensing standards are fully consistent with the model standards identified by HHS, and, if not, why this inconsistency is appropriate for the state, territory, or tribe.	Same as H.R. 5456, except the deadline for HHS to identify model standards is October 1, 2018, and the deadline for Title IV-E agencies to respond with a comparison to their own standards is April 1, 2019.
Use of Licensing Waiver Authority by State Standards	States, territories, and tribes must generally apply the same licensing standard to any foster family receiving child welfare support, although, on a case-by-case basis, they may choose to waive "non-safety" standards (e.g., size of bedroom) for a child placed in a relative foster family home. (Sec. 471(a)(10)(D))	No later than April 1, 2018, each Title IV-E agency must submit information to HHS on whether it uses the existing authority to waive non-safety standards for relative foster family caregivers.  If a Title IV-E agency <i>does not</i> use this authority, it must give the reasons why this is the case and describe the steps it is taking to improve caseworker training.  If the Title IV-E agency <i>does</i> use this waiver authority, it must indicate which standards are most often waived and whether it has developed a process or has provided tools to assist caseworkers in using this waiver authority, and the steps it's taken to improve caseworker training, including with regard to the waiver process.	Same as H.R. 5456, except the deadline for states to submit this information to HHS is April 1, 2019.



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<b>Development of a Statewide Plan to Prevent Child Abuse and Neglect Fatalities</b> (Sec. 132 in H.R. 5456; Sec. 50732 in P.L. 115-123)			
<i>Plan to Prevent Child Abuse and Neglect Fatalities</i>	States were required (as of FY2012) to describe the sources of information they used to obtain the number of child maltreatment deaths they report to HHS each year. If they did not include in the report information obtained from the state vital statistics department, child death review teams, law enforcement agencies, or offices of medical examiners or coroners, they were further required to describe why this was so, and how the state would include such information in the future.  This requirement is included in the plan for the Stephanie Tubbs Jones Child Welfare Services (CWS) program (Title IV-B, Subpart I). (Sec. 422(b)(19))	Revises the current requirement to provide that a state must describe how it gathers information on child maltreatment deaths, including from all relevant entities in the state.  Further requires the state to describe how it is developing and implementing a comprehensive statewide plan to prevent child maltreatment deaths that involves public health and law enforcement agencies, the courts, and other relevant public and private agency partners in the state.	Same as H.R. 5456.
<b>Modernizing the Title and Purpose of Title IV-E</b> (Sec. 133 in H.R. 5456; Sec. 50733 in P.L. 115-123)			
<i>Technical and Conforming Changes</i>	The formal statutory heading of Title IV-E is “Federal Payments for Foster Care and Adoption Assistance.” The purposes of the program funding are described as for foster care maintenance payments, adoption assistance for children with special needs (described as available beginning with October 1, 1980), and for independent living services for youth expected to age out of care or those who have aged out of care (Sec. 470). Since October 2008, states and tribes that opt to do so may also use Title IV-E funds to provide kinship guardianship assistance to eligible children. (Sec. 471(a)(28))	Changes the formal heading of Title IV-E to “Federal Payments for Foster Care, Prevention, and Permanency,” [to reflect the authorization of Title IV-E prevention services and programs, in this bill, as well as the multiple forms of permanency support currently available under Title IV-E (i.e., adoption assistance and kinship guardianship assistance)].  Consistent with these changes, amends the purposes of the funding authority to mention the previously authorized kinship guardianship assistance and to add reference to the newly authorized foster care prevention services or programs authorized in this bill.  Strikes the reference to October 1, 1980.	Same as H.R. 5456.
<b>Effective Dates</b> (Sec. 134 in H.R. 5456; Sec. 50734 in P.L. 115-123)			
<i>General Effective Date</i> [for Title I in H.R. 5456, 114 <sup>th</sup> Cong.; and Parts I-III in Div. E, Title VII of P.L. 115-123]	Not applicable.	With limited and specified exceptions, the Investing in Prevention and Family Services Provisions are effective on October 1, 2016 (first day of FY2017). This includes –  • Title IV-E prevention activities provisions (although Title IV-E support for those services or programs is not available until October 1, 2019 (FY2020) [with increased federal cost sharing available as of October 1, 2025 (FY2026)];	The general effective date for these provisions is October 1, 2018 (first day of FY2019).  With limited exception, this effective date applies to all of the same provisions, and in same manner, as H.R. 5456.

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		<ul style="list-style-type: none"> <li>• Title IV-E support for evidence-based kinship navigator programs;</li> <li>• Title IV-E foster care maintenance payments support for children placed with a parent(s) in a licensed residential family-based substance abuse treatment center;</li> <li>• funding related to use of an electronic interstate case-processing system;</li> <li>• use of an electronic interstate case-processing system as part of a state’s timely interstate placement procedures (although this Title IV-E requirement would not need to be met until October 1, 2026 (FY2027)).</li> <li>• revisions to the Regional Partnership Grants (RPGs);</li> <li>• development of a statewide plan to prevent child abuse and neglect fatalities; and</li> <li>• definition and name changes to the PSSF service category now known as “time-limited family reunification services.”</li> </ul>	<p>Exceptions are the provisions included in Sec. 50711(d) of P.L. 115-123, which were made effective on the date of their enactment (February 9, 2018). They require HHS to carry out certain technical assistance work and appropriate \$1 million annually for this purpose (beginning with FY2018).</p> <p>In addition, funding for Title IV-E prevention services and programs continues to be available as of October 1, 2019 (FY2020), although increased federal cost sharing is not available until October 1, 2026 (FY2027).</p> <p>Additionally, the Title IV-E requirement related to electronic case processing for interstate cases must be met as of October 1, 2027 (FY2028).</p>
<i>Other Effective Dates</i>	Not applicable.	<p>The conforming changes to the Title IV-E purpose and heading and the amendments related to national model licensing standards for foster family homes are effective with the date of enactment.</p> <p>At the same time, this provision stipulates that HHS is to identify reputable model licensing standards no later than October 1, 2017 and that Title IV-E agencies must submit information in response as of April 1, 2018.</p>	<p>Same as H.R. 5456. These provisions were effective as of February 9, 2018.</p> <p>These deadlines are October 1, 2018, for HHS and April 1, 2019, for Title IV-E agencies.</p>
<i>Delay May be Permitted</i>	Not applicable.	If HHS determines that a state must enact legislation (other than appropriations) to be compliant with any new Title IV-B or Title IV-E plan requirement added by this first title [of H.R. 5456], then the state may be permitted to meet the requirement as of the first day of the first calendar quarter that occurs after the close of the first state legislative session that begins after the date of enactment.	Substantively the same as H.R. 5456, but would refer to the first three parts (Parts I-III) of Div. E, Title VII in P.L. 115-123.

<b>Provision</b>	<b>Prior Law</b> <i>This column describes provisions of the law in place just prior to enactment of P.L. 115-123. To the extent the enacted provision, as described, added to but did not change that law (or is not yet effective) the provision remains current law.</i>	<b>H.R. 5456, 114<sup>th</sup> Congress (as passed by the House, June 2016)</b> <i>This column describes provisions in Family First as it passed the House in June 2016.</i>	<b>Division E, Title VII of P.L. 115-123 (enacted February 9, 2018)</b> <i>This column describes final enacted provisions of Family First.</i>
		If HHS determines that a tribe requires additional time to take actions necessary to comply with any of the new requirements included in the first title [of H.R. 5456], it must provide the tribe with the additional time needed (as determined by HHS) to comply.	Substantively the same as H.R. 5456, but would refer to the first three parts (Parts I-III) of Div. E, Title VII in P.L. 115-123.
<b>ENSURING THE NECESSITY OF A PLACEMENT THAT IS NOT IN A FOSTER FAMILY HOME</b> <i>(Title II in H.R. 5456; Part IV in Div. E, Title VII of P.L. 115-123)</i>			
<b>Limitation on Federal Financial Participation for Placements That Are Not in Foster Family Homes</b> (Sec. 201 in H.R. 5456; Sec. 50741 in P.L. 115-123)			
<i>Limitation on Federal Foster Care Support Based on Placement Setting</i>	A child may be eligible for Title IV-E foster care maintenance payments if the child is placed in a foster family home or a child care institution. There is not a time limit on this federal support. (Sec. 472(a)(2)(C))  As of September 29, 2016, states are required to implement procedures for identifying child welfare-involved children and youth who are victims of sex trafficking or at risk of being victims of sex trafficking and to determine services they may need. (Sec. 471(a)(9)(C))	Title IV-E foster care maintenance payment support continue to be available without time limit for an otherwise eligible child placed in a foster family home. For such a child placed in a non-foster family home setting, this Title IV-E support is available for two weeks (14 days) <i>unless</i> the placement setting is one of the following: <ul style="list-style-type: none"><li>• a “qualified residential treatment program” (QRTP), provided additional requirements are met;</li><li>• a setting specializing in services for prenatal, post-partum, or parenting supports for youth;</li><li>• a supervised independent living setting (provided the child is 18 years of age or older); or</li><li>• a licensed residential family-based treatment center for substance abuse (provided the child is placed there with a parent who is receiving treatment) (12-month time limit).</li></ul>	Adds to the list of non-foster family home placements where a child may receive Title IV foster care maintenance payments without the 14-day time limit: <ul style="list-style-type: none"><li>• a setting that provides “high quality residential care and supportive services to children and youth who have been found to be, or are at risk of becoming, sex trafficking victims.”</li></ul> Otherwise same as H.R. 5456.
<i>Additional Time Limitations For Child Placed in a Qualified Residential Treatment Program (QRTP)</i>	No provision.	For an otherwise eligible child placed in a QRTP, Title IV-E foster care maintenance support may only be available if a trained professional or licensed clinician determines the program’s appropriateness for the child within 30 days of the placement. If that assessment finds that the program is not an appropriate placement for the child, <i>or</i> a court review disapproves of the placement, <i>or</i> the child is found ready to move to a family setting (including biological, relative/kin, adoptive, or foster), Title IV-E foster care maintenance payments remains available for the shorter of 30 days from the date of that determination, <i>or</i> the time it takes a child to make a transition to a new setting.	Same as H.R. 5456.
<i>Title IV-E Administrative Support</i>	Title IV-E administrative support (e.g., the cost of carrying out case planning and case review procedures)	Maintains this prior law provision.	Clarifies that Title IV-E administrative support remains

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Remains Available	for a child in care) is generally available only for children who are receiving Title IV-E foster care maintenance payment support. (Sec. 474(a)(3))		available for any child who is ineligible for Title IV-E foster care maintenance payments solely because of the limitations added in Sec. 50741(a)(1) of P.L. 115-123 [discussed immediately above] with regard to placement in a non-foster family home setting.
Definition of Qualified Residential Treatment Program (QRTP)	No provision.	<p>Under Title IV-E, a “qualified residential treatment program” means a program that meets all the following requirements:</p> <ul style="list-style-type: none"> <li>• Has a trauma-informed treatment model designed to address the clinical or other needs of children with serious emotional or behavioral disorders or disturbances, and is able to provide the treatment identified as necessary for a child placed in the program.</li> <li>• Has a registered or licensed nursing and other licensed clinical staff who are on-site during business hours, available 24 hours a day and 7 days a week, and who provide care within the scope of their practice (as defined by state law).</li> <li>• Facilitates outreach to the child’s family members and their participation in the child’s treatment program to the extent appropriate and in the child’s best interest, documents how this is done (and how sibling connections are maintained), and maintains contact information for biological family and fictive kin of the child.</li> <li>• Provides discharge planning and family-based aftercare supports for at least six months after the child is discharged and continues to integrate family members in the treatment program, as appropriate during this aftercare.</li> <li>• Is licensed in accordance with the state standards for child-care institutions providing foster care.</li> <li>• Is accredited by any of the following agencies: the Council on Accreditation (COA), the Joint Commission on Accreditation of Healthcare Organizations (JCAHO); the Commission on Accreditation of Rehabilitative Facilities (CARF); and any other independent, not-for-profit accrediting organization approved by the HHS.</li> </ul>	<p>Requires licensed nursing and clinical staff to be on-site, consistent with the QRTP’s treatment model (instead of during business hours).</p> <p>Stipulates that the staffing requirements for a QRTP do not require the program to <i>directly</i> employ nursing and behavioral staff.</p> <p>Otherwise same as H.R. 5456.</p>

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<p><i>Definition of Foster Family Home</i></p>	<p>For purposes of the Title IV-E foster care program, a foster family home is defined as a home that meets the foster care licensing or approval standards established by the state (or tribe) where it is located. Among other things, those licensing standards must permit foster caregivers to use a reasonable and prudent parenting standard. (Sec. 472(c) and 471(a)(10))</p>	<p>In addition to maintaining the prior law requirements, stipulates that a foster family home must be the home of an individual or family (including a rented home), where not more than six children receive 24-hour out-of-home care. However, states may place more than six children in out-of-home care in a single foster family home to allow any of the following:</p> <ul style="list-style-type: none"> <li>• a parenting youth in foster care to remain with his or her child;</li> <li>• siblings to remain together;</li> <li>• a child with an established meaningful relationship with a family to remain with that family; or</li> <li>• a family with special training or skills to provide care to a child with a severe disability.</li> </ul> <p>Further, the licensed foster parent(s) in the foster family home must be deemed capable of adhering to the reasonable and prudent parenting standard and must reside with the children placed in out-of-home care.</p>	<p>Same as H.R. 5456.</p>
<p><i>Definition of Child Care Institution</i></p>	<p>A child care institution is defined, generally, as an institution that provides foster care and meets the foster care licensing or approval standards established by the state (or tribe) where it is located. However, if a child in foster care is at least 18 years of age, he or she may be placed in a supervised independent living setting that meets standards established by the HHS Secretary in regulations (and does not have to meet state child care institution licensing rules).</p> <p>Additionally, a child care institution may be a private or public institution. However, if it is a public institution, it may not house more than 25 children. Finally, the term child care institution must never include detention facilities, forestry camps, training schools, or any facility operated primarily for the detention of children determined to be delinquent. (Sec. 472(c))</p>	<p>Rewrites and re-organizes this definition without making substantive changes.</p>	<p>Same as H.R. 5456.</p>
<p><i>Training for Judges, Attorneys and Other Legal Personnel on</i></p>	<p>The highest court in each state (including DC), or territory operating a Title IV-E program may apply for Court Improvement Program (CIP) funding to improve</p>	<p>As a condition of eligibility for Court Improvement Program funds, requires a highest state court to provide training for judges, attorneys and other relevant legal personnel on federal child</p>	<p>Same as H.R. 5456.</p>

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<i>Child Welfare Placement Policies</i>	how courts in the state handle child abuse and neglect cases, including those related to meeting Title IV-E requirements. (Sec. 438)	welfare policies and payment limitations with respect to placement of foster children in settings other than foster family homes.	
<i>Assurance of Nonimpact on Juvenile Justice System; GAO Study</i>	States, territories and tribes must meet federal Title IV-E plan requirements in order to be approved to claim federal foster care funding. (Sec. 471(a))	Requires a Title IV-E agency (whether state, territorial, or tribal) to certify that it will not enact or advance policies or practices that lead to a significant increase in the number of children placed in juvenile justice settings as a response to the limitations added by this bill on Title IV-E support for foster children placed in non-foster family home settings.  Requires the U.S. Government Accountability Office (GAO) to evaluate any impact on juvenile justice systems that results from the limits included in this bill on federal Title IV-E support for children placed in non-foster family home settings. The study must look at whether a lack of child welfare-funded congregate care placements contributes to placement of those children in juvenile justice settings (and, if so, the extent to which this happens). GAO would be required to report its findings to Congress no later than December 31, 2023.	Same as H.R. 5456, except that the GAO is required to provide its findings to Congress no later than December 31, 2025.
<b>Assessment and Documentation of the Need for Placement in a Qualified Residential Treatment Program (QRTP)</b> (Sec. 202 in H.R. 5456; Sec. 50742 in P.L. 115-123)			
<i>Requirements for Children Placed in Qualified Residential Treatment Programs</i>	For each child in foster care, the Title IV-E agency must follow a set of procedures defined as the case review system, including development of a written case plan, a periodic case status review (at least once every six months), and a permanency hearing (every 12 months). (Sec. 471(a)(16) and Sec. 422(b)(8)(A)(ii), which refer to the procedures in Sec. 475(5) and 475A.)	For any child placed in a “qualified residential treatment program,” requires the Title IV-E agency to have additional case review procedures that (1) provide for a qualified individual to assess the child’s placement in the QRTP within 30 days of the placement; (2) ensure the child has a “family and permanency team;” (3) provide for court review of child’s placement in a QRTP within 60 days of the placement; (4) ensure regular and ongoing review of the appropriateness of the QRTP placement for the child; and (5) include additional placement review measures for children with longer stays in a QRTP.  <i>These requirements are each further detailed as follows:</i>	Same as H.R. 5456.
Qualified Individual Assessment of Placement Within 30 Days		Within 30 days of a child’s placement in a QRTP, a “qualified individual,” working in conjunction with a state-assembled “family and permanency team,” must assess the child’s strengths and needs using an evidence-based tool approved by HHS; determine what type of placement is the least restrictive and most appropriate for	Same as H.R. 5456.

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<p style="text-align: center;">Family and Permanency Team</p>	<p>For each child in foster care, the Title IV-E agency must follow a set of procedures defined as the case review system, including development of a written case plan. (The case review system is defined in Sec. 475(5) and the written plan is defined in Sec. 475(1).)</p> <p>Any child who is in foster care at age 14 or older must be permitted to select up to two members of a permanency planning team. (Sec. 475(1)(b) and (5)(C)(iv))</p>	<p>the child; and develop specific short- and long-term mental and behavioral health goals for the child.</p> <p><i>If the assessment finds that placement in a foster family home is not appropriate, the qualified individual must write down the reasons why the child’s needs cannot be met in the child’s family or in a foster family home (a lack or shortage of foster family homes may not be an acceptable reason); why the QRTP will provide the most effective appropriate care; and how the placement is consistent with the short- and long-term goals of the child.</i></p> <p><i>A “qualified individual” is defined as a trained professional or licensed clinician who is not an employee of the Title IV-E agency and is not connected to, or affiliated with any placement setting in which children are placed by the state, territory, or tribe. However, at the request of such jurisdiction, HHS is permitted to waive these rules if an individual is a trained professional or licensed clinician and the jurisdiction certifies (in manner required by HHS) the individual will remain objective in making placement assessments.</i></p> <p>A Title IV-E agency must assemble the child’s family and permanency” team and document the following in the child’s case plan –</p> <ul style="list-style-type: none"> <li>• its reasonable and good faith efforts to assemble this team consisting of biological family members, kin of the child, and other individuals who are resources to the child’s family, (e.g., teachers, or clergy); and, if reunification is planned, evidence that the parent from whom the child was removed had input on team members;</li> <li>• contact information for family members, relatives and fictive kin, including both those on the team and those who are not on the team;</li> <li>• evidence that the determination about placement appropriateness made by the qualified individual was done in conjunction with the family and permanency team and that meetings of the team (including those related to the assessment) are held at time and place convenient to the family; and</li> <li>• placement preference of the family and permanency team relative to the placement made by the qualified individual;</li> <li>• if those placement preferences are different, the reasons why the</li> </ul>	<p>Same as H.R. 5456, except that the assessment must recognize that children should be placed with siblings unless a court finds this contrary to the child’s best interests.</p>

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<p style="text-align: center;">Court Review of Placement Within 60 days</p>		<p>team, and child’s preferences, were not recommended.</p> <p>Finally, if the youth is at least 14 years of age, the family and permanency team must include individuals selected by the youth to be a part of his/her permanency planning team.</p> <p>Within 60 days of the start of a child’s placement in a qualified residential treatment program, ensure that a court, or administrative body appointed or approved by the court, will</p> <ul style="list-style-type: none"> <li>• consider the findings made by the qualified individual;</li> <li>• determine if the child’s needs can be met in a family foster home or, if not, whether the qualified residential treatment program where the child is placed is the most effective and appropriate placement to meet the child’s short- and long-term goals (as specified in the permanency plan); and</li> <li>• approve or disapprove the placement setting .</li> </ul> <p>Documentation of the court assessment and placement determination must be included in the child’s case plan.</p>	<p style="text-align: center;">Same as H.R. 5456.</p>
<p style="text-align: center;">Ongoing Review of Placement Setting</p>	<p>For each child in foster care the Title IV-E agency must follow a set of procedures defined as the case review system, including, a periodic case status review (at least once every six months), and a permanency hearing (every 12 months).</p> <p>[The periodic review and permanency hearing procedures are included in Sec. 475(5)(B)(and (C).]</p>	<p>At each 6-month periodic status review and 12-month permanency hearing held for the child while he/she is placed in a qualified residential treatment program, the state child welfare agency must—</p> <p>(1) submit evidence that ongoing assessment continues to find that placement in the qualified residential treatment center remains appropriate to the child’s goals; (2) document its efforts to prepare the child to move to a family setting (including home of biological parents, kin, adoptive parents, guardians, or foster parents); and (3) document the specific treatment or service needs that will be met for the child in that setting and the length of time the child is expected to need this treatment or services.</p>	<p style="text-align: center;">Same as H.R. 5456.</p>
<p style="text-align: center;">Additional Oversight for Stays Beyond Specified Time Periods</p>		<p>For a child 12 years of age or younger who is placed in a QRTP for six consecutive or nonconsecutive months, or for a child 13 years of age or older who is in a QRTP for 12 consecutive (or 18 nonconsecutive) months, the Title IV-E agency must submit to HHS the most recent evidence, as prepared for a periodic status review or permanency hearing, regarding ongoing appropriateness of the placement setting and the signed approval of the state child welfare agency head for the child’s continued placement in the setting.</p>	<p style="text-align: center;">Same as H.R. 5456.</p>



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<b>Protocols to Prevent Inappropriate Diagnosis</b> (Sec. 203 in H.R. 5456; Sec. 50743 in P.L. 115-123)			
<p><i>Preventing Inappropriate Diagnoses</i></p> <p><i>HHS Required to Evaluate States Compliance With Their Protocols</i></p>	<p>Under the Title IV-B Stephanie Tubbs Jones Child Welfare Services program, each state (including the District of Columbia), and certain territories and tribes must develop a health oversight plan to ensure a coordinated strategy to meet the health care needs of children in foster care. (Sec. 422(b)(15)(A))</p>	<p>Requires these states, territories and tribes to include in this health oversight plan the jurisdictions' established procedures to ensure children are not placed in a non-family setting based on inappropriate diagnoses of mental illness, behavioral disorders, medically fragile conditions, or developmental disabilities.</p> <p>HHS is required to evaluate if states comply with their own protocols and the effectiveness of those protocols, identify best practices, and submit a report on this work to Congress no later than January 1, 2019.</p>	<p>Same as H.R. 5456.</p> <p>Same as H.R. 5456, except that the HHS evaluation is required as of January 1, 2020.</p>
<b>Additional Data Reports Regaining Children Placed in a Setting that is Not a Foster Family Home</b> (Sec. 204 in H.R. 5456; Sec. 50744 in P.L. 115-123)			
<p><i>Publication of Additional Annual Data Specific to Children in Foster Care Placed in Group Settings</i></p>	<p>The HHS Secretary must annually prepare and report to Congress state-level data on certain child welfare outcomes and other characteristics. Beginning with the report covering FY2016, this report must include information on foster children placed in settings other than foster family homes, including types of settings, numbers of these children, their ages and length of time in non-foster family settings; any clinically diagnosed special needs of these children; and any specialized services provided to them. (Sec. 479A(a)(7)(A))</p>	<p>Rewrites this reporting requirement to maintain current requirements while listing more types of non-foster family home settings for which specific information must be included.</p> <p>Also requires information on the gender and race/ethnicity of children placed in these settings, and whether the non-foster family home is the first placement setting for the child or, if not, the number and type of previous placement settings.</p>	<p>Same as H.R. 5456.</p>
<b>Criminal Records Checks And Checks of Child Abuse and Neglect Registries for Adults Working in Child-Care Institutions</b> (Not included in H.R. 5456; Sec. 50745 in P.L. 115-123)			
<p><i>Background Check Requirements for Workers Providing Foster Care in Group Settings</i></p>	<p>Under the Title IV-E program, a "child care institution" is any setting, other than a foster family home, where a child may be eligible to receive Title IV-E foster care support. Foster family homes and "child care institutions" (except those that are supervised independent living settings for youth in care at age 18 or older) must be licensed by the state (tribe or territory) in which it's located. (Sec. 472(a)(2)(C) and Sec. 472(c))</p> <p>Separately, states are required to have procedures for criminal background checks and checks of child abuse and neglect registries to be made on any prospective</p>	<p>Maintains the prior law provisions.</p>	<p>Requires states (including DC and any territory or tribe directly operating a Title IV-E program) to have provisions to conduct criminal history and child abuse and neglect registry checks on any adult working in a child care institution, including group homes, residential treatment centers, shelters, or other congregate care settings.</p>

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	<p>foster or adoptive parents before placing a child in the home of that prospective parent. Specifically, the criminal records checks procedures must include a fingerprint-based check against data in the national crime information databases maintained by the Federal Bureau of Investigation (FBI). Further, the child abuse and neglect registry check must include a check of the state's own registry, as well as the registry of any other state where the prospective foster or adoptive parent has lived in the last five years. Sec. 471(a)(20) (A)-(B)</p> <p>[The statute does not apply any of these criminal record or child abuse registry check requirements to workers at "child care institutions."]</p>		<p>Generally, these checks must follow the same procedures as those already required in the law for prospective foster or adoptive parents. However, a state (or other IV-E jurisdiction) may use alternative criminal history and child abuse registry checks for adults working in child care institutions if it reports the alternative methods it uses to HHS, (along with why using the procedures now in law for prospective foster or adoptive parents is not appropriate).</p>
<i>Technical Amendment</i>	<p>The national crime information databases maintained by the FBI are now defined in 28 U.S.C. 534(f)(3)(A).</p>	<p>Cross references the definition of crime information databases using a citation that is no longer current.</p>	<p>Corrects the cross reference.</p>
<b>Effective Dates</b> (Sec. 205 in H.R. 5456; and Sec. 50746 in P.L. 115-123)			
<i>Provisions Limiting IV-E Support for Children in Non-Foster Family Home Settings</i>	<p>Not applicable.</p>	<p>Provisions limiting federal Title IV-E foster care maintenance payment support for children in non-foster family home settings, including related definitions, assessment procedures and other requirements are effective on the first day of FY2020 (October 1, 2019).</p> <p>Additionally, the required Title IV-E agency certification (related to policies that might impact the juvenile justice system) is also effective as of FY2020 (October 1, 2019).</p>	<p>Same as H.R. 5456, except that any state (including DC), and any territory or tribe with an approved Title IV-E plan, may request a delay in the effective date of these provisions, and HHS must grant such request in the amount of time requested, but not more than two years (i.e., delay could be in place until the first day of FY2022).</p> <p>Further adds that a Title IV-E agency may not claim any Title IV-E prevention services support before the effective date, in that state, of the new Title IV-E congregate care provisions.</p>

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<p><i>Provisions Concerning Background Check for Adults Working in Child Care Institutions</i></p> <p><i>Other Effective Dates</i></p> <p><i>Delay May Be Permitted</i></p> <p><i>Application to States with Waivers</i></p>	<p>HHS has approved “child welfare demonstration projects,” frequently called “waivers” in some states. Under these projects a state is permitted to use Title IV-E funding to support activities and individuals that, without the waiver agreement, would not be eligible for Title IV-E support.</p> <p>Waiver agreements are time-limited. HHS is not authorized to approve new waiver projects and no waiver project may be continued beyond September 30, 2019. (Sec. 1130)</p>	<p>No provision</p> <p>The training requirement under the Court Improvement Program; the Title IV-B requirement for protocols to prevent inappropriate diagnoses; and the changes to the annual report requirement for HHS are effective on October 1, 2016.</p> <p>However, if HHS determined that a state needs to enact legislation, other than appropriations to meet any of the new requirement included in the second title [of H.R. 5456], the jurisdiction may have until the first day of the first calendar quarter that begins after the close of the first regular state legislative session that begins after the enactment of the bill to meet that requirement.</p> <p>Provides that to the extent the provisions in the second title of H.R. 5456 (regarding Title IV-E support for placement in non-foster family home settings) are inconsistent with the terms of a state’s waiver agreement (as in place on the date of enactment), the provisions would not apply before the current expiration date of that waiver agreement.</p> <p>Same as current law. [Under the law as now written, no Title IV-E waiver project may be continued beyond September 30, 2019. Because most of the new requirements concerning placement of children in non-foster family settings are effective no sooner than October 1, 2019, it does not appear that a waiver project will conflict with their implementation and thus this delay language may not be meaningful.]</p>	<p>The Title IV-E plan requirement concerning background checks of adults working at child care institutions effective with FY2019 (October 1, 2018).</p> <p>Makes these requirements effective as if enacted on January 1, 2018.</p> <p>Substantively the same as H.R. 5456, but refers to changes in requirements made in Part IV in Div. E, Title VII of P.L. 115-123.</p> <p>Substantively the same as H.R. 5456, but refers to changes in requirements made in Part IV in Div. E, Title VII of P.L. 115-123.</p> <p>Same as H.R. 5456.</p>
<p><b>CONTINUING SUPPORT FOR CHILD AND FAMILY SERVICES</b> <i>(Title III in H.R. 5456; Part V in Div. E, Title VII of P.L. 115-123)</i></p>			
<p><b>Supporting and Retaining Foster Families for Children</b> (Sec. 301 in H.R. 5456; Sec. 50751 in P.L. 115-123)</p>			
<p><i>Revised Definition of “Family Support”</i></p>	<p>States (including DC and certain territories and tribes) must spend a “significant” portion of their funding under the Promoting Safe and Stable Families (PSSF) program</p>	<p>Amends the definition of family support services under the PSSF program to include services designed to support and retain foster families so they can provide quality family-based settings for</p>	<p>Same as H.R. 5456.</p>

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	on “family support” services. These services are defined to include community-based services to strengthen families, including biological, adoptive, foster, and kin families. (Sec. 431(a)(2))	children in foster care.	
<i>Recruitment and Retention Grant</i>	States are entitled to federal Title IV-E support for 50% of their foster care recruitment costs, but only to the extent those costs were incurred in recruiting foster parents for children eligible to receive Title IV-E foster care maintenance payments. Sec. 474(a)(3)(E)	Appropriates \$8 million in FY2018 for HHS to make competitive grants to states or tribes to support recruitment <i>and retention</i> of high-quality foster families (without regard to Title IV-E eligibility status of children for whom they will care).  The grants are intended to increase the capacity of a grantee to place more children in family settings and, in making the awards, HHS must focus on states or tribes with the highest percentage of children in non-family settings.  Funding appropriated for this purpose in FY2018 is to remain available for use for five years (i.e., FY2018-FY2022).	Same as H.R. 5456.
<b>Extension of Child and Family Services Programs</b> (Sec. 302 in H.R. 5456; Sec. 50752 in P.L. 115-123)			
<i>Extension of Funding Authority for the Stephanie Tubbs Jones Child Welfare Services (CWS) Program</i>	Authorized annual discretionary funding of not more than \$325 million for the CWS program (including in Title IV-B, Subpart 1) in each of FY2012-FY2016. (Sec. 425)	Extends this same annual level of discretionary funding authority for the CWS program in each of FY2017-FY2021.	Same as H.R. 5456.
<i>Extension of Funding Authorities for Promoting Safe and Stable Families (PSSF) program</i>	Authorized annual mandatory funding of \$345 million for the PSSF program (included in Title IV-B, Subpart 2) in each of FY2012-FY2016. (Sec. 436(a) and Sec. 434(a))  Separately authorized annual discretionary funding of \$200 million for the PSSF program in each of FY2012-FY2016. (Sec. 437(a))	Extends this same annual level of mandatory funding authority (\$345 million) for the PSSF program in each of FY2017-FY2021 and the same annual level of discretionary funding authority (\$200 million) for the PSSF program in each of the same five years.	Same as H.R. 5456.
<i>Extension of Funding Reservations for Monthly Caseworker Visit and Regional Partnership Grants</i>	For each of FY2012-FY2016, HHS was required to reserve \$20 million out of mandatory PSSF funding to make Monthly Caseworker Visit grants (to improve the quality of monthly caseworker visits with children in foster care) and, a separate \$20 million to make Regional Partnership Grants (to improve outcomes for children affected by parental substance abuse). (Sec. 436(b)(4) and (5))	Requires HHS to continue these same funding reservations out of the mandatory funding provided for the Promoting Safe and Stable Families program for each of FY2017-FY2021 (i.e., \$20 million in each of those years for Monthly Caseworker Visit grants and \$20 million in each of those years for Regional Partnership Grants).	Same as H.R. 5456.

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<i>CIP Funding Reservation</i>  <i>Extension of Highest State Court Entitlement to Court Improvement Program (CIP) Funds; Federal Share of CIP Costs</i>	Funding to make CIP grants must be annually reserved out of the mandatory, and any discretionary, funds provided for the Title IV-B PSSF program. There is no year limit on this funding reservation for CIP. (Sec. 436(b)(2) and Sec. 437(b)(2)).  Provided it has an approved CIP grant application, the highest court in each state or territory with an approved Title IV-E plan was entitled to an allotment of this CIP program funding in each of FY2012-FY2016 (Sec. 438(c)(1)). The federal share of the cost of the Court Improvement Program was 75% for each of FY2012-FY2016. (Sec. 438(d))	Maintains this prior law.  Extends the entitlement of eligible state highest courts to CIP grant funding through each of FY2017-FY2021 and extends the 75% federal share of CIP program costs through each of those same years.	Same as H.R. 5456.  Same as H.R. 5456.
<i>Repeal of Expired Provisions</i>	Contains language appropriating CIP funds for each of FY2006-FY2010 and directing how certain FY2011 CIP funding was to be distributed. (Sec. 438(e))	Repeals this obsolete language.	Same as H.R. 5456.
<b>Improvements to the John H. Chafee Foster Care Independence Program (CFCIP) and Related Provisions</b> (Sec. 303 in H.R. 5456; Sec. 50753 in P.L. 115-123)			
<i>Program Name</i>	The program is known as the John H. Chafee Foster Care Independence Program.	Changes the name to the John H. Chafee Foster Care Program for Successful Transition to Adulthood.	Same as H.R. 5456.
<i>Revise Purposes; Adjust Target Populations and Age</i>  <i>Support for Former Foster Youth</i>  <i>Support for Transition to Adulthood</i>	CFCIP funds are available to states for specified purposes, including:  To help former foster youth between the ages of 18-21 obtain financial, housing, counseling, employment, education, and other appropriate support and services to complement their own efforts to achieve self-sufficiency and to assure that program participants recognize and accept their personal responsibility for preparing for and then making the transition from adolescence to adulthood. (Sec. 477(a)(5))  To identify children who are likely to remain in foster care until 18 years of age and to help them make the transition to self-sufficiency by providing services such as assistance in obtaining a high school diploma, career exploration, vocational training, job placement and	Permits eligible states to serve youth who have aged out of care and are not yet 23 years of age, provided these states certify that they will use CFCIP funds to serve youth up to this age.  Changes the target population for each of these CFCIP purposes from youth who are expected to age out of foster care (current law) to focus instead on youth who experience foster care at age 14 or older.  Makes some other adjustments to the purposes: Services to youth who	Same as H.R. 5456.  Same as H.R. 5456.

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	<p>retention, training in daily living skills, training in budgeting and financial management skills, substance abuse prevention, and preventive health activities (including smoking avoidance, nutrition education, and pregnancy prevention). (Sec. 477(a)(1))</p> <p>Further, to help children who are likely to remain in foster care until age 18 receive the education, training, and services necessary to obtain employment; and prepare for and enter postsecondary training and education institutions. (Sec. 477(a)(2) and (3))</p> <p>Separately, to provide personal and emotional support to children aging out of foster care, through mentors and the promotion of interactions with dedicated adults. (Sec. 477(a)(4))</p>	<p>experience care at age 14 or older are intended to help them transition to adulthood. They also continue to address educational attainment (secondary and post-secondary), vocational training, career exploration and job placement and retention, preventive health activities, daily living skills (such as financial literacy training and driving instruction), and connections with caring adults (versus “mentors” and “dedicated adults,” in prior law).</p> <p>Further, the services are intended to help youth engage in age- or developmentally-appropriate activities, positive youth development, and experiential learning “that reflects what their peers in intact families” experience.</p>	
<p><i>State Certifications</i></p> <p>Assistance to Youth Who Have Left Foster Care</p> <p>Room and Board</p> <p>Training on Youth Development</p>	<p>To be eligible for CFCIP general and ETV funds, states must submit selected certifications to HHS.</p> <p>States are to certify that they provide assistance and services to children who have left foster care because they reached age 18, and are not yet age 21. (Sec. 477(b)(3)(A))</p> <p>States are to certify that they use no more than 30% of CFCIP funds for room and board for children who have left foster care because they reached age 18, and are not yet age 21. (Sec. 477(b)(3)(B))</p> <p>States are to certify that they provide training for foster and adoptive parents, group home workers, and case managers to help them understand and address issues confronting youth preparing for independent living. The training is to be coordinated, to the extent possible, with the state’s independent living program for adolescents. (Sec. 477(b)(3)(D))</p>	<p>Requires this assistance for children who have aged out of foster care (e.g., at any age), until age 21. A state may be permitted to certify that it serves such youth up to age 23 if the state has elected to extend federal Title IV-E foster care to children up to age 21, or the HHS Secretary determines that the state provides comparable assistance with state or other non-Title IV-E funds.</p> <p>Requires this certification for children who have aged out of foster care (at any age) until age 21. Further allows states to make this certification for youth who age out of foster care until age 23, provided that the state extends Title IV-E foster care to children up to age 21, or the HHS Secretary determines that the state provides comparable assistance with state or other non-Title IV-E funds.</p> <p>Requires that the training be specifically on youth development to help the same caregivers and child welfare workers understand and address issues confronting youth preparing to make both the transition to adulthood and a permanent connection with a caring adult. No longer require the training to be coordinated, with the state’s independent living program for adolescents.</p>	<p>Same as H.R. 5456.</p> <p>Same as H.R. 5456.</p> <p>Same as H.R. 5456.</p>

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<p><i>Change from “Adolescent(s)” to “Youth”</i></p>	<p>The term “adolescent” refers to youth eligible for CFCIP services and is used in (1) the state plan requirement on involving the public and private sectors and (2) certifications on training on youth development, youth involvement in the program, and on making health care decisions. (Secs. 477(b)(2)(D), (b)(3)(D), (b)(3)(H), and 477(b)(3)(K))</p>	<p>Replaces the term “adolescent(s)” with “youth” in multiple places.</p>	<p>Same as H.R. 5456.</p>
<p><i>Unspent Funds</i></p>	<p>Chafee funding is allotted to all states based primarily on their relative share of children in foster care across the nation and to eligible tribes (out of a state’s allotment) based on the share of tribal children in foster care in the state.</p> <p>States and eligible tribes must annually request to receive their general Chafee and Education and Training Voucher (ETV) allotments and must spend the funding in a two-year period, either in the fiscal year it is received or in the succeeding fiscal year. If a state does not apply for its full CFCIP and ETV allotments, the funds are to be reallocated to one or more other states on the basis of their relative need for such additional allotments, as determined by HHS. (Secs. 477(c), (d)(3) and(4), and (j)(4))</p> <p>[In practice, if a state applies for its full general Chafee and ETV allotments but does not spend them within the two-year time period, the unused funds revert to the federal Treasury.]</p>	<p>Permits HHS to reallocate general Chafee and ETV funds that are not spent within the two-year period to states and tribes that apply for the funding.</p> <p>These funds may be redistributed among the states and tribes that apply for any unused funds, provided HHS determines the state or tribe will use the funds according to the program purposes. The amount each state or tribe receives will be based on the share of children in foster care among the states and tribes that successfully applied for the unused funds.</p> <p>Any unspent funds may be made available to the applying states or tribes in the second fiscal year following the two-year period in which funds were originally awarded.</p> <p>Any redistributed funds are considered part of the state or tribe’s allotment for the fiscal year in which the redistribution is made.</p>	<p>Same as H.R. 5456.</p>
<p><i>Education and Training Vouchers (ETVs)</i></p>	<p>Authorizes ETVs for eligible youth to attend institutions of higher education. Youth are eligible to receive ETVs if they are eligible for CFCIP. This includes children (1) likely to remain in foster care up to age 18 (which may, as states choose, include children of any age), (2) those who were previously in foster care and are between the ages of 18 and 21 years of age, (3) children aging out of foster care, and (4) children who left foster care at age 16 or older for kinship guardianship or adoption.</p> <p>A youth can receive a voucher until age 21, or to age 23 if</p>	<p>Would make ETVs available to youth who have experienced foster care at age 14 or older.</p> <p>Youth may continue receiving a voucher until age 26, so long as the youth is participating in the ETV program and making satisfactory progress toward completing a postsecondary education or training program; however, in no event may a youth receive such a voucher for more than five years, regardless of whether those years are consecutive.</p>	<p>Same as H.R. 5456.</p>

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	<p>the youth is in the ETV program at age 21 and is making satisfactory progress toward completing the education or training program in which he or she is enrolled. (Sec. 477(i)(1) and Sec. 477(i)(3))</p>		
<p>Reports to Congress <i>Report About Collecting Data on Youth</i></p>	<p>The 1999 law establishing the CFCIP (P.L. 106-169) required HHS to submit a report to the Ways and Means and Finance committees detailing plans and a timetable for collecting data from states on youth served, certain youth outcomes and related information, along with proposed penalties for states that failed to report data. [HHS submitted this report in Sept. 2001.]</p>	<p>Strikes this obsolete provision.</p>	<p>Same as H.R. 5456.</p>
<p><i>Report on Youth Outcomes</i></p>	<p>Not applicable.</p>	<p>No later than October 1, 2017, requires HHS to submit a report to the House Ways and Means and Senate Finance committees with information based on data reported by states via the National Youth in Transition Database (NYTD) or any other databases in which states report relevant child welfare outcome measures.</p> <p>The report must (1) compare factors related to entry into foster care and experiences of 17-year olds surveyed by NYTD with those who left care before age 17 (e.g., length of stay, number of placement settings, case goal, and discharge reason); (2) describe the characteristics of individuals who report poor outcomes (via NYTD) at ages 19 and 21; (3) offer benchmarks for determining what constitutes poor outcomes for youth who remain in, or have exited care, along with the plans of the Executive branch to use those benchmarks in evaluating child welfare agency performance in providing services to youth transitioning from foster care; (4) analyze any associations between outcomes at ages 19 and 21 and selected factors (e.g., type of placement, number of overall placements, time spent in foster care, and others); and (5) analyze the differences among states in outcomes for children in foster care and formerly in foster care at age 19 and 21 among states.</p>	<p>Same as H.R. 5456, except that HHS is required to submit the report by October 1, 2019.</p>
<p>Documentation for Youth Leaving Foster Care Due to Age</p>	<p>The state must provide specified information or documents (provided the child is eligible for a given document) to any youth who has been in foster care for at least six month and is being discharged from care due to age (i.e., at age 18 or older). Specifically, it must</p>	<p>For any youth in foster care for at least six months and who is aging out of foster care (on his or her 18th or later birthday as chosen by the state), requires the state to provide that youth with official documentation proving the child was previously in foster care.</p>	<p>Same as H.R. 5456.</p>



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	provide: (1) an official or certified copy of the child's U.S. birth certificate, (2) an official social security card, (3) health insurance information, (4) a copy of the child's medical records, and (5) a driver's license or state-issued identification card (meeting the requirements of the REAL ID Act). (Sec. 475(5)(l))		
<b>CONTINUING INCENTIVES TO STATES TO PROMOTE ADOPTION AND LEGAL GUARDIANSHIP</b> <i>(Title IV in H.R. 5456; Part VI in Div. E, Title VII of P.L. 115-123)</i>			
<b>Reauthorizing Adoption and Legal Guardianship Incentives</b> (Sec. 401 in H.R. 5456; Sec. 50761 in P.L. 115-123)			
Extending Incentive Payments	Adoption and Legal Guardianship Incentive Payments are paid to states that increase the rate at which children who are in foster care and who cannot return home are placed in permanent families via adoption or legal guardianship. (Sec. 473A)  States were eligible to earn incentives for adoptions and/or legal guardianships completed in FY2013-FY2015. Annual discretionary funding of \$43 million was authorized for the program through FY2016. Any funding appropriated under this authority remained available until the last day of FY2016. (Sec. 473A(b)(4), (h)(1)(D), and (h)(2))	Continues for five fiscal years (FY2016-FY2020) a state's eligibility to earn these incentive payments and extends annual discretionary funding authority, at the current law annual level of \$43 million, for each of five years (FY2017-FY2021). Additionally, permits funds appropriated under this authority to remain available until expended, but not later than FY2021.	Same as H.R. 5456, except that it would add that each of these provisions must be considered enacted as of October 1, 2017, and must be effective on that same date.
<b>TECHNICAL CORRECTIONS</b> <i>(Title V in H.R. 5456; Part VII in Div. E, Title VII of P.L. 115-123)</i>			
<b>Technical Corrections to Data Exchange Standards to Improve Program Coordination</b> (Sec. 501 in H.R. 5456; Sec. 50771 in P.L. 115-123)			
Data exchange standards	Requires HHS, after consulting with the Office of Management and Budget (OMB) and considering state perspectives, to designate by regulation standard data elements for any category of reporting required under Title IV-B. Stipulates additional requirements related to these data standards. (Sec. 440)	Rewrites these provisions. Requires HHS, in consultation with an interagency work group established by the OMB, and considering state government perspectives, to develop regulations concerning the categories of information that state child welfare agencies must be able to exchange with another state agency as well as federal reporting and data exchange required under Title IV-B. HHS must issue a proposed rule no later than two years (24 months) after enactment of this legislation that identifies federally required data exchanges and specifies state implementation options.	Same as H.R. 5456, except that it further requires that this work address data exchange standards needed for reporting done under both Title IV-B and Title IV-E programs.

Provision	<p style="text-align: center;"><b>Prior Law</b></p> <p><i>This column describes provisions of the law in place just prior to enactment of P.L. 115-123. To the extent the enacted provision, as described, added to but did not change that law (or is not yet effective) the provision remains current law.</i></p>	<p style="text-align: center;"><b>H.R. 5456, 114<sup>th</sup> Congress</b> <b>(as passed by the House, June 2016)</b></p> <p><i>This column describes provisions in Family First as it passed the House in June 2016.</i></p>	<p style="text-align: center;"><b>Division E, Title VII of P.L. 115-123</b> <b>(enacted February 9, 2018)</b></p> <p><i>This column describes final enacted provisions of Family First.</i></p>
<b>Technical Corrections to State Requirement to Address the Developmental Needs of Young Children</b> (Sec. 502 in H.R. 5456; Sec. 50772 in P.L. 115-123)			
Addressing Needs of Young Children	Under the Title IV-B Stephanie Tubbs Jones Child Welfare Services (CWS) programs, states (including DC) and certain territories and tribes must describe activities they do to reduce the length of time children who are under five years of age spend without a permanent family and what they do to address the developmental needs of these children. (Sec. 422(b)(18))	Clarifies that each state, and certain territories and tribes, must describe in its Title IV-B CWS plan what it is doing to address the developmental needs of all vulnerable children under 5 years of age who receive benefits or services under the Title IV-B programs or the Title IV-E foster care and permanency program (not just children in foster care).	Same as H.R. 5456.
<b>ENSURING STATES REINVEST SAVINGS RESULTING FROM INCREASE IN ADOPTION ASSISTANCE</b> (Title VI in H.R. 5456; Part VIII in Div. E., Title VII of P.L. 115-123)			
<b>Delay of Adoption Assistance Phase-In</b> (Sec. 601 in H.R. 5456; Sec. 50781 in P.L. 115-123)			
Delay in use of new adoption assistance eligibility criteria	<p>Use of an income test for purposes of determining eligibility for Title IV-E adoption assistance was phased out between October 1, 2009 and October 1, 2017. The income test applied to the home from which a child was removed (not to the adoptive home). The phase out began with FY2010 and was accomplished primarily based on age of the child being adopted. (Sec. 473(e)(1)) and Sec. 473(a)(2)(A)(ii))</p> <p>As of October 1, 2015 (FY2016) no income eligibility test was needed to determine IV-E adoption assistance eligibility for any child determined by the state to have “special needs” and who was four years of age, or older, as of the last day of the fiscal year in which his/her adoption assistance agreement was signed. As of October 1, 2016 (FY2017), this was the case for special needs children who reached two years of age or older before the last day of the fiscal year in which their adoption assistance agreement was signed. As of October 1, 2017 (FY2018), children of any age who are determined by a state to have special needs may be eligible for Title IV-E adoption assistance without application of an income test. (Sec. 473(3))</p> <p>NOTE: For purposes of the Title IV-E adoption</p>	Seeks to delay this expansion of eligibility for Title IV-E adoption assistance by two and a half years. The delay is intended to affect children with special needs who have not reached four years of age as of the last day of the fiscal year in which when their adoption assistance agreement is signed. Specifically, the bill intends to permit children with special needs who are two but not yet four years of age as of that date to be eligible for Title IV-E adoption assistance without meeting an income test as of April 1, 2019 (instead of current law October 1, 2016). Further, any child with special needs (regardless of age) would be eligible for Title IV-E adoption assistance, without an income test, as of April 1, 2020 (instead of current law October 1, 2017).	For certain special needs children who do not reach their second birthday in the fiscal year their adoption assistance agreement is signed, requires use of an income test for an additional six and a half years, to determine Title IV-E adoption assistance eligibility. Specifically, beginning on January 1, 2018, and through June 30, 2024, the income test would need to be applied for any child who is under the age of two when his/her adoption assistance agreement is signed, provided the child will not reach his/her second birthday before the last day of the fiscal year in which that agreement is signed. As of July 1, 2024, no income test is needed for purposes of determining a child’s eligibility for Title IV-E adoption assistance,

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	assistance program, “special needs” generally means a child cannot be reunited with his/her parents and the child has one or more state-determined factors or conditions that make it unlikely that he or she will be adopted without assistance. Such factors or conditions may include the child’s membership in a sibling group, age, physical or mental disability, behavioral issues or race/ethnicity; as of October 1, 2017, it must include meeting the disability criteria for Supplemental Security Income (SSI). (Sec. 473(a)(1)(A), (c), and (e))		regardless of the child’s age. This provision is effective as if enacted on January 1, 2018. [Note: Any child determined eligible for Title IV-E adoption assistance before January 1, 2018, maintains that eligibility.]
<b>GAO Report on State Reinvestment of Savings Resulting From Increase in Adoption Assistance</b> (Sec. 602 in H.R. 5456; Sec. 50782 in P.L. 115-123)			
	States are required to calculate any state savings resulting from the expanded support for Title IV-E adoption assistance and to reinvest any savings to the state treasury in child welfare purposes (as authorized under Title IV-E or Title IV-B). Beginning with FY2015, states must annually report to HHS on the methodology used to calculate any savings, the amount of any identified savings, and the use of those savings. In addition, states are required to spend no less than 30% of any identified savings to provide post-adoption services, post-guardianship services, and services to support and sustain positive permanent outcomes for children who might otherwise enter foster care. Finally, of that 30%, no less than two-thirds must be spent for post-adoption and post-guardianship services. (Sec. 473(a)(8))	Requires the GAO to look at whether states are complying with the requirement to reinvest in child welfare activities any savings resulting from phasing out the income eligibility requirements for federal Title IV-E adoption assistance. The GAO is required to submit a report with its findings, including any recommendations to ensure compliance with the law, to the House Ways and Means and Senate Finance committees.	Same as H.R. 5456.

**Source:** Table prepared by the Congressional Research Service (CRS).

**Note:** A Title IV-E agency is the single public agency in any of the 50 states, the District of Columbia, a territory, or a tribe that is operating a Title IV-E program under an approved Title IV-E plan.

- a. The enacted law gives the short title of Division E, Title VII as the Bipartisan Budget Act. This is the title of the overall bill and is understood to be an inadvertent error.
- b. After the provision giving the short title, the Division E, Title VII provisions of P.L. 115-123 are all included in a single subtitle (Subtitle A) that includes eight parts (Parts I –VIII). In H.R. 5456, this purpose statement applied to provisions included the first three parts (Parts III).