

**N00B**  
**Social Services Administration**  
**Department of Human Services**

***Executive Summary***

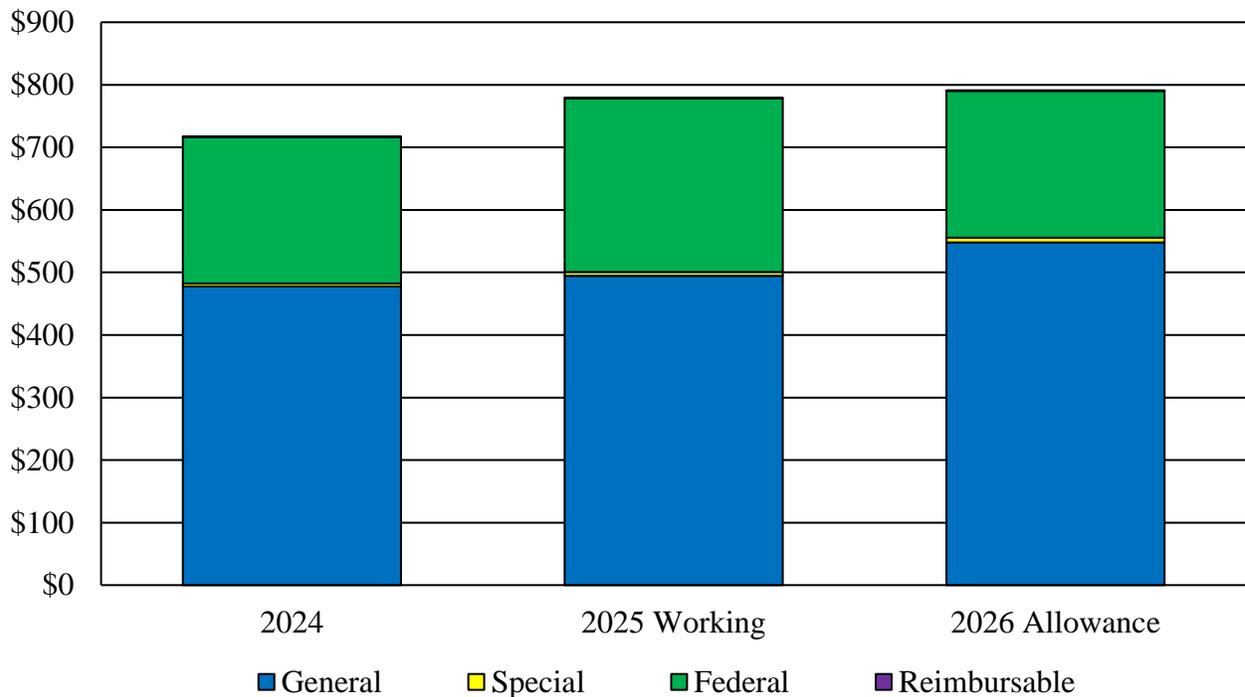
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The Department of Human Services (DHS) Social Services Administration (SSA) administers child welfare programs, including foster care, subsidized adoptions, and subsidized guardianships, as well as programs providing services to the elderly, disabled, and vulnerable adults.

***Operating Budget Summary***

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**Fiscal 2026 Budget Increases \$11.8 Million, or 1.5%, to \$791.2 Million**  
(\$ in Millions)



Note: Numbers may not sum due to rounding. The fiscal 2025 working appropriation accounts for deficiencies. The fiscal 2025 impacts of statewide salary adjustments are centrally budgeted in the Department of Budget and Management (DBM), and adjustments are not reflected in this agency’s budget. The fiscal 2026 impacts of the fiscal 2025 statewide salary adjustments appear in this agency’s budget. The fiscal 2026 statewide salary adjustments are centrally budgeted in DBM and are not included in this agency’s budget.

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- The fiscal 2026 allowance for SSA increases by \$11.8 million compared to the fiscal 2025 working appropriation after accounting for a proposed deficiency appropriation. The increase includes \$13.7 million for personnel expenses accounting for the cost-of-living adjustments (COLA) and increments provided in fiscal 2025 but not yet budgeted in fiscal 2025 within the agency's budget.
- The fiscal 2026 allowance for SSA includes \$39.2 million for deficiency appropriations for fiscal 2025 costs, of which \$18.5 million are in general funds, \$0.4 million are in special funds, and \$20.4 million are in federal funds.
- The fiscal 2025 deficiency for SSA includes \$8.1 million in federal funds for fiscal 2024 shortfalls. Excluding the funding associated with the deficiency appropriation for fiscal 2024 costs, the fiscal 2026 allowance of SSA would increase by \$19.9 million, or 2.6%.

## ***Key Observations***

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- ***Foster Care Caseload:*** In fiscal 2024, average monthly caseloads across all foster care placement types declined by 6.0% compared to fiscal 2023. This decline is mostly associated with a 13.9% decrease in regular foster care placements from 1,006 average monthly cases in fiscal 2023 to 866 average monthly cases in fiscal 2024. Fiscal 2025 data (through December 2024) show a slight decline of 0.9% across all foster care placement types compared to fiscal 2024.
- ***Implementation of Provisions of the Federal Family First Prevention Services Act (FFPSA):*** In fiscal 2024, 19 jurisdictions continued implementation of at least one evidence-based practice for prevention services as authorized in the FFPSA. These practices served a total of 530 families during the fiscal year. During calendar 2024, DHS moved away from having a designated timeframe for providers to submit applications for the Qualified Residential Treatment Program (QRTP) designation, allowing providers to submit applications on a rolling basis. However, the number of QRTP designated providers remained at six as of December 2024.
- ***SSA Vacancies Decrease:*** The number of vacant positions in SSA decreased by 119.7 positions between December 31, 2023, and December 31, 2024, to a total of 219.5 positions. Despite the reduction, this level of vacancies is 58.5 greater than the number needed to meet the budgeted turnover expectancy and is nearly 8.4% of all authorized positions.

- ***Child Welfare Caseload Standard:*** As of September 1, 2024, SSA had 316.0 more caseworker positions and 18.9 more supervisor positions than required to meet the Child Welfare League of America (CWLA) standards. The total number of filled caseworker positions increased by 100.7 since the previous year and, at the same time, the number of filled caseworker positions needed to meet CWLA standards decreased by 56.4 positions.

## **Operating Budget Recommended Actions**

### **Funds**

1. Add language restricting general funds until a report is submitted on child welfare caseloads and caseworkers needed to meet Child Welfare League of America standards.
2. Add language restricting general funds until a report is submitted on hospital stays for youth in out-of-home placements.
3. Add language restricting general funds until a report is submitted with data on hotel stays for youth in out-of-home placements.
4. Add language restricting general funds until submission of measures of child safety, child placements, adult safety and rates of removal and reentry into foster care.
5. Adopt committee narrative requesting an update on the implementation of evidence-based practices and other provisions of the federal Family First Prevention Services Act.
6. Adopt committee narrative requesting an update on the number of child fatalities that involved child abuse and/or neglect.
7. Add language restricting general funds in the Foster Care Maintenance Payments program to that purpose only.
8. Reduce general and federal funds within Foster Care Maintenance Payments program. -\$ 8,498,575
9. Adopt committee narrative requesting monthly data on out-of-home placements of children and youth.

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10. Adopt committee narrative requesting an update on the implementation of the new foster care provider rate structure and the second phase of rate reform.
11. Adopt committee narrative requesting budget detail on costs associated with hotel stays.
12. Add language restricting general funds in the Child Welfare Services program to that purpose.
13. Add language restricting general funds in the Foster Care Maintenance Payments program to that purpose only.

**Total Net Change**

**-\$ 8,498,575**

**Budget Reconciliation and Financing Act Recommended Actions**

1. For fiscal 2026, payments to providers with rates set by the Interagency Rates Committee under Section 8-417 of the Education Article may not increase over the rates in effect on January 1, 2025.

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**Social Services Administration**  
**Department of Human Services**

***Operating Budget Analysis***

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**Program Description**

DHS SSA administers child welfare programs, including foster care, subsidized adoptions, and subsidized guardianships, as well as programs providing services to the elderly, disabled, and vulnerable adults. Child welfare services provided by SSA are intended to investigate, prevent, or remedy instances of neglect, abuse, or exploitation of children; preserve, rehabilitate, or reunite families; help children to begin or continue to improve their well-being; prevent children from needing to enter out-of-home care; and provide appropriate placement and permanency of services. Adult services provided by SSA focus on the needs of the elderly, disabled, and vulnerable adults. Adult services promote safety, self-sufficiency, and assist in avoiding or delaying unnecessary institutional care. The Adult Protective Services program investigates, prevents, and remedies instances of neglect, abuse, and exploitation of vulnerable adults. SSA provides services through local departments of social services (LDSS), which are arms of DHS in each jurisdiction.

***Performance Analysis: Managing for Results***

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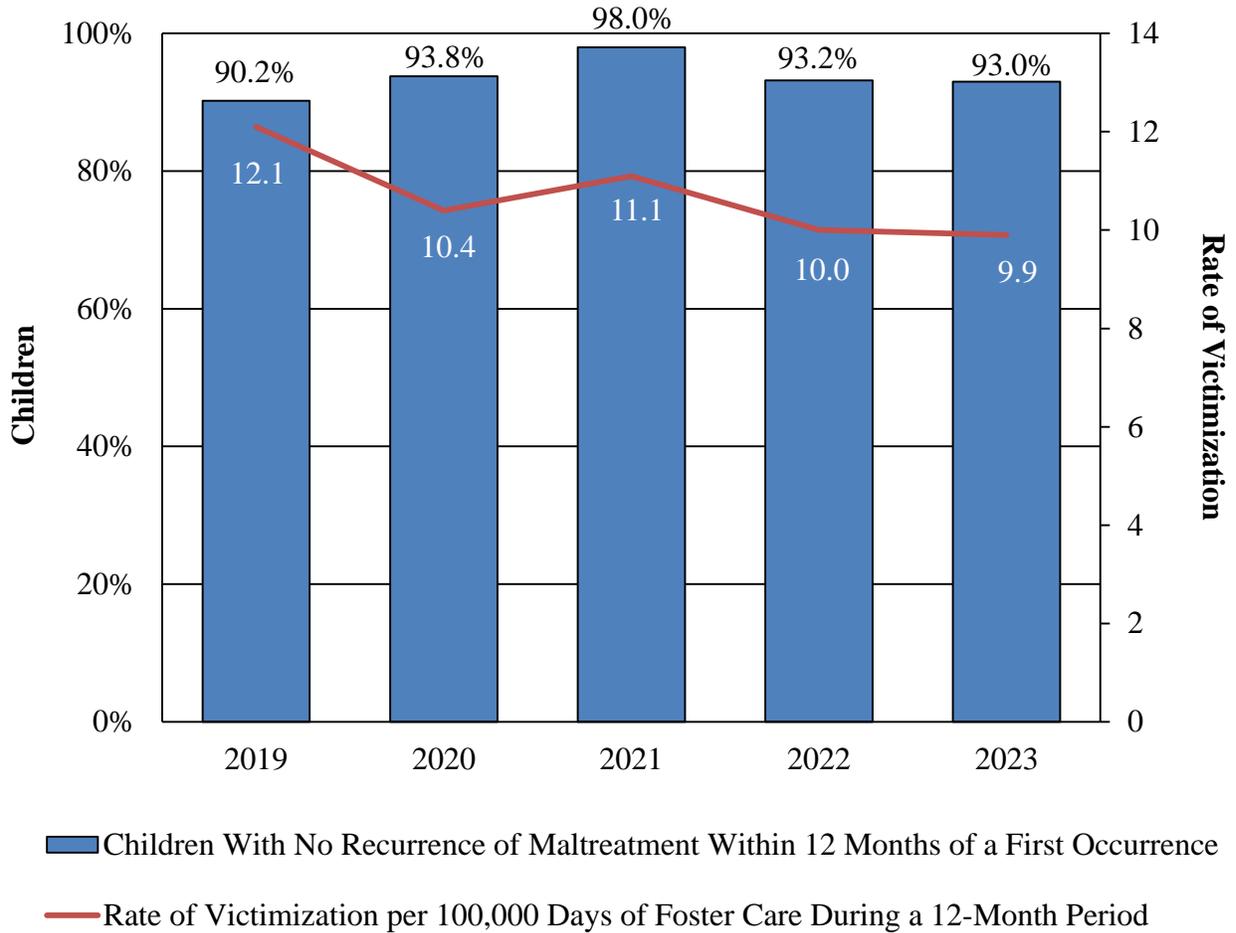
**1. DHS Fails to Report Fiscal 2024 Data in Annual Managing for Results Submission**

**Child Safety**

DHS reports two primary performance measures related to child safety as part of its annual Managing for Results (MFR) submission: (1) the percentage of children with no recurrence of maltreatment within 12 months of a first occurrence; and (2) the rate of victimization per 100,000 days of foster care during a 12-month period. The rate of victimization includes all instances of maltreatment while in foster care and is not limited to foster parents or facility staff members.

DHS has a goal of having at least 90.9% of children experiencing no recurrence of maltreatment within 12 months of a first occurrence. As shown in **Exhibit 1**, DHS has exceeded this goal in each of the past five years; however, performance has declined following improvements in fiscal 2020 and 2021. Between fiscal 2021 and 2023, the percentage of children experiencing no recurrence of maltreatment decreased by 5 percentage points, to 93.0%. The department's goal for rate of victimization is 8.5 or less per 100,000 days of foster care during a 12-month period. DHS has not met this goal in fiscal 2019 through 2023. DHS did not provide updated data for fiscal 2024.

**Exhibit 1  
Child Safety Performance Measures  
Fiscal 2019-2023**

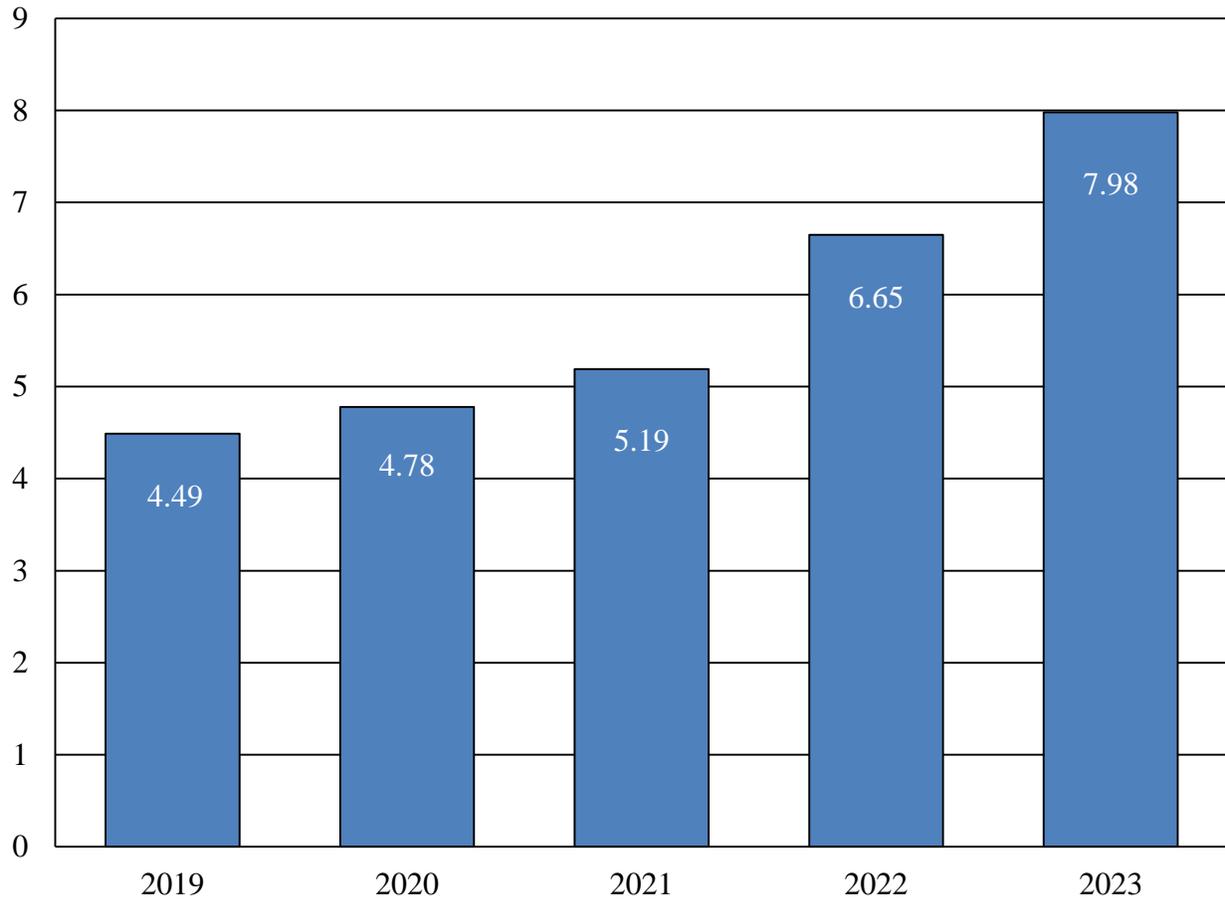


Source: Department of Human Services; Department of Budget and Management

**Rate of Placement Moves**

DHS has a goal of limiting the number of placement moves for children in foster care to no more than 4.12 per 1,000 days of foster care, which equates to a move approximately every 243 days. As shown in **Exhibit 2**, the rate of placement moves was 7.98 in fiscal 2023. The fiscal 2023 rate of 7.98 represents a move every 125 days and is a 20% increase from fiscal 2022. DHS did not provide updated data for fiscal 2024.

**Exhibit 2**  
**Rate of Placement Moves**  
**Per 1,000 Days of Foster Care**  
**Fiscal 2019-2023**



Source: Department of Human Services; Department of Budget and Management

In addition to the two performance analysis measures discussed above, the DHS SSA analysis has previously included updates on exits to permanency within 12 months of entry into care and adult protective services measures. However, DHS did not include actual data for fiscal 2024 in its annual MFR submission and reported that it was unable to provide the data to concerns about reliability. **DHS should comment on efforts that it will take to improve the reporting of measures of child safety, child placements, and adult safety measures. The Department of Legislative Services (DLS) recommends adding budget bill language restricting funds pending submission of data on measures of child safety, child placements, and adult safety measures.**

## **Fiscal 2025**

### **Proposed Deficiency**

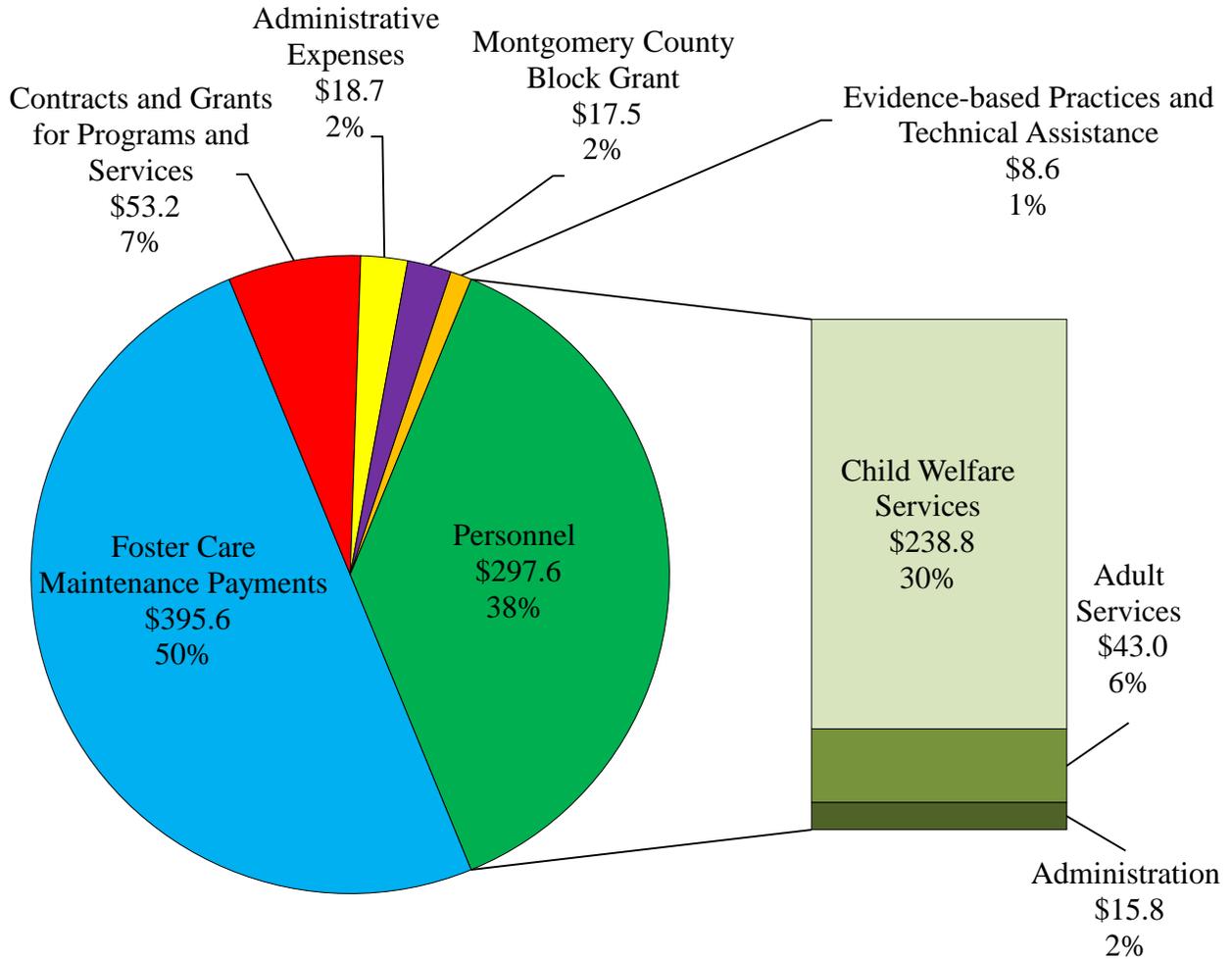
The fiscal 2026 Budget Bill includes proposed deficiency appropriations for SSA totaling \$47.3 million. Of the total deficiency appropriations, \$18.5 million is in general funds, \$0.4 million in special funds, and \$28.5 million in federal funds. The proposed deficiencies include:

- \$38.3 million for foster care fiscal 2025 shortfalls – \$17.7 million in general funds, \$0.4 million in special funds, and \$20.2 in federal funds;
- \$8.1 million in federal funds for foster care fiscal 2024 shortfalls;
- \$1.4 million for contractual services for the foster care rate reform – \$1.2 million in general funds and \$0.2 million in federal funds; and
- a reduction of \$500,000 in general funds to reflect projected overtime payments within Child Welfare Services.

### **Fiscal 2026 Overview of Agency Spending**

The fiscal 2026 allowance for SSA totals \$791.2 million. As shown in **Exhibit 3**, the Foster Care Maintenance Payments account for \$395.6 million, or 50%, of the fiscal 2026 allowance. This program funds both the placement costs and related costs for children in the State’s foster care system. Outside of the Foster Care Maintenance Payments program, the remainder of the budget for SSA totals \$395.6 million. Personnel expenses total \$297.6 million, or 38%, of the fiscal 2026 allowance for SSA, most of which support personnel in local child welfare service programs. The Montgomery County Block Grant accounts for \$17.5 million of the fiscal 2026 allowance. Under State law, Montgomery County receives a block grant for child welfare, adult services, family investment, and administrative expenses rather than operating like other LDSS. The SSA budget includes the child welfare services and adult services components of the block grant. The fiscal 2026 allowance also includes \$8.6 million for evidence-based prevention services implemented by LDSS under the FFPSA and technical assistance to administer and evaluate the outcomes of these programs.

**Exhibit 3**  
**Overview of Agency Spending**  
**Fiscal 2026 Allowance**  
**(\$ in Millions)**



Note: The fiscal 2026 statewide salary adjustments are centrally budgeted in the Department of Budget and Management and are not included in this agency's budget.

Source: Governor's Fiscal 2025 Budget Books; Department of Legislative Services

**Proposed Budget Change**

As shown in **Exhibit 4**, the fiscal 2026 allowance for SSA increases by \$11.8 million, or 1.5%, compared to the fiscal 2025 working appropriation after accounting for proposed fiscal 2025 deficiency appropriations and a deficiency related to fiscal 2024 shortfalls. The fiscal 2026 allowance increases by \$19.9 million, or 2.6%, compared to the fiscal 2025 working appropriation, not accounting for the fiscal 2024 shortfalls. The \$11.8 million increase is primarily due to an increase of \$14.2 million in regular personnel expenses, primarily accounting for COLAs and increments and associated fringe benefits provided in fiscal 2025 but not yet budgeted within the agency’s budget. The increase in personnel expenses also includes a \$6.5 million increase related to the decrease in the turnover rate from 8.5% to 6.0%.

**Exhibit 4  
Proposed Budget  
Department of Human and Social Services  
(\$ in Thousands)**

<b>How Much It Grows:</b>	<b><u>General Fund</u></b>	<b><u>Special Fund</u></b>	<b><u>Federal Fund</u></b>	<b><u>Reimb. Fund</u></b>	<b><u>Total</u></b>
Fiscal 2024 Actual	\$477,700	\$4,588	\$234,307	\$650	\$717,245
Fiscal 2025 Working Appropriation	494,707	6,182	277,732	828	779,448
Fiscal 2026 Allowance	<u>548,103</u>	<u>7,411</u>	<u>234,858</u>	<u>828</u>	<u>791,200</u>
Fiscal 2025-2026 Amount Change	\$53,396	\$1,229	-\$42,873	\$0	\$11,752
Fiscal 2025-2026 Percent Change	10.8%	19.9%	-15.4%		1.5%

**Where It Goes:**

**Personnel Expenses**

Salary increases and associated fringe benefits including fiscal 2025 COLA and increments, includes net increase of 2 positions through internal transfers within DHS.....	\$13,709
Turnover adjustments decrease from 8.52% to 6.01% .....	6,481
Workers’ compensation .....	-95
Overtime earnings .....	-162
Employee and retiree health insurance .....	-5,781

**Foster Care Maintenance Payments**

Foster Care Maintenance Payments reflecting estimated caseload increases and changes in placement costs.....	7,190
One-time deficiency related to fiscal 2024 shortfalls .....	-8,126

**Change**

<b>Where It Goes:</b>	<b><u>Change</u></b>
<b>Social Services Administration</b>	
Child abuse prevention and treatment contract to provide families with the necessary skills and resources to provide a safe and nurturing environment for their children.....	\$126
FFPSA transition grant for expansion of evidence-based practices .....	83
Administrative hearings .....	-194
Funds to provide psychiatric oversight of psychotropic medication prescriptions for children and youths in out-of-home placements.....	-397
Anticipated contract expenses for the current contract to include support for ongoing efforts to revise rates for private providers .....	-476
Outcome-based System of Accountability as mandated by Child Welfare Accountability Act of 2006.....	-550
Other .....	-55
<b>Total</b>	<b>\$11,752</b>

COLA: cost-of-living adjustment  
DHS: Department of Human Services  
FFPSA: Federal Family First Prevention Services Act

Note: Numbers may not sum to total due to rounding. The fiscal 2025 working appropriation accounts for deficiencies. The fiscal 2025 impacts of statewide salary adjustments are centrally budgeted in the Department of Budget and Management (DBM), and adjustments are not reflected in this agency’s budget. The fiscal 2026 impacts of the fiscal 2025 statewide salary adjustments appear in this agency’s budget. The fiscal 2026 statewide salary adjustments are centrally budgeted in DBM and are not included in this agency’s budget.

### **Foster Care Maintenance Payments**

Excluding costs associated with a proposed deficiency appropriation related to fiscal 2024 shortfalls, the fiscal 2026 allowance for Foster Care Maintenance Payments increases by \$7.2 million, or 1.9%, compared to the fiscal 2025 working appropriation.

### **Implementation of the New Foster Care Provider Rate Structure**

DHS began implementation of a new foster care provider rate system in fiscal 2025. The rate adjustments in fiscal 2025 only apply to institutional providers who are the highest cost provider type. Adjustments for purchased homes (e.g. treatment foster) were originally planned for fiscal 2026 and are now planned for a future year. Family foster care rates are not impacted by the changes

Language in the fiscal 2025 Budget Bill restricted funds pending submission of a report providing information on the planned uses of funds associated with the implementation of the new provider rate structure. DHS reported that the new structure for residential childcare providers

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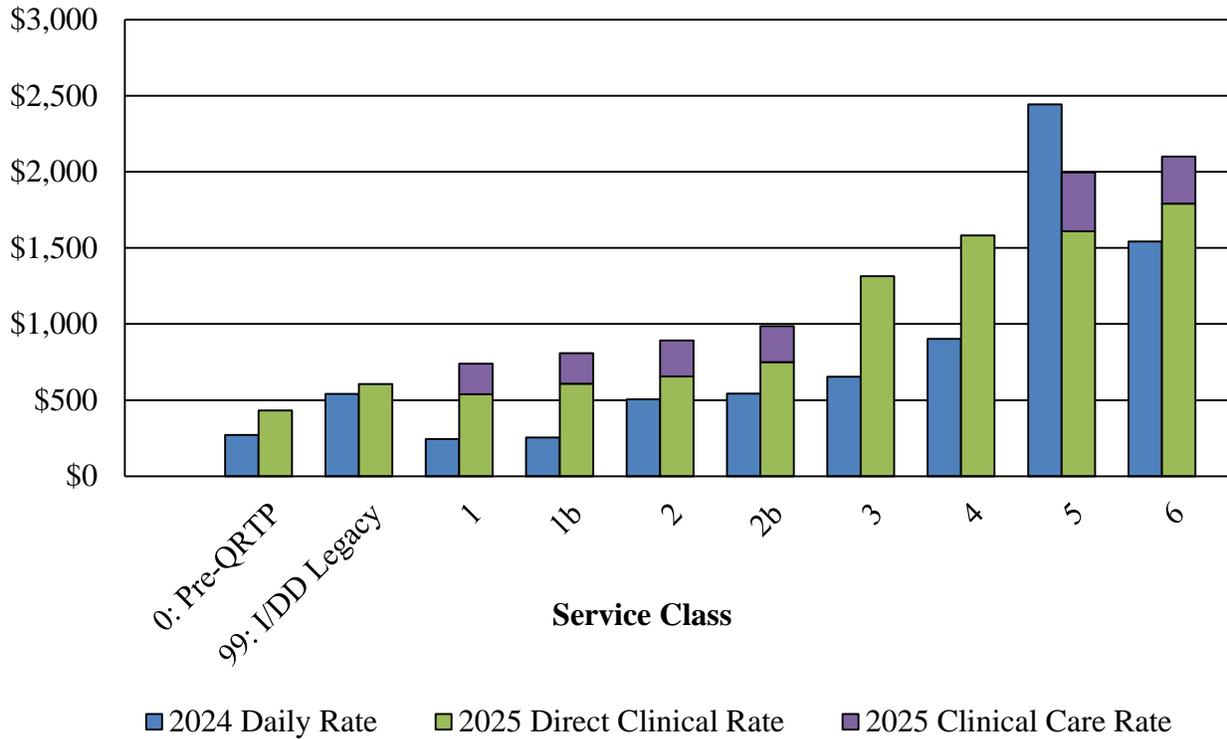
includes six classes of residential interventions (classes 1, 2, 3, 4, 5 and 6) and two classes of legacy rates (classes 0 (Pre-Qualified Residential Treatment Program) and 99 (Intellectual and Developmental Disabilities Legacy)). The legacy rates are intended to allow providers time to meet the requirements for one of the six residential intervention classes. Classes 1 and 2 include “b” class rates, which are intended to provide additional staffing supports to smaller providers. The six classes are as follows:

- class 1 serves youth with significant behavioral health services;
- class 2 serves youth with intensive or specialty health service needs;
- class 3 serves youth with high intellectual and developmental disability needs but no behavioral health services;
- class 4 serves youth with high intensity medically fragile services;
- class 5 serves youth who have experienced commercial sexual exploitation; and
- class 6 serves youth with the highest intensity behavioral health and intensive intellectual and developmental disability service needs.

The revised rate structure includes two sets of rates for programs for direct and clinical care. Direct care rates include operating costs related to providing care 24 hours a day, seven days a week, while clinical care rates include costs for clinical, behavioral, therapeutic services, support, and interventions, which may vary based on the intensity of services provided.

DHS provided a breakdown of the total fiscal 2025 per diem class rates into clinical care and direct care components. As shown in **Exhibit 5**, depending on service class, per diem rates for direct care range from \$433.46 to \$1,790.00, and per diem rates for clinical care range from \$200.55 to \$388.42. Federal Medicaid reimbursement is available only for clinical care costs. DHS reported that service classes 0, 99, 3, and 4 do not have a clinical rate as they do not have an intensive behavioral health clinical element in their programs.

**Exhibit 5  
Fiscal 2025 Residential Child Care Provider Class Rates Compared to  
Fiscal 2024**



I/DD: Intellectual and Developmental Disabilities  
QRTP: Qualified Residential Treatment Program

Source: Department of Human Services

The new provider rate structure includes the establishment of rates based on the classes/tiers of programs rather than the current rate structure, which provides individual provider rates. Although the prior rates were not class-based, for comparative purposes, DHS provides information on the average rates paid for providers who fall into each class. In fiscal 2025, all class rates except for class 5 are higher than fiscal 2024 average rates for providers falling into that class. Depending on the service class, the increase in daily class rates ranges between \$66 to \$679, or 12.3% to 217.7%. However, for class 5, the rate decreased by \$446 or 18.3%.

**Estimated Fiscal 2025 Spending**

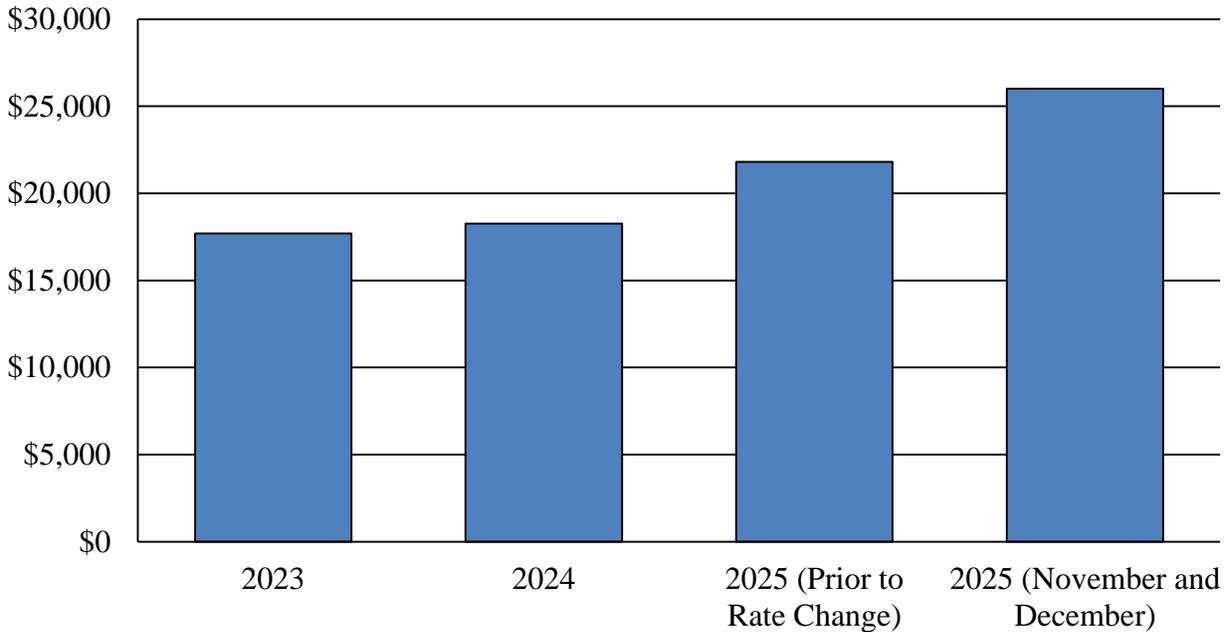
The budget committees requested that DHS provide a detailed accounting of how fiscal 2025 budget funding for the rate reform would be expended. DHS provided the total

estimated cost by class for rates effective October 1, 2024. DHS provided the details based on the number of youth placed in providers in each of those classes. The total estimated cost provided from October 1, 2024, through June 30, 2025, was \$70.4 million, reflecting a \$22.9 million increase from the fiscal 2024 total spending. This total includes \$63.5 million for direct care cost and \$6.9 million for clinical care cost. Costs for all classes, except for class 5, are estimated to increase in fiscal 2025. The largest increase of \$8.7 million can be attributed to class 3, which consists solely of direct care.

As shown in **Exhibit 6**, the average monthly payments increased by 19.5% in fiscal 2025 prior to the implementation of the rate reform. Following the rate reform, average monthly payments further increased by 19.2%. Due to the substantial increase in average monthly placement costs, the monthly foster care data provided by DHS shows a significant increase of expenditures in the purchase institution category since the implementation of the new rates in October 2024. Purchased institution increased by \$2.4 million in November and further increased by \$543,375 in December of fiscal 2025.

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**Exhibit 6**  
**Average Monthly Payments for Purchased Institutions**  
**Fiscal 2023-2025**

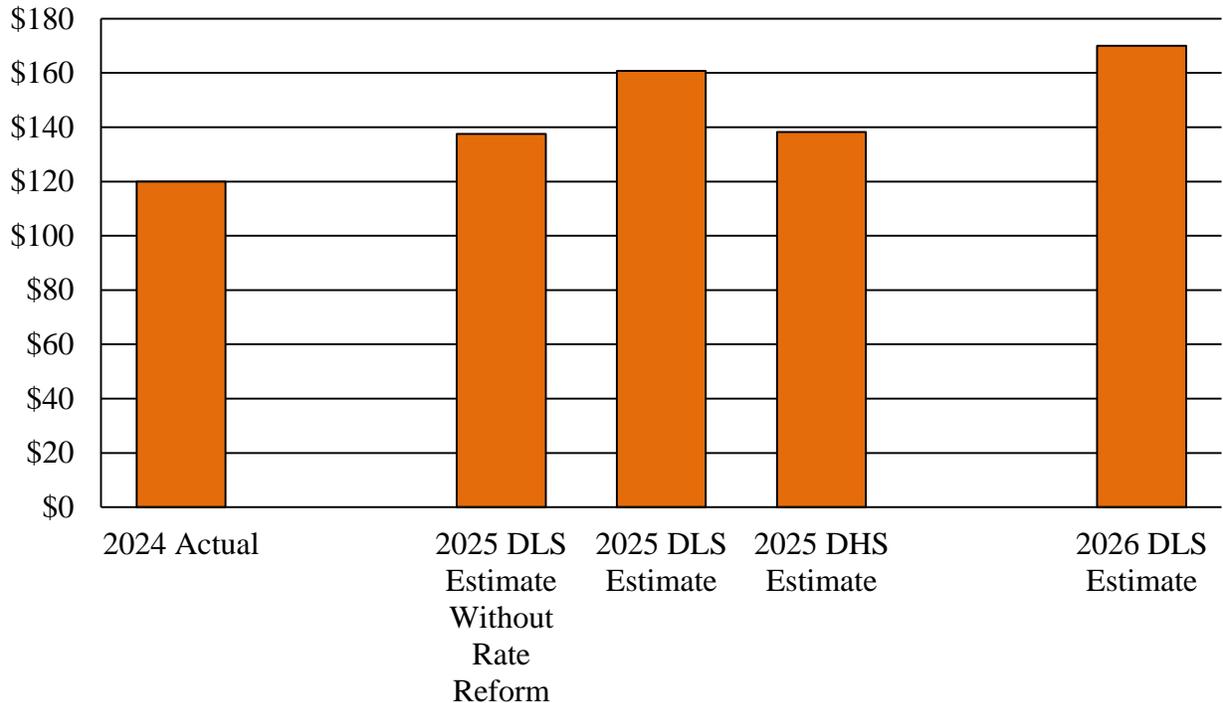


Source: Department of Human Services; Department of Legislative Services

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Based on the average payments in the first two months since the rate changes went into effect, DLS estimates that the total annual cost for purchased institutions in fiscal 2026, with no additional rate increase under the new provider rate structure, would be \$170.0 million, reflecting an increase of \$50.0 million from fiscal 2024. As shown in **Exhibit 7**, the DHS estimate of total purchased institution expenditures in fiscal 2025 due to rate reform is significantly lower than the DLS estimate and is in fact more in line with the DLS estimate not accounting for rate reform based on the average payments prior to the implementation. DLS’ estimate, based on the two-month data available since the implementation of rate reform, is about \$22.5 million higher than DHS’ estimate.

**Exhibit 7**  
**Total Purchased Institution Expenditure**  
**Fiscal 2024-2026**  
**(\$ in Millions)**



DHS: Department of Human Services  
DLS: Department of Legislative Services

Source: Department of Human Services; Department of Legislative Services

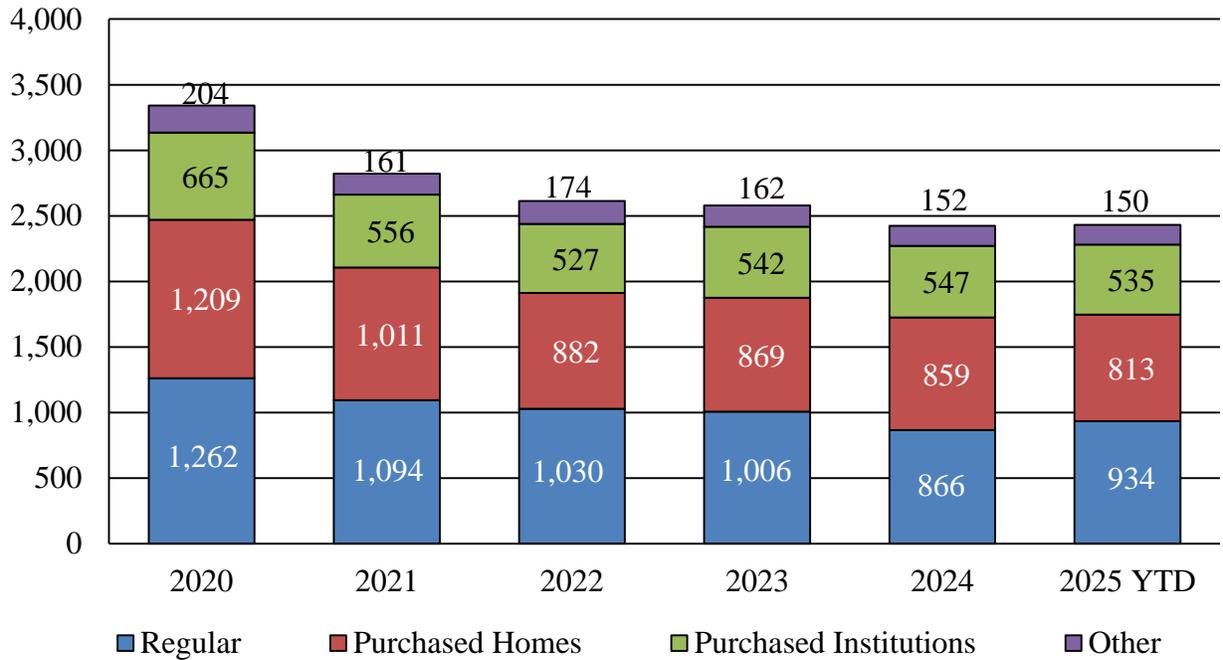
## **Status of the Medicaid State Plan Amendment**

DHS indicated in the report that that MDH was expected to submit a draft State Plan Amendment (SPA) to the U.S. Centers for Medicare and Medicaid Services in April 2025, with an effective date of July 1, 2025. The SPA will add coverage for residential interventions for children in DHS and Maryland Department of Juvenile Services (DJS) out-of-home placements and allow reimbursement for the clinical rates established by the Interagency Rates Committee (IRC) for residential classes 1, 2, 5, and 6. DHS reported that Medicaid claims for fiscal 2026 will begin after the necessary Medicaid regulations are promulgated. When claiming begins, general fund expenditures should be reduced based on the availability of federal funds. Although the exact amount of general fund savings was not stated, DLS notes that the State's Medicaid match rate is 50%, and DHS estimated \$6.9 million as the clinical care cost. As noted, DLS is estimating a higher overall cost of the rate reform based on experience to date, which could lead to higher savings. However, fiscal 2026 allowance does not include funds through Medicaid for foster care. **DHS should comment on when the Medicaid claims are anticipated to begin for residential interventions for children in out-of-home placements and why the anticipation of these funds was not accounted for in the fiscal 2026 allowance. DLS recommends adopting committee narrative requesting an update on the second phase of the rate reform, which will implement a new foster care provider rate system for purchased homes, and an update on the number of youths served by the new foster care provider rate structure by class type and cost by class type in fiscal 2025.**

## **Caseload Trends and Estimates**

**Exhibit 8** presents annual average monthly foster care caseload data. The number of youths in out-of-home placements paid for by DHS decreased each year between fiscal 2016 and 2024. Prior to fiscal 2021, annual rates of declines averaged approximately 3% between fiscal 2016 and 2020. However, the average monthly number of placements declined by 15.5% in fiscal 2021 and by 7.3% in fiscal 2022 due to impacts of the COVID-19 pandemic. The number of youths in out-of-home placements paid for by DHS continued to decline in fiscal 2024. In fiscal 2024, the overall caseload declined by 6.0%. Among individual placement types, regular foster caseloads declined by 13.9%, purchased home placements declined by 1.2%, and purchased institution placements grew by 0.9%.

**Exhibit 8**  
**Foster Care Caseloads**  
**Fiscal 2020-2025 YTD (December 2024)**



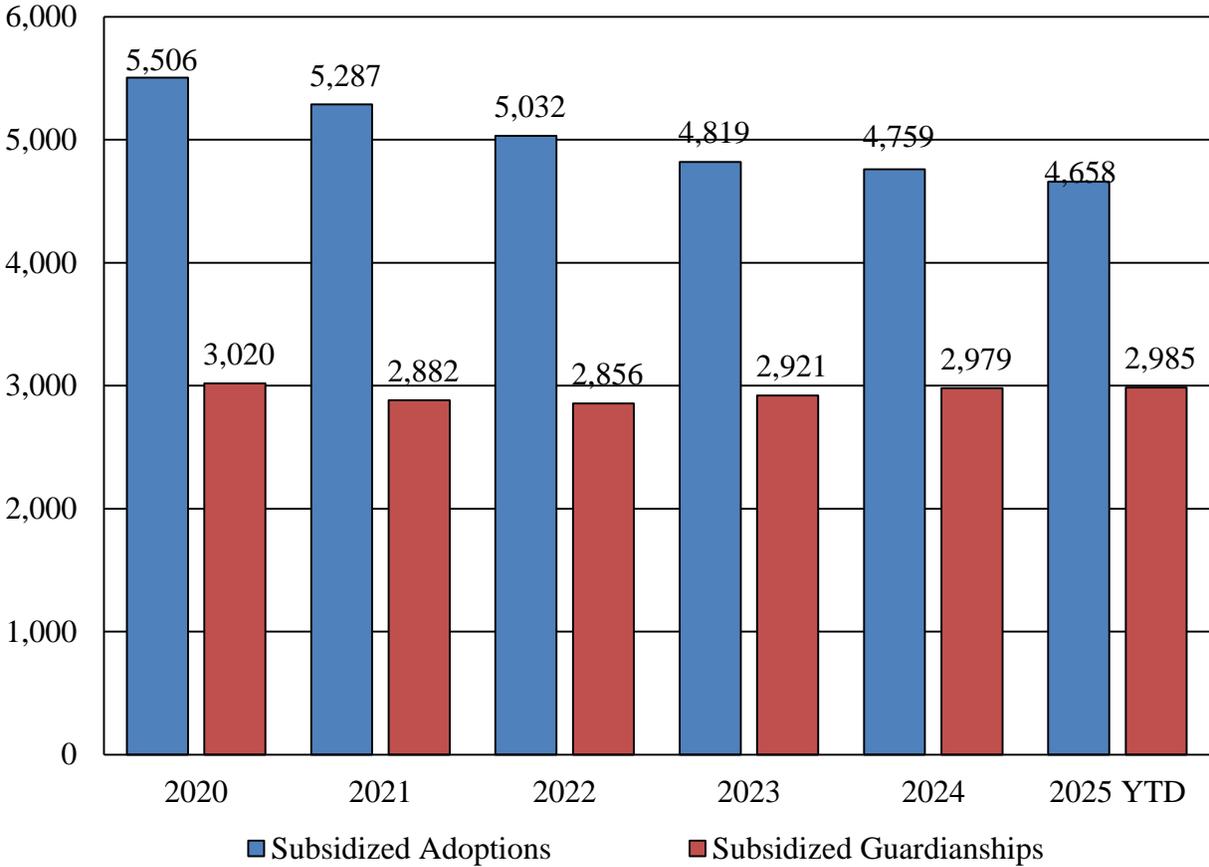
YTD: year to date

Source: Department of Human Services; Department of Legislative Services

Fiscal 2025 data (through December 2024) shows that the number of youths in out-of-home placements paid for by DHS have increased slightly by 0.3% for the first time since fiscal 2016. Notably, regular foster care caseloads have increased by 7.9% through the first half of the fiscal year compared with fiscal 2024. However, purchased institution placements have decreased by 2.2% and purchased homes by 5.4% through the first half of the fiscal year.

The average monthly number of subsidized adoptions has declined each year since at least fiscal 2016. As shown in **Exhibit 9**, the average monthly number of subsidized adoptions decreased by 1.2% in fiscal 2024, compared to fiscal 2023 caseloads, and has decreased by an additional 2.1% during the first half of fiscal 2025. The average monthly number of subsidized guardianships increased by 2.0% in fiscal 2024, compared to fiscal 2023 caseloads. The average monthly number of subsidized guardianships has continued to increase in the first half of fiscal 2025 by 0.2%, compared with fiscal 2024.

**Exhibit 9**  
**Subsidized Adoptions and Guardianships**  
**Fiscal 2020-2025 YTD (December 2024)**



YTD: year to date

Source: Department of Human Services; Department of Legislative Services

**Exhibit 10** presents data on the average monthly caseloads for fiscal 2024 and 2025 (through December 2024) as well as DLS estimates for full-year fiscal 2025 caseloads and caseloads in fiscal 2026. DLS estimates that overall placements will decline slightly from fiscal 2025 and increase slightly in fiscal 2026 to a total of 10,118 cases. The allowance assumes the overall placements will increase slightly to a total of 10,164 in fiscal 2025 and remain at the same level in fiscal 2026.

**Exhibit 10**  
**Caseload Projections by Placement Type**  
 Average Monthly Caseloads  
 Fiscal 2024-2026 Estimate

	<u>2024</u> <u>Actual</u>	<u>2025</u> <u>Actual YTD</u>	<u>2025</u> <u>DLS Estimate</u>	<u>2026</u> <u>DLS Estimate</u>
Regular Foster Care	866	934	935	992
Purchased Home	859	813	816	804
Purchased Institution	547	535	542	545
Other Placements	152	150	165	174
Subsidized Adoptions	4,759	4,658	4,640	4,594
Subsidized Guardianships	2,979	2,985	2,994	3,009
<b>Total Combined</b>	<b>10,163</b>	<b>10,075</b>	<b>10,092</b>	<b>10,118</b>

DLS: Department of Legislative Services

YTD: year to date

Note: Fiscal 2025 year-to-date data is through December 2024.

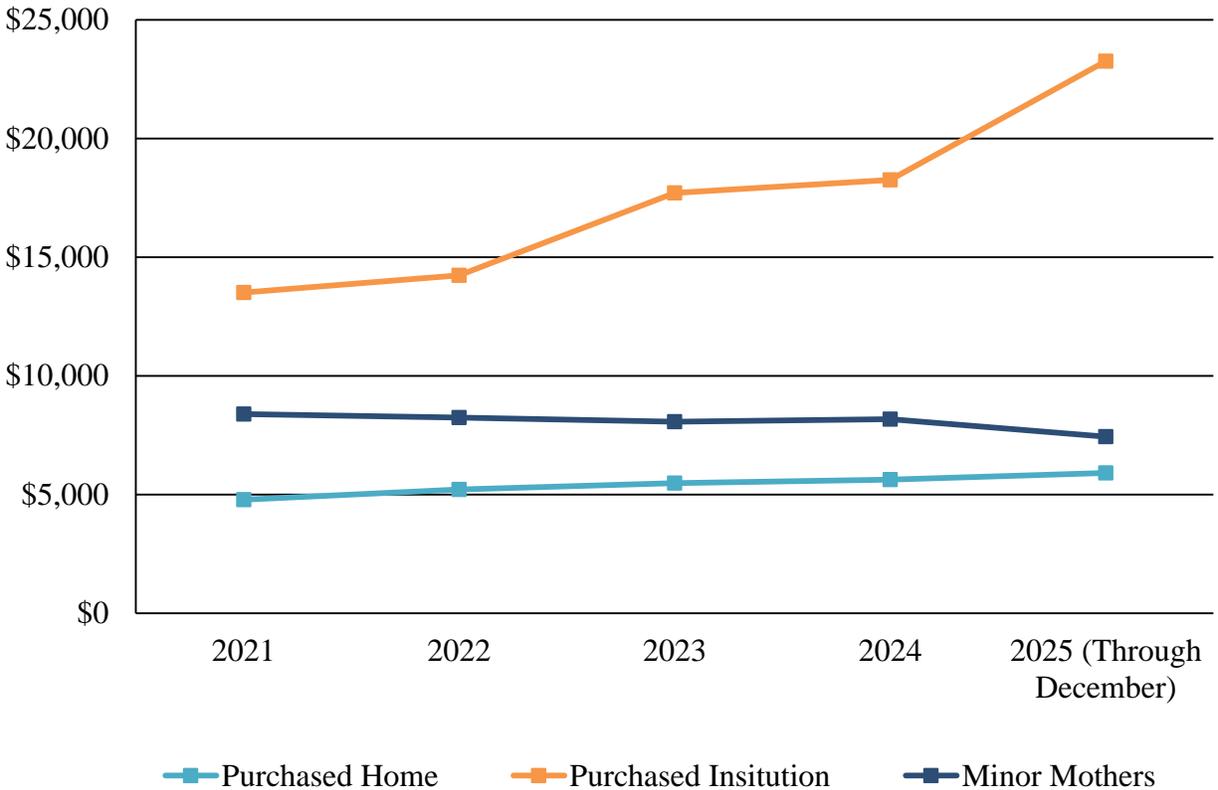
Source: Department of Legislative Services; Department of Human Services

DLS’ estimate mostly varies from the estimate in the budget in the areas of regular foster care, purchased homes, and subsidized adoptions. These differences can be in part attributed to the timing of data with DLS having additional months of fiscal 2025 data than was available during the development of the budget. The more recent data shows changes in trends in certain categories compared to the prior year and earlier in fiscal 2025.

**Placement Costs**

As shown in **Exhibit 11**, average monthly placement costs through December 2024 are highest among purchased institutions and purchased homes. Across all foster care placement types (excluding subsidized adoptions and guardianships), average monthly placement costs increased by 8.3% during fiscal 2024 and have increased by an additional 11.7% in fiscal 2025 (through December 2024). Average monthly placement costs for purchased institutions (the most expensive placement type) increased by 3.2% in fiscal 2024 and have increased by an additional 27.4% during the first half of fiscal 2025 as discussed earlier.

**Exhibit 11**  
**Average Monthly Placement Costs for Select Placement Types**  
**Fiscal 2021-2025 YTD**



YTD: year to date

Source: Department of Human Services; Department of Legislative Services

**Forecast**

As shown in **Exhibit 12**, DLS forecasts a shortfall of \$5.2 million in fiscal 2025, of which the general fund share is \$21.2 million. In fiscal 2026, DLS projects a deficit of about \$7.4 million, of which the general fund share is \$10.4 million. The forecasted shortfall in fiscal 2025 and 2026 is mostly driven by the increase in purchased institutions costs, as well as a different assumption of Title IV-E availability in fiscal 2025. The actual size of any surplus or shortfall will be impacted by the extent to which caseloads increase or decrease in fiscal 2026, the extent of changes in placement costs due to provider rate reform and provider rate increases, and the extent to which Title IV-E funds are available. The fiscal 2026 allowance assumes a 2% provider rate increase, while the DLS forecast assumes no increases in provider rates. The forecasted shortfall occurs

even without the assumption of a rate increase. The allowance also assumes the implementation of the second phase of the rate reform is delayed.

**Exhibit 12**  
**Foster Care Maintenance Payments Program Expenditure Forecast**  
**Fiscal 2024-2025**  
**(\$ in Millions)**

	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>% Change</u> <u>2025-2026</u>
<b>Budgeted Expenditures</b>				
General Funds	\$268.5	\$279.1	\$320.6	13.0%
Special Funds	2.2	2.7	3.5	23.1%
Federal Funds	81.2	106.7	71.5	-49.2%
<b>Total Funds</b>	<b>\$351.9</b>	<b>\$388.4</b>	<b>\$395.6</b>	<b>1.8%</b>
<b>Department of Legislative Services Forecasted Expenditures</b>				
General Funds	\$268.5	\$302.2	\$331.2	9.2%
Special Funds	2.2	2.3	2.3	0.0%
Federal Funds	81.2	91.1	69.7	-31.7%
<b>Total Funds</b>	<b>\$351.9</b>	<b>\$393.6</b>	<b>\$402.9</b>	<b>2.3%</b>
General Fund Surplus/Shortfall (Compared to Budget)		-\$21.2	-\$10.4	
Special Fund Surplus/Shortfall (Compared to Budget)		0.4	1.2	
Federal Fund Surplus/Shortfall (Compared to Budget)		15.6	1.8	
<b>Total Surplus/Shortfall (Compared to Budget)</b>		<b>-\$5.2</b>	<b>-\$7.4</b>	

Note: Fiscal 2024 expenditures reflect the actual reported expenditures, accounting for the deficiency appropriation related to fiscal 2024 expenditures in that year, and will, therefore, not match the information reported in the Governor’s Fiscal 2026 Budget Books. Fiscal 2025 budgeted expenditures account for the deficiency appropriation for fiscal 2025 expenses.

Source: Department of Budget and Management; Department of Legislative Services

**DLS finds that the nearly 20% increase in rates for institutional providers in fiscal 2025 under the new rate setting methodology is not affordable given the State’s budget outlook. DLS recommends a 5% reduction to the rates for fiscal 2026, which will save the State \$8.5 million (\$7.6 million in general funds). DHS may allocate the reduction among the rate classes as it deems appropriate. DLS also recommends a provision be added to the Budget Reconciliation and Financing Act of 2025 to prohibit IRC from providing rate increases for fiscal 2026.**

***Personnel Data***

	<b><u>FY 24 Actual</u></b>	<b><u>FY 25 Working</u></b>	<b><u>FY 26 Allowance</u></b>	<b><u>FY 25-26 Change</u></b>
Regular Positions	2,627.18	2,627.18	2,629.18	2.00
Contractual FTEs	<u>5.00</u>	<u>2.50</u>	<u>2.50</u>	<u>0.00</u>
<b>Total Personnel</b>	<b>2,632.18</b>	<b>2,629.68</b>	<b>2,631.68</b>	<b>2.00</b>

***Vacancy Data: Regular Positions***

Turnover and Necessary Vacancies, Excluding New Positions	158.01	6.01%
Positions and Percentage Vacant as of 12/31/24	219.54	8.36%
Vacancies Above Turnover	58.53	

- As of December 31, 2024, SSA had 219.54 vacant positions, or 8.4% of authorized positions, which is 58.53 positions more than required to meet the budgeted turnover expectancy. The largest number of vacant positions (173.51) is within the Child Welfare Services program, which is the largest share of positions authorized within SSA, and primarily includes social worker and other caseworker positions. Total vacant positions within SSA have decreased by 119.74 since December 31, 2023.
- The net increase of 2 positions in SSA reflects internal transfers within DHS.

## Issues

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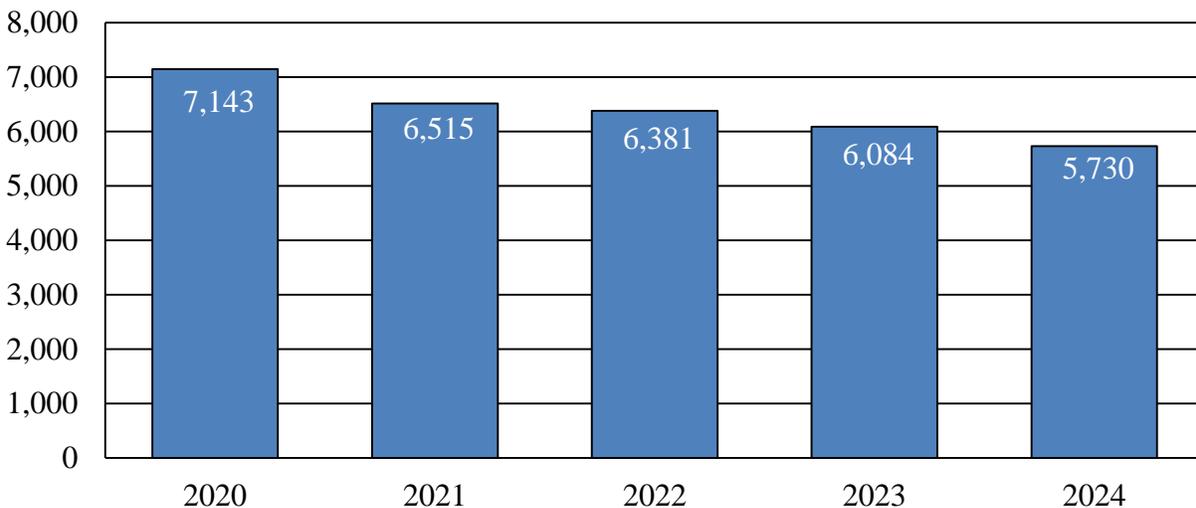
### 1. Out-of-home Placements Across All Agencies Continue to Decline

The Governor’s Office for Children (GOC), on behalf of the Maryland Children’s Cabinet and its member agencies, publishes the annual *State of Maryland Out-of-home Placement and Family Preservation Resource Plan*. This report contains annual data on out-of-home placements across child-placing agencies and an analysis of strategies of child-serving agencies to meet the needs of children experiencing out-of-home placement or at risk of placement.

As reported by GOC, there were a total of 5,730 children and youth in placement in fiscal 2024, and a total of 12,918 different placements were made across all child-serving agencies during the fiscal year. Approximately 90% of children and youth in placement during fiscal 2024 were placed through DHS; however, this data also reflects children and youth placed by, and in placements funded through DJS, the MDH Behavioral Health Administration, the Developmental Disabilities Administration (DDA), and the Maryland State Department of Education (MSDE). As shown in **Exhibit 13**, the number of children in out-of-home placements across all agencies declined by 19.8% between fiscal 2020 and 2024.

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**Exhibit 13**  
**Children and Youth in Out-of-home Placements**  
**Fiscal 2020-2024**



Note: Data for prior years has been revised to reflect counts of those years presented in the current submission of the report.

Source: Governor’s Office of Crime Prevention and Policy; Governor’s Office for Children

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## Out-of-home Placements by Placement Category

As shown in **Exhibit 14**, the majority of children and youth in placement across all agencies in fiscal 2024 experienced placements in family homes (4,469). Community-based placements, the second most common placement category among these children and youth, totaled 1,274 in fiscal 2024. These placements include independent living programs, group home placements, or other residential childcare programs. Across all placement types, the average age at entry was 9.2 years, and the average length of placement was 211.6 days.

### Exhibit 14 Out-of-home Placements by Category Fiscal 2024

	<u>Total Youth<sup>1</sup></u>	<u>Average Age at Entry</u>	<u>Average Days in Placement</u>
Family Home	4,469	7.2	242.6
Community-based Placement	1,274	13.5	248.3
Noncommunity based Placement <sup>2</sup>	726	14.7	177.6
Hospitalization	441	10.1	83.8
Residential IEP Placement	24	17.5	135.5
Other/Unknown	408	12.9	82.7

IEP: Individualized Education Program

<sup>1</sup>Data reflects individual placements in each category and does not sum to the total number of children and youth placed due to some children and youth experiencing multiple placements during the fiscal year.

<sup>2</sup>Includes placements in a residential treatment center, juvenile detention center, or other residential treatment programs.

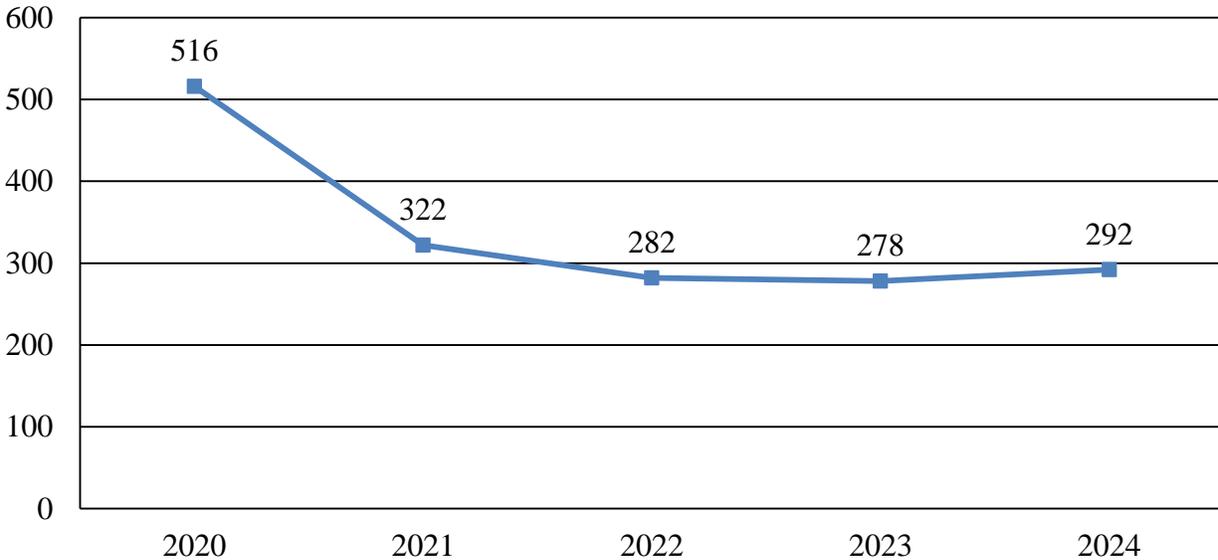
Source: Governor’s Office of Crime Prevention and Policy

## Out-of-state Placements

A total of 292 children and youth experienced an out-of-state placement during fiscal 2024, with the majority of these placements located in Washington, D.C. (56), Pennsylvania (45), Virginia (34), and Florida (28). The most common placement categories for out-of-state placements in fiscal 2024 were family homes (163 children and youth) and hospitalization (58 children and youth). As shown in **Exhibit 15**, the total number of children and youth in an

out-of-state placement increased by 5.0% in fiscal 2024, following a 46.1% decline between fiscal 2020 and 2023.

**Exhibit 15**  
**Out-of-State Placements**  
**Fiscal 2020-2024**



Source: Governor’s Office of Crime Prevention and Policy

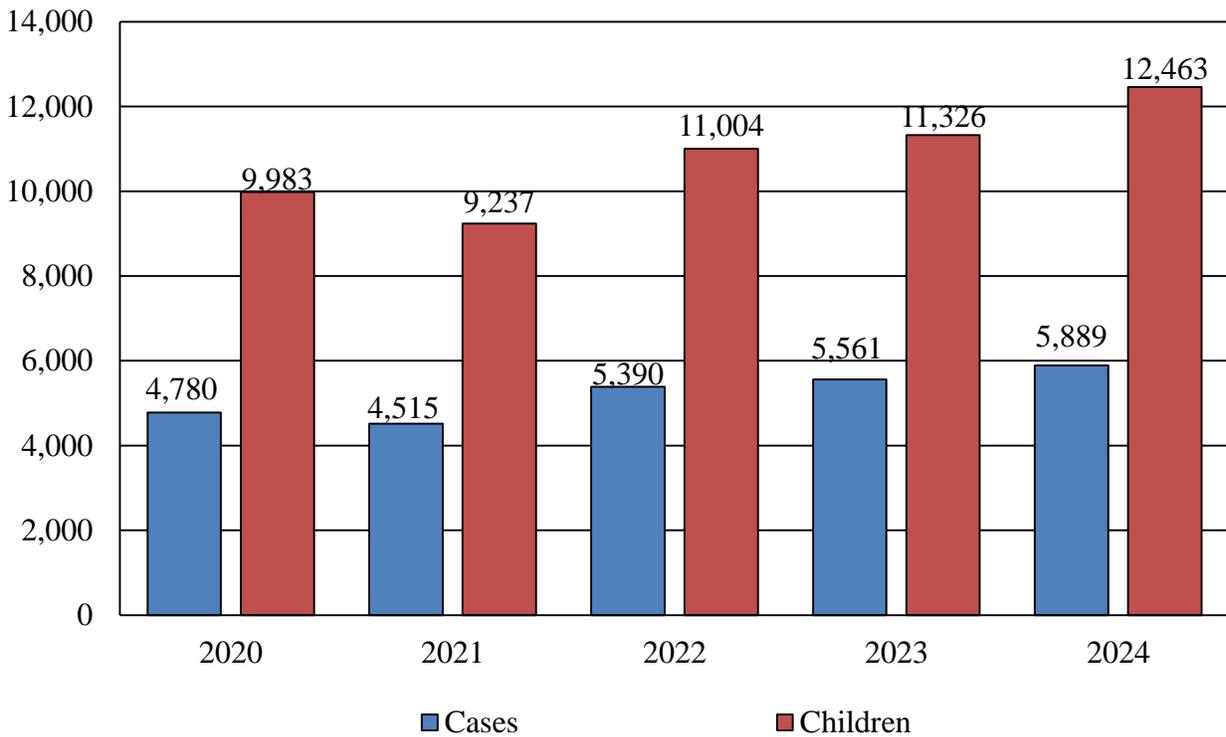
### **Out-of-home Placements through DHS**

In addition to data on out-of-home placements across State agencies reported by the Governor’s Office of Crime Prevention and Policy, DHS usually publishes monthly out-of-home placement data on its website for the children and youth in its care. The data includes information on child maltreatment for children and youth in out-of-home placements and the type of responses exercised, findings for completed investigations, children in out-of-home placements through DHS, and in-home family preservation services provided by DHS. The most recently posted data available is through December 2023. As of January 29, 2025, this data has not been updated. This data allows analysis of trends in out-of-home placements of children and youth in DHS’ care. **DLS recommends adopting committee narrative requesting reports containing monthly out-of-home placement data.**

## Family Preservation Services

DHS provides in-home family preservation services to children and families at risk of child maltreatment and/or out-of-home placement through each LDSS. These services seek to support families in caring for their children in order to reduce the risk of maltreatment and, subsequently, the need for out-of-home placements. As reported by GOC in its annual out-of-home placement report, between fiscal 2020 and 2024, there has been a 23.2% increase in the number of cases and a 24.8% increase in the number of children served. As shown in **Exhibit 16**, a total of 5,889 cases received in-home family preservation services during fiscal 2024, which included 12,463 children.

**Exhibit 16**  
**In-home Family Preservation Cases**  
**Fiscal 2020-2024**



Source: Governor’s Office of Crime Prevention and Policy

The outcomes for the effectiveness of in-home family preservation services are measured through the percentage of children who have experienced an indicated finding of child maltreatment through a child protective services investigation or otherwise required an out-of-home placement either during or within one year of receiving family preservation services. As shown in **Exhibit 17**, 260 children, or 2.0%, of children served through in-home family

preservation services during fiscal 2024 experienced an indicated finding for child maltreatment from a child protective services investigation during the time of family preservation services. However, 571 children, or 2.0%, of children served through in-home family preservation services during fiscal 2023 experienced an indicated finding of child maltreatment from a child protective services investigation within one year following the closure of the family preservation case, which is a decrease of 2 percentage points compared with fiscal 2022.

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**Exhibit 17**  
**Indicated Child Protective Services Findings**  
**Fiscal 2019-2024**

	During Services		Within One Year of Case Close	
	<u>Children</u>	<u>Percentage</u>	<u>Children</u>	<u>Percentage</u>
2019	319	2.3%	913	6.4%
2020	236	2.0%	350	4.0%
2021	254	3.0%	342	4.0%
2022	272	3.0%	464	4.0%
2023	248	2.0%	571	2.0%
2024	260	2.0%	n/a	n/a

n/a: not available

Source: Governor’s Office of Crime Prevention and Policy

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As shown in **Exhibit 18**, 325 children, or 3.0%, of children served through in-home family preservation services during fiscal 2024 required an out-of-home placement during the time of family preservation services. The percentage of children requiring an out-of-home placement within one year of closure of a family preservation case in 2023 was 160 or 1.0%.

**Exhibit 18**  
**Children Requiring Out-of-home Placements**  
**Fiscal 2019-2024**

	<b>During Services</b>		<b>Within One Year of Case Close</b>	
	<b><u>Children</u></b>	<b><u>Percentage</u></b>	<b><u>Children</u></b>	<b><u>Percentage</u></b>
2019	395	3.6%	151	1.4%
2020	378	4.0%	135	1.0%
2021	380	4.0%	120	1.0%
2022	494	5.0%	177	2.0%
2023	383	3.0%	160	1.0%
2024	325	3.0%	n/a	n/a

n/a: not available

Source: Governor’s Office of Crime Prevention and Policy

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## **2. FFPSA Evidence-based Practices**

The FFPSA was included in the Bipartisan Budget Act of 2018 and signed into law in February 2018. Among other provisions, the FFPSA altered the allowable uses of Title IV-E funding by expanding the eligibility of states to receive reimbursement for prevention services in addition to the traditional use of such funds for administration and the placement costs for eligible youth in out-of-home placements, subsidized adoptions, and subsidized guardianships.

By placing an emphasis on prevention services, the FFPSA seeks to prevent children at risk of entering foster care from entering into care by providing services to their families so that children are able to safely remain in their homes. In addition to reducing the overall rate of removal into foster care, these services also target a reduction of incidents of maltreatment experienced by children statewide. Prevention services may include substance abuse prevention and treatment services, parent skill-based programs, and mental health prevention and treatment services. Services eligible for federal reimbursement must be rated by the Title IV-E Prevention Services Clearinghouse as either well supported, supported, or promising.

Prior to the enactment of the FFPSA, DHS had operated under a Title IV-E waiver from July 1, 2015, through September 30, 2019. This waiver allowed DHS to use federal Title IV-E funds for prevention services and for children that would not otherwise have been eligible for reimbursement. To receive federal reimbursement for prevention services under the FFPSA, the services must be trauma informed and evidence based, and a state must have an approved

Title IV-E Prevention Services Plan. DHS indicated that it planned to update and resubmit the five-year Title IV-E Prevention Plan in December 2024. The updated plan would include three additional evidence-based practices including Motivational Interviewing, Sobriety Treatment and Recovery Teams, and Family Centered Treatment. **DHS should comment if the updated five-year Title IV-E Prevention Plan has been submitted.**

DHS indicated that it intends to develop a community pathway approach that would allow families to access Title IV-E funded prevention services through Family First outside of the traditional child welfare service delivery and case management context.

Committee narrative in the 2024 *Joint Chairman’s Report* (JCR) requested that DHS provide an update on the evidence-based practices being implemented by jurisdiction, the number of families served, and how the outcomes of these programs are evaluated. The four evidence-based practices currently implemented by at least one jurisdiction include Healthy Families America, Parent-child Interaction Therapy (PCIT), Functional Family Therapy (FFT), and Multisystemic Therapy (MST). During fiscal 2024, DHS reported that 19 jurisdictions had implemented at least one of these practices, and a total of 530 families were served. **Appendix 1** provides information on the implementing jurisdictions by evidenced-based practices and the number of families served through each evidenced-based practice in fiscal 2024.

### **Spending on Evidence-based Practices**

The fiscal 2026 allowance for SSA includes a total of \$8.6 million budgeted for evidence-based practices through LDSS and funding for administrative and technical assistance for these programs, a similar level of funding compared to the fiscal 2025 working appropriation. Of this total, \$3.6 million is budgeted through general funds, and \$4.9 million is budgeted through federal funds, the same fund split as in the fiscal 2025 working appropriation.

DHS submitted a revised public assistance Cost Allocation Plan (CAP) in December 2020 to allow DHS as necessary, to claim reimbursement for prevention services retroactively from October 2019. Although as of January 2025, the revised CAP has not received final federal approval, DHS has submitted claims based on the proposed plan amendment, which is permitted, and those claims have been paid. **DHS should comment on the status of the approval of the revised CAP and the cause of the delays in approval.**

## **Evaluation of Outcomes for Participating Families**

DHS, in partnership with the University of Maryland School of Social Work Institute for Innovations and Implementation, evaluates the effectiveness of evidence-based practices through the review of data extracted from Child, Juvenile, and Adult Management System. In fiscal 2024, 341 families received referrals for the evidence-based practices included in Maryland’s Title IV-E prevention plan. DHS reports that families participating in evidence-based practices were less likely to have subsequent adverse outcomes at time of discharge.

Using data from fiscal 2024, DHS reviewed positive outcomes in areas including family and child well-being, parenting skills, educational attainment, and delinquency education. DHS found that the vast majority of families participating in either FFT or MST had improvements in several of these areas for both adults and children. For PCIT, participant outcomes are measured using an inventory related to the intensity and perceived problem levels of a child’s behavior. DHS reports that PCIT completion rates among families has been notably low with only 35% of the families successfully completing the program. However, pre- and post-program participation assessment data shows positive improvements in child behavior for families who participated in only a portion of the program. Only 1 of the 17 families referred to PCIT required a subsequent out-of-home placement during this time period.

## **Center for Excellence in Foster Family Development**

In addition to its implementation of evidence-based prevention practices, DHS was awarded a four-year federal grant from fiscal 2020 through 2023, by the Administration of Children, Youth, and Families to develop the Center for Excellence (CfE) in Foster Family Development. The CfE grant term officially ended in September 2023. CfE aimed to implement a model program for the selection, development, and support of resource foster families who will work in close collaboration with birth families to preserve and nurture critical parent-child relationships and safely support reunifying birth families with their children to prevent unnecessary out-of-home placements in congregate care settings.

DHS contracted with the University of Maryland School of Social Work Institute for Innovations and Implementation for implementation of CfE, which included two evidence-based practices for parents implemented through CfE:

- Parenting Through Change-Reunification (PTC-R), a program to provide support and training to families of origin; and
- Keeping Resource Parents Supported and Trained (KEEP/KEEP SAFE), a program to provide support and training to resource parents.

Both programs targeted enhanced placement stability and child well-being through 16-week peer support groups and training. PTC-R participants joined a peer support group aligned with the KEEP program, promoting coparenting and facilitating a smooth transition during the

reunification process. Resource parents participating in the KEEP and KEEP SAFE programs were enrolled into cohorts and attended mandatory parent partnership training modules before, during, and after participating in the program with a CfE-eligible child.

DHS reports that the CfE evaluation revealed positive outcomes. Fully trained CfE resource homes demonstrated higher placement stability, specifically CfE resource homes where the caregivers either completed the KEEP/KEEP SAFE training or fulfilled all CfE training requirements. It was also noticed that the behavioral concerns and stress experienced by resource families in CfE program was decreased. Pre- and post-program survey of resource family also showed decreased levels of overall stress. **Appendix 2** provides information on the placement experiences for CfE children from October 2019 through September 2023.

## **QRTPs**

The FFPSA also included provisions amending the eligibility for federal Title IV-E reimbursements for certain nonfamily placements to promote the placement of children in the least restrictive, ideally family-based setting appropriate to their individual needs. In order to be eligible for federal reimbursement under the FFPSA, nonfamily placements in childcare institutions are limited to two weeks unless the program is designated as a QRTP or is designated as one of the following programs:

- a placement for pregnant or parenting youth;
- a supervised independent living program for youth aged 18 and older;
- a specialized placement for children who are at risk of being or are victims of sex trafficking; or
- a family-based residential treatment facility for substance abuse disorders.

DHS received approval for its Title IV-E State Plan amendment, which includes provisions related to reimbursements for placements in nonfamily settings in May 2021, and as a result, DHS has been able to claim federal reimbursements for QRTP since April 2021. In late calendar 2021, DHS worked with DJS on the development of an application process for the designation of placement providers as QRTP and, together with DJS, MDH DDA, and MSDE, formed a QRTP implementation workgroup to ensure that implementation is consistent across State agencies. Requirements for QRTP designation include that providers must:

- be licensed or certified in accordance with Title IV-E requirements and accredited by an independent not-for-profit organization;
- have a registered or licensed nursing staff and other clinical staff available 24 hours a day, seven days a week;

- have a trauma-informed treatment model;
- facilitate outreach and include the participation of family members; and
- provide discharge planning and family-based aftercare for six months.

During fiscal 2024, DHS moved away from having a designated timeframe for providers to submit applications for QRTP designation. Providers can now submit applications on a rolling basis. No new providers received a QRTP designation during fiscal 2024.

The six currently designated QRTP providers as of January 2025 are:

- Arrow Child and Family Ministries;
- National Center for Children and Families;
- Board of Child Care (all Residential Child Care Programs);
- Cedar Ridge Children’s Home and School;
- Associated Catholic Charities; and
- Vision Quest.

Although the FFPSA does not prevent placements with providers that do not qualify as a QRTP, federal reimbursement for these placements is unavailable after two weeks. Therefore, a lack of designated QRTP providers in the State limits the extent to which federal reimbursement can be sought for these placements. This impact on federal fund availability may be significant as placement costs for nonfamily-based placement types have increased substantially in recent fiscal years. **DHS should comment on planned future efforts by the QRTP designation workgroup to solicit applications for additional QRTP providers. DHS had previously reported that they were working on establishing appropriate processes to claim for federal Title IV-E reimbursement for funding of nonfamily-based placements; DHS should comment on the status of the processes.**

### **3. Child Welfare Caseloads and Staffing Report**

Child welfare caseload ratios have been a concern to the General Assembly for many years. In 1998, the General Assembly passed the Child Welfare Workforce Initiative requiring that DHS and the Department of Budget and Management (DBM) ensure that CWLA recommended caseload-to-staffing ratios are met. The Child Welfare Accountability Act of 2005 reiterated this requirement. In recent years, committee narrative has annually requested that DHS report on

caseloads and caseload ratios needed to meet the standards set by CWLA based on the type of case or work being undertaken. This information is then used to determine if jurisdictions are meeting CWLA standards, both departmentwide and at the individual LDSS level.

CWLA recommended caseload-to-staffing ratios are a series of ratios based on the type of case or work being undertaken. For example, intake has a ratio of 1 worker per 122 cases, while investigations, out-of-home placements foster care, and out-of-home kinship care have a ratio of 1 worker per 12 cases. Therefore, the total number of caseworkers needed by jurisdiction and year to year will vary based on the mix of cases as well as the number of cases. DLS has historically focused on the cumulative number of caseworkers needed to meet the ratios compared to filled positions both departmentwide and in individual jurisdictions. By looking at the cumulative level, it is possible to determine whether the department (jurisdiction) has enough filled positions (or total available positions) to meet the standards. The actual meeting of individual caseload ratios by type and if there are enough filled positions is a management function in the department and/or LDSS.

### **Positions Needed to Meet Standards Decrease, Filled Positions Increase**

As discussed previously, overall entries into care and foster care caseloads have declined each year in recent fiscal years and, since fiscal 2021, have been noticeably lower compared to caseloads prior to the onset of the COVID-19 pandemic. As a result of overall workload declines, SSA has maintained overall statewide CWLA standards even in years when the number of filled positions decreased.

As shown in **Exhibit 19**, SSA had 316.0 more caseworker positions and 18.9 more supervisor positions than necessary to meet CWLA standards based on September 1, 2024, personnel data. The total number of filled caseworker positions (1,201.5) increased by 100.7 filled positions since the previous year and, at the same time, the number of filled caseworker positions needed to meet CWLA standards (885.5) decreased by 56.4 positions. September 2024 data is the first time that filled caseworker positions needed to meet CWLA standards have decreased since 2021. As a result, the statewide surplus in caseworker positions as of September 1, 2024, has increased by 157.1 positions since the previous year.

Two jurisdictions failed to meet CWLA caseworker standard, and seven jurisdictions failed to meet the CWLA supervisor standard. In comparison, in the previous year, two jurisdictions failed to meet the caseworker standard, and nine jurisdictions failed to meet the supervisor standard. Only one of the jurisdictions that failed to meet the caseworker standard had sufficient vacant positions to meet the standard if filled. Similarly, only three of the jurisdictions that failed to meet the supervisor standard had sufficient vacant supervisor positions to meet the standard if filled.

In response to the committee narrative, DHS also notes that in an effort to fill vacant positions and retain staff, the department has taken steps including increased participation in job fairs, leveraged social media, and worked with DBM to increase base pay for staff in hard to recruit job classifications.

**Exhibit 19**  
**Child Welfare Position Status by Local Department**  
**September 2023 to August 2024 Caseload Data and September 1, 2024 Position Status**

	<b>Filled Worker Positions Needed to Meet CWLA</b>	<b>Filled Worker Positions</b>	<b>Surplus/ Shortfall</b>	<b>Vacant Caseworker Positions</b>	<b>Filled Supervisor Positions Needed to Meet CWLA</b>	<b>Filled Supervisor Positions</b>	<b>Surplus/ Shortfall</b>	<b>Vacant Supervisors</b>
Allegany	19.4	39.0	19.6	0.0	3.9	3.0	-0.9	0.0
Anne Arundel	55.5	82.5	27.0	7.0	11.1	17.0	5.9	1.0
Baltimore Baltimore City	124.2	123.0	-1.2	12.0	24.8	24.0	-0.8	1.0
Calvert	257.9	388.5	130.6	34.0	51.6	70.0	18.4	11.0
Caroline	12.4	18.5	6.1	2.0	2.5	4.0	1.5	0.0
Carroll	7.2	20.0	12.8	0.0	1.4	5.0	3.6	0.0
Cecil	18.9	25.0	6.1	0.0	3.8	6.0	2.2	0.0
Charles	26.5	30.0	3.5	12.0	5.3	7.0	1.7	1.0
Dorchester	15.2	28.5	13.3	2.5	3.0	6.0	3.0	1.0
Frederick	8.4	17.0	8.6	1.0	1.7	4.0	2.3	0.0
Garrett	26.3	39.5	13.2	2.0	5.3	9.0	3.7	0.0
Harford	13.2	14.0	0.8	1.0	2.6	2.0	-0.6	1.0
Howard	43.3	60.0	16.7	2.0	8.7	11.0	2.3	0.0
Kent	30.9	31.5	0.6	4.0	6.2	4.0	-2.2	1.0
Prince George's	6.0	6.0	0.0	1.0	1.2	3.0	1.8	0.0
Queen Anne's	94.4	109.0	14.6	18.0	18.9	22.0	3.1	1.0
Somerset	18.1	11.0	-7.1	1.0	3.6	3.0	-0.6	0.0
St. Mary's	9.5	12.5	3.0	3.0	1.9	3.0	1.1	0.0
	16.8	17.0	0.2	8.8	3.4	3.0	-0.4	1.0

	<b>Filled Worker Positions Needed to <u>Meet CWLA</u></b>	<b>Filled Worker <u>Positions</u></b>	<b>Surplus/ <u>Shortfall</u></b>	<b>Vacant Caseworker <u>Positions</u></b>	<b>Filled Supervisor Positions Needed to Meet CWLA</b>	<b>Filled Supervisor <u>Positions</u></b>	<b>Surplus/ <u>Shortfall</u></b>	<b>Vacant <u>Supervisors</u></b>
Talbot	6.5	13.0	6.5	2.0	1.3	4.0	2.7	0.0
Washington	44.7	59.0	14.3	3.0	8.9	8.0	-0.9	0.0
Wicomico	15.9	36.0	20.1	2.0	3.2	4.0	0.8	1.0
Worcester	14.1	21.0	6.9	0.0	2.8	4.0	1.2	0.0
<b>Statewide</b>	<b>885.5</b>	<b>1,201.5</b>	<b>316.0</b>	<b>118.3</b>	<b>177.1</b>	<b>226.0</b>	<b>48.9</b>	<b>20.0</b>

CWLA: Child Welfare League of America

Note: Montgomery County is excluded from the data because positions are not part of the State Personnel System.

Source: Department of Human Services; Department of Legislative Services; Statewide Personnel System

CWLA has recognized that maintaining adequate caseload ratios alone is an insufficient measure of child welfare staffing, and workloads associated with cases should also be considered. CWLA has begun work on revising its caseload and workload standards accordingly to shift the emphasis from caseloads (the number of cases a worker should be responsible for) to workload (the amount, complexity, and intensity of work being assigned). DHS reports to be in the process of developing a child welfare workload assessment procurement. **DHS should comment on the estimated completion timeline of the child welfare workload assessment.**

**DLS determined that the information provided complies with the language restricting the general funds, and DLS therefore recommends the release of \$250,000 in withheld general funds and will process a letter to this effect if no objections are raised during the budget hearings. DLS also recommends adding language restricting funds in fiscal 2026 pending submission of the report with data as of September 1, 2025.**

#### **4. Hospital Overstays for Children and Youth in Out-of-home Care**

Issues related to the length of hospital stays and stays in emergency rooms by children and youth in State custody have been an ongoing concern for the General Assembly for the past several years. Of particular concern are youth who experience lengthy overstays in emergency rooms, psychiatric hospitals, or psychiatric units of general and medical hospitals that extend beyond what is deemed medically necessary while the youth is awaiting placement with an appropriate provider. These overstays generally occur due to difficulties in securing placements for children with complex behavioral or physical health needs due to a lack of providers meeting the needs of these children and limited capacity for providers that do.

In order to track the extent of the hospital overstay issue, in recent years, DHS has been requested to and submitted data on youth in out-of-home placements served in hospitals. Committee narrative in the 2024 JCR requested that DHS provide updated data on the number of youth served in emergency rooms for psychiatric evaluation or crisis and the average length of stay (ALOS) by month, the number of youth in out-of-home placement served separately by medical hospitals and inpatient psychiatric hospitals and ALOS for these hospital stays, the length of stay beyond medical necessity for both hospital types, and data on placements after discharge from inpatient hospital, including identifying the number of youths placed out-of-state after discharge for fiscal 2024. As of January 29, 2025, DHS has not submitted this report. **DLS recommends adding language in the fiscal 2025 withholding funds until a report containing this data through September 2025 is submitted.**

#### **5. Child Fatalities Involving Child Abuse and Neglect**

DHS has previously provided a listing by jurisdiction of the number of child fatalities that involved child abuse and/or neglect. **Exhibit 20** displays data provided by the department for calendar 2017 through 2021. In calendar 2021, there were 54 such deaths, an increase of 1 over calendar 2020. Calendar 2021 was the fifth consecutive year that these fatalities increased. In

calendar 2021, the highest number of these fatalities occurred in Baltimore City (15). During the calendar 2017 to 2021 period, Baltimore City (64), Baltimore County (38), and Prince George’s County (30) had the highest number of fatalities. Of the calendar 2021 fatalities, the majority (31, or 57%) were of children aged one or younger. Fatalities related to child neglect overall represented 72% of fatalities, with an additional 24% of fatalities involving both neglect and abuse. DHS reports that there were 20 such deaths in calendar 2022 and 29 such deaths in calendar 2023. As of December 11, 2024, there were 20 child fatalities that involved child abuse and/or neglect in calendar 2024. DHS was unable to provide jurisdiction level data as provided in the past. **DLS recommends adopting committee narrative requesting DHS provide child fatalities data by jurisdiction.**

**Exhibit 20**  
**Child Fatalities Reported to DHS Where Abuse or Neglect Are Determined by**  
**Department of Human Services Staff to be a Contributing Factor**  
**Calendar 2017-2021**

	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>Total</u> <u>2017-2021</u>
Allegany	1	2	2	3	0	8
Anne Arundel	3	2	5	3	6	19
Baltimore City	5	12	11	21	15	64
Baltimore	9	7	7	6	9	38
Calvert	3	2	1	1	0	7
Caroline	0	0	0	0	1	1
Carroll	1	0	1	1	1	4
Cecil	1	1	0	1	4	7
Charles	0	1	1	1	0	3
Dorchester	0	0	1	1	1	3
Frederick	2	2	0	2	0	6
Garrett	0	0	0	0	0	0
Harford	0	2	2	1	2	7
Howard	0	1	1	0	1	3
Kent	0	0	0	0	0	0
Montgomery	2	3	3	2	1	11
Prince George’s	10	6	5	6	3	30
Queen Anne’s	0	0	0	0	0	0
St. Mary’s	0	0	1	0	3	4
Somerset	1	0	0	0	1	2
Talbot	0	1	0	1	0	2
Washington	3	1	2	2	6	14
Wicomico	0	0	0	1	0	1
Worcester	0	0	1	0	0	1
<b>Total</b>	<b>41</b>	<b>43</b>	<b>44</b>	<b>53</b>	<b>54</b>	<b>235</b>

Source: Department of Human Services

## Operating Budget Recommended Actions

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1. Add the following language to the general fund appropriation:

Further provided that \$250,000 of this appropriation made for the purpose of administrative expenses may not be expended until the Department of Human Services (DHS) submits a report to the budget committees on the number of child welfare services cases and positions required based on the caseload to meet the Child Welfare League of America (CWLA) caseload standards, by jurisdiction, for the following caseload types, as of September 1, 2025:

- (1) intake screening;
- (2) child protective investigation;
- (3) consolidated in-home services;
- (4) interagency family preservation services;
- (5) services to families with children – intake;
- (6) foster care;
- (7) kinship care;
- (8) family foster care;
- (9) family foster homes – recruitment and new applications;
- (10) family foster homes – ongoing and licensing;
- (11) adoption;
- (12) interstate compact for the placement of children; and
- (13) caseworker supervision.

The report shall also include a discussion of specific actions taken by the department and local departments of social services to reallocate positions, including the number of positions reallocated by type (caseworker or supervisor) between jurisdictions and identifying the jurisdictions that these positions were transferred from and to, in order to ensure that all jurisdictions can meet the standards for both caseworkers and supervisors.

The report shall also include an update on the status of work done by CWLA to develop new workload standards for child welfare staffing, the completion by DHS of its child welfare workforce analysis, and broader efforts by DHS to improve recruitment and retention of caseworkers.

The report shall be submitted by November 1, 2025, and the budget committees shall have 45 days to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted.

**Explanation:** The General Assembly believes that maintaining an adequate child welfare workforce is essential to improving outcomes for children entering State care. In order to maintain oversight over this issue, this language withholds funding until a report with data related to the CWLA caseload standards is submitted, which contains current data as of September 1, 2025.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on caseload data and filled positions assigned by jurisdiction for specified caseload types	DHS	November 1, 2025

2. Add the following language to the general fund appropriation:

Further provided that \$250,000 of this appropriation made for the purpose of administrative expenses may not be expended until the Department of Human Services (DHS) submits a report to the budget committees that provides data on hospital stays by children and youth in out-of-home placements for each month of the period October 2023 through September 2025. The report should include:

- (1) the number of youth in out-of-home placement served in emergency rooms for psychiatric evaluation or crisis and the average length of stay (ALOS) by month;
- (2) the number of youth in out-of-home placement served separately by medical hospitals and inpatient psychiatric hospitals and ALOS by month;
- (3) the number of days that youth in out-of-home placements served in hospitals were in the hospital longer than was deemed medically necessary by either the hospital or a judicial finding separately by type of hospital; and
- (4) the placement type after discharge separately by type of hospital, including identifying the number of youths placed out-of-state after discharge for fiscal 2024 and fiscal 2025.

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The report shall be submitted by November 1, 2025, and the budget committees shall have 45 days to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted.

**Explanation:** The General Assembly continues to be interested in monitoring data about children and youth experiencing stays in emergency rooms or inpatient hospital settings longer than is medically necessary. In order to maintain oversight over this issue, the budget committees have adopted annual narrative in recent years requesting that DHS provide a report on hospital stays by children and youth in out-of-home placements. This language withholds funding until a report with data related to hospital stays is submitted, which contains current data as of September 1, 2025.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on hospital stays, ALOS, and placement after discharge	DHS	November 1, 2025

3. Add the following language to the general fund appropriation:

, provided that \$250,000 of the general fund appropriation made for the purposes of administrative expenses may not be expended until the Department of Human Services submits a report that provides data for each month of the period October 2024 through September 2025 to the budget committees by November 1, 2025, on the number of unique and total youths in out-of-home placement placed in hotels by jurisdiction, the average length of stay by month, as well as summary information on the youth placed in hotel by age category.

The report shall be submitted by November 1, 2025, and the budget committees shall have 45 days to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted.

**Explanation:** The General Assembly is interested in understanding more about the number of children and youth experiencing stays in hotels. In order to maintain oversight over this issue, this language withholds funding until a report with data related to hotel stays is submitted, which contains current data as of September 1, 2025.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on hotel stays and average length of stay	Department of Human Services	November 1, 2025

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4. Add the following language to the general fund appropriation:

Further provided that \$100,000 of this appropriation made for the purpose of administrative expenses may not be expended until the Department of Human Services submits data for fiscal 2024 and 2025 including:

- (1) the percentage of children with no recurrence of maltreatment within 12 months of a first occurrence;
- (2) the rate of victimization per 100,000 days of foster care during a 12-month period;
- (3) rate of placement moves per 1,000 days of foster care;
- (4) exit to permanency within 12 months of entry into care;
- (5) the number of reports of adult abuse;
- (6) number of indicated or confirmed cases of adult abuse;
- (7) rate of removal into foster care;
- (8) rates of reentry into foster care for children within 12 months following exiting care to reunify with the child’s family of origin; and
- (9) rates of reentry into foster care for children within 12 months following exiting care to guardianship.

The fiscal 2024 data shall be submitted by July 1, 2025, and fiscal 2025 data shall be submitted with the Managing for Results submission during the fiscal 2027 budget process. The budget committees shall have 45 days to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted.

**Explanation:** The General Assembly is interested in receiving updates on the performance analysis measures of the Department of Human Services (DHS). This language withholds funding until Managing for Results (MFR) data are submitted for fiscal 2024 and fiscal 2025.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
MFR data for fiscal 2024 and fiscal 2025	DHS	July 1, 2025, submission with MFR data

5. Adopt the following narrative:

**Implementation of Provisions of the Family First Prevention Services Act (FFPSA):**

The committees are interested in continuing to receive updates on the implementation of evidence-based prevention practices and other services under provisions of the federal FFPSA and the outcomes of those programs and services for families and children served. The committees request that the Department of Human Services (DHS) submit a report including:

- a list of all evidence-based practices being implemented through fiscal 2025, including data on jurisdiction and the number of families and children served during the fiscal year;
- any new evidence-based practices being implemented during fiscal 2026;
- the status of the updated five-year Title IV-E prevention services plan;
- data on the effectiveness of implemented evidence-based practices at preventing occurrences of subsequent maltreatment and out-of-home placements from occurring as well as an evaluation of any other outcomes related to parent and child well-being;
- the current number of providers in the State that have received designation as a Qualified Residential Treatment Program (QRTP) to allow for federal reimbursement under the FFPSA, including if any additional providers received this designation during fiscal 2025 and if future solicitations of applications for QRTP designation are planned; and
- the status of the approval of the State’s revised cost allocation plan, including a discussion of the current ability of DHS to seek federal reimbursement for evidence-based prevention practices

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Update on the implementation of provisions of the federal FFPSA	DHS	November 1, 2025

6. Adopt the following narrative:

**Child Fatalities Where Abuse or Neglect Are Determined to Be a Contributing Factor:**

The committees are interested in receiving updates on the number of child fatalities that involved child abuse and/or neglect. The committees request that the

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Department of Human Services (DHS) submit a report that provides data for calendar 2023, 2024 and 2025 separately by age category and jurisdiction.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on child fatalities	DHS	January 10, 2026

7. Add the following language to the general fund appropriation:

Further provided that these funds are to be used only for the purposes herein appropriated, and there shall be no budgetary transfer to any other program or purpose. Funds not expended shall revert to the General Fund.

**Explanation:** This annual language restricts general funds appropriated for foster care maintenance payments to that use only. This restriction prevents a transfer of general funds to other programs that might create or increase a deficit in spending in the Foster Care Maintenance Payments program (N00G00.01).

	<b><u>Amount Change</u></b>	
8. Reduce general and federal funds within Foster Care Maintenance Payments program. This reduction is associated with 5% rate reduction for institutional providers. The Department of Human Services may allocate the reduction among the rate classes as it deems appropriate.	-\$ 7,648,718	GF
	-\$ 849,857	FF

9. Adopt the following narrative:

**Monthly Data on Out-of-home Placement of Children and Youth:** The committees are interested in receiving updates on Child Welfare Services data. The committees request that the Department of Human Services (DHS) submit monthly reports that provide data for each month of fiscal 2025 separately by jurisdiction on:

- child maltreatment for children and youth in out-of-home placements and type of response exercised (investigative and alternative);
- findings for completed investigations;
- children in out-of-home placements through DHS; and
- in-home family preservation services provided by DHS.

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In addition to the report submission, data should be provided in an electronic format subject to concurrence of the Department of Legislative Services.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on out-of-home placement of children and youth	DHS	September 1, 2025, and each month thereafter through June 1, 2026

10. Adopt the following narrative:

**Implementation of the Foster Care Provider Rate Reform:** The committees are interested in receiving an update on steps taken to implement the second phase of the new foster care provider rate reform. The committees request that the Department of Human Services (DHS) submit a report discussing the status of the second phase of the rate reform including steps taken in fiscal 2025 and year to date in fiscal 2026, as well as planned steps in fiscal 2027. DHS is also requested to provide information on the revised rates to be implemented as well as a comparison with costs under the current rate structure for those impacted by the second phase of rate reform. Additionally, the committees request DHS provide data on the number of children served within each class of the new rate structure as well as costs associated with each class for the first phase of rate reform implemented in fiscal 2025. This data should be provided separately for fiscal 2025 actual data and year to date in fiscal 2026.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on second phase of rate reform	DHS	November 1, 2025

11. Adopt the following narrative:

**Costs Associated with Youths in Out-of-home Placements Placed in Hotels:** The committees are interested in receiving data on the costs associated with placing youths in out-of-home placements in hotels. The committees request that the Department of Human Services (DHS) include in the fiscal 2027 budget subprogram detail for fiscal 2025 actual, fiscal 2026 working, and fiscal 2027 allowance that separately identifies payments and anticipated payments for youth in out-of-home placements placed in hotels paid through the Foster Care Maintenance Payments program.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Costs associated with youths in out-of-home placements placed in hotels	DHS	With submission of the fiscal 2027 allowance

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12. Add the following language to the general fund appropriation:

, provided that these funds are to be used only for the purposes herein appropriated, and there shall be no budgetary transfer to any other program or purpose except that funds may be transferred to program N00G00.01 Foster Care Maintenance Payments. Funds not expended or transferred shall revert to the General Fund.

**Explanation:** This annual language restricts general funds appropriated for the Child Welfare Services program to that use only or for transfer to N00G00.01 Foster Care Maintenance Payments.

13. Add the following language to the general fund appropriation:

, provided that these funds are to be used only for the purposes herein appropriated, and there shall be no budgetary transfer to any other program or purpose. Funds not expended or transferred shall revert to the General Fund.

**Explanation:** This annual language restricts general funds appropriated for foster care maintenance payments deficiency to that use only. This restriction prevents a transfer of general funds to other programs that might create or increase a deficit in spending in the Foster Care Maintenance Payments program (N00G00.01).

<b>Total Net Change</b>	<b>-\$ 8,498,575</b>
<b>Total General Fund Net Change</b>	<b>-\$ 7,648,718</b>
<b>Total Federal Fund Net Change</b>	<b>-\$ 849,857</b>

**Budget Reconciliation and Financing Act Recommended Actions**

1. Add a provision that for fiscal year 2026, payments to providers with rates set by the Interagency Rates Committee under Section 8-417 of the Education Article may not increase over the rates in effect on January 1, 2025.

**Appendix 1**  
**Evidence-based Practices Implemented by DHS under the Federal FFPSA**  
**Fiscal 2024**

<b><u>Practice</u></b>	<b><u>Jurisdictions Implementing</u></b>	<b><u>Families Served</u></b>
Healthy Families America	Howard Kent Prince George’s Queen Anne’s Somerset Talbot	244
Parent-Child Interaction Therapy	Allegany Anne Arundel	17
Functional Family Therapy	Anne Arundel Baltimore County Caroline Carroll Cecil Dorchester Harford Howard Kent Queen Anne’s Somerset Talbot Wicomico Worcester	192
Multisystemic Therapy	Frederick Montgomery Prince George’s Washington	77
<b>Total</b>	<b>19 Jurisdictions</b>	<b>530</b>

DHS: Department of Human Services  
FFPSA: Federal Family First Prevention Services Act

**Appendix 2**  
**Placement Experiences for CfE Children**  
**October 1, 2019, to September 30, 2023**

<b>Level of Training Received through CfE</b>	<b>Permanency Plan</b>	<b><u>Children</u></b>	<b><u>Remain in Placement</u></b>	<b><u>Moved to Relatives</u></b>	<b><u>Moved to Permanency</u></b>	<b>Total Positives - Stability, Relatives, or Permanency</b>	
Fully Trained and Certified CfE Homes	Reunification	20	15	1	2	18	90.0%
	All other plans	17	14	0	0	14	82.4%
CfE Homes That Have Graduated	Reunification	63	40	1	5	46	73.0%
	All other plans	40	23	1	5	29	72.5%
Referred to CfE but Did Not Complete/Participate	Reunification	25	13	0	1	14	56.0%
	All other plans	19	13	1	2	16	84.2%
Comparison Children – Caregiver Not Referred to CfE	Reunification	12	3	3	0	6	50.0%
	All other plans	22	4	5	1	10	45.5%

CfE: Center for Excellence

### Appendix 3 2024 Joint Chairmen’s Report Responses from Agency

The 2024 JCR requested that DHS SSA prepare 5 reports. Electronic copies of the full JCR responses can be found on the DLS Library website.

- ***Update on the Implementation of the Provisions of the FFPSA:*** A report was submitted providing an update on evidence-based practices implemented by local jurisdictions and the number of families served in fiscal 2024. Additionally, the report included an update on the QRTP provider designation process and discussion of programs offered through the CfE in Resource Family Development grant. Further discussion of this report can be found in Issue 2 of this analysis.
- ***Report on Caseload Data and Filled Positions Assigned by Jurisdiction for Specified Caseload Types:*** A report was submitted providing updated child welfare caseload ratios needed to meet CWLA’s caseload standards. The report also included discussion on efforts to improve recruitment for vacant positions. Further discussion of the data can be found in Issue 3 of this analysis.
- ***Report on Implementation of the New Foster Care Provider Rate Structure:*** A report was submitted on the use of funding included in fiscal 2025 budget for foster care rate reform. Following request for further information, a supplemental report was submitted, which included a breakdown of how the funding would be used. Further discussion of the report can be found in the Proposed Budget Change section of this analysis.
- ***Hospital Stays by Youth in Out-of-home Placements:*** A report was due on December 1, 2024, providing updated data on the total number and ALOS for emergency room visits, hospital stays, and hospital stays beyond medical necessity for children and youth in out-of-home placements through the department. As of January 31, 2025, the report has not been submitted.

**Appendix 4**  
**Object/Fund Difference Report**  
**Department of Human Services – Social Services Administration**

<u>Object/Fund</u>	<u>FY 24</u> <u>Actual</u>	<u>FY 25</u> <u>Working</u> <u>Appropriation</u>	<u>FY 26</u> <u>Allowance</u>	<u>FY 25 - FY 26</u> <u>Amount Change</u>	<u>Percent</u> <u>Change</u>
<b>Positions</b>					
01 Regular	2,627.18	2,627.18	2,629.18	2.00	0.1%
02 Contractual	5.00	2.50	2.50	0.00	0%
<b>Total Positions</b>	<b>2,632.18</b>	<b>2,629.68</b>	<b>2,631.68</b>	<b>2.00</b>	<b>0.1%</b>
<b>Objects</b>					
01 Salaries and Wages	\$ 267,991,499	\$ 282,426,905	\$ 296,077,886	\$ 13,650,981	4.8%
02 Technical and Special Fees	2,086,211	2,212,662	2,212,662	0	0%
03 Communication	1,895,908	1,768,657	1,768,657	0	0%
04 Travel	880,935	975,166	975,166	0	0%
06 Fuel and Utilities	797,769	803,556	803,556	0	0%
07 Motor Vehicles	2,498,197	2,502,430	2,443,500	-58,930	-2.4%
08 Contractual Services	81,591,049	78,727,971	78,742,928	14,957	0%
09 Supplies and Materials	1,040,957	1,072,774	1,072,774	0	0%
10 Equipment – Replacement	391,398	350,000	350,000	0	0%
12 Grants, Subsidies, and Contributions	347,466,461	350,555,380	396,045,380	45,490,000	13.0%
13 Fixed Charges	10,604,337	10,704,056	10,707,596	3,540	0%
<b>Total Objects</b>	<b>\$ 717,244,721</b>	<b>\$ 732,099,557</b>	<b>\$ 791,200,105</b>	<b>\$ 59,100,548</b>	<b>8.1%</b>
<b>Funds</b>					
01 General Fund	\$ 477,700,340	\$ 476,223,868	\$ 548,103,315	\$ 71,879,447	15.1%
03 Special Fund	4,587,895	5,799,734	7,410,674	1,610,940	27.8%
05 Federal Fund	234,306,636	249,248,236	234,858,397	-14,389,839	-5.8%
09 Reimbursable Fund	649,850	827,719	827,719	0	0%
<b>Total Funds</b>	<b>\$ 717,244,721</b>	<b>\$ 732,099,557</b>	<b>\$ 791,200,105</b>	<b>\$ 59,100,548</b>	<b>8.1%</b>

Note: The fiscal 2025 appropriation does not include deficiencies. The fiscal 2026 allowance does not include statewide salary adjustments budgeted within the Department of Budget and Management.

**Appendix 5  
Fiscal Summary  
Department of Human Services – Social Services Administration**

<u>Program/Unit</u>	<u>FY 24 Actual</u>	<u>FY 25 Wrk. Approp.</u>	<u>FY 26 Allowance</u>	<u>Change</u>	<u>FY 25 - FY 26 % Change</u>
04 General Administration - State	\$ 35,079,646	\$ 36,947,784	\$ 37,807,458	\$ 859,674	2.3%
01 Foster Care Maintenance Payments	343,763,763	350,091,512	395,581,512	45,490,000	13.0%
03 Child Welfare Services	284,745,917	288,284,424	300,274,964	11,990,540	4.2%
04 Adult Services	53,655,395	56,775,837	57,536,171	760,334	1.3%
<b>Total Expenditures</b>	<b>\$ 717,244,721</b>	<b>\$ 732,099,557</b>	<b>\$ 791,200,105</b>	<b>\$ 59,100,548</b>	<b>8.1%</b>
General Fund	\$ 477,700,340	\$ 476,223,868	\$ 548,103,315	\$ 71,879,447	15.1%
Special Fund	4,587,895	5,799,734	7,410,674	1,610,940	27.8%
Federal Fund	234,306,636	249,248,236	234,858,397	-14,389,839	-5.8%
<b>Total Appropriations</b>	<b>\$ 716,594,871</b>	<b>\$ 731,271,838</b>	<b>\$ 790,372,386</b>	<b>\$ 59,100,548</b>	<b>8.1%</b>
Reimbursable Fund	\$ 649,850	\$ 827,719	\$ 827,719	\$ 0	0%
<b>Total Funds</b>	<b>\$ 717,244,721</b>	<b>\$ 732,099,557</b>	<b>\$ 791,200,105</b>	<b>\$ 59,100,548</b>	<b>8.1%</b>

Note: The fiscal 2025 appropriation does not include deficiencies. The fiscal 2026 allowance does not include statewide salary adjustments budgeted within the Department of Budget and Management.