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Widespread Pandemic Disruption Spurred Innovation to State Paternity Establishment Practices

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Why OIG Did This Review

In fiscal year (FY) 2020, 41 percent of children born in the United States were born to unmarried parents. Paternity establishment is the legal determination of fatherhood for children born into these families. It serves as the basis for child support orders and affirms the connection between father and child. State child support agencies facilitate paternity establishment in the hospital at the time of birth, or through other administrative and court processes post-birth. The Office of Child Support Services (OCSS) provides oversight and funding to State child support agencies.

The COVID-19 pandemic disrupted paternity establishment services nationwide, resulting in lower paternity establishment rates. This study evaluates the effect of the pandemic on State paternity establishment services, State agency practices to maintain services, and efforts by OCSS (then named the Office of Child Support Enforcement) to support State agencies to maintain paternity establishment services during the pandemic.

How OIG Did This Review

OIG surveyed 54 child support agencies, from all 50 States, the District of Columbia, Guam, Puerto Rico, and the Virgin Islands, between June and September 2022. OIG also reviewed documents and conducted interviews with representatives from nine States and from OCSS headquarters and regional offices.

Widespread Pandemic Disruption Spurred Innovation to State Paternity Establishment Practices

Key Takeaways

State child support agencies reported that significant disruptions due to COVID-19 forced them to alter processes in ways that modernized paternity establishment services. These innovations can continue to benefit the program and parents, if supported. OCSS also assisted States by temporarily lowering performance thresholds for paternity establishment to prevent States from losing Federal funding.

What OIG Found

Paternity establishment services were disrupted by the COVID-19 pandemic in every State. Hospital visitation restrictions made it difficult for fathers to establish paternity at the time of birth. Closures and limited hours for courts and genetic testing sites disrupted post-birth paternity establishment services.

State child support agencies took numerous actions to maintain paternity establishment services during the pandemic, which agency officials reported resulted in improved customer service. They transitioned to telework, offered

additional assistance to hospital staff, and increased the use of remote court hearings. They also increased their outreach to parents via telephone, email, and text.

OCSS temporarily reduced paternity establishment performance requirements, which protected State agencies from financial penalties they might otherwise have incurred. State agencies called the OCSS action beneficial, but some said they would have also benefited from additional help in maintaining services, such as policy guidance and sharing of State agencies' best practices.

What OIG Recommends

The lessons learned from the COVID-19 pandemic can be applied to improve paternity establishment services and protect future operations. OIG recommends that OCSS (1) create forums for identifying and sharing State agency best practices in providing paternity establishment services; and (2) bolster State agency resilience during emergencies.

The Administration for Children and Families (ACF) concurred with both recommendations. ACF also stated that OCSS is planning a notice of proposed rulemaking to allow modification of State agency performance standards during national emergencies.

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BACKGROUND

OBJECTIVES

1. To assess the effect of the COVID-19 pandemic on State paternity establishment services.
 2. To evaluate the actions of the Office of Child Support Services (OCSS) to support State agencies in maintaining paternity establishment services.
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In fiscal year (FY) 2020, 41 percent of children born in the United States were born to unmarried parents.¹ Paternity establishment is the legal determination of fatherhood for children born into these families. It serves as the basis for child support orders and also affirms the connection between father and child.^{2, 3} State child support agencies facilitate paternity establishment in the hospital at the time of a child's birth, or through other administrative and court processes.⁴ For more than 20 years, most unmarried parents established paternity through in-hospital voluntary acknowledgment at the time of birth.⁵ Research shows that fathers who establish paternity are more likely to comply with child support orders and be involved in their child's life. Involved fathers are associated with a range of beneficial child outcomes including improved cognition, language development, and fewer behavioral problems.⁶ Further, once paternity is legally established, a child qualifies for certain forms of public assistance, and gains certain rights and privileges, such as inheritance rights and rights to a parent's medical and life insurance.^{7, 8, 9}

The COVID-19 pandemic disrupted paternity establishment services nationwide, resulting in lower paternity establishment rates among unmarried parents in most States.¹⁰ This study assesses the challenges the pandemic caused for paternity establishment services, and identifies actions taken by child support agencies to maintain services. We evaluated OCSS's actions in helping State agencies navigate the pandemic, including providing flexibilities with program requirements.

Office of Child Support Services

The Child Support Enforcement program was established in 1975 through the Social Security Act.¹¹ The Office of Child Support Services (OCSS), located within the Administration for Children and Families (ACF) administers the program at the Federal level. OCSS had been known as the Office of Child Support Enforcement until June 2023, when it changed its name to OCSS.¹² OCSS provides financial support, policy guidance, technical assistance, and some enforcement services to State agencies, such as intercepting Federal tax refunds for parents who owe unpaid child support. Child support agencies (also referred to as "IV-D agencies" because the agencies were codified in Part D of Section IV of the Social Security Act) provide services directly to

families and facilitate the provision of support payments to custodial parents. Child support agencies are in all 50 States, the District of Columbia, Guam, Puerto Rico, the Virgin Islands, and 60 Tribal Nations nationwide.¹³

Federal law requires custodial parents to cooperate with State child support enforcement agencies.^{14, 15} In FY 2021, OCSS provided \$3.5 billion to States for administrative expenditures, which represented 60 percent of total administrative expenditures that year.¹⁶ Child support was the third-largest income support program for children in the United States in FY 2021.¹⁷

State child support agencies have discretion to design their programs to meet individual State laws, needs, and characteristics, subject to meeting Federal requirements. State agencies are required to submit to OCSS a State IV-D plan that articulates the agency's methods for fulfilling Federal requirements.¹⁸ The State IV-D plans include State methods for establishing paternity and child support orders; collecting child support; disseminating policies and procedures to parents; and overseeing local child support offices.¹⁹ These plans are approved by OCSS and must be in continuous operation.^{20, 21}

State child support agencies also have a requirement for emergency management of automated systems that collect and disburse child support payments.²² The requirement specifies that State agencies must have contingency plans to ensure that these automated systems continue to operate during periods of short- or long-term disruption.²³ OCSS does not impose additional emergency preparedness requirements to ensure the maintenance of other child support functions, such as paternity establishment, during a crisis. Agency staff informed us that disaster recovery plans are maintained at the State level, not by OCSS.

Federal Laws Promoting Voluntary Paternity Establishment

Paternity establishment is a core component of child support programs. The Omnibus Reconciliation Act of 1993 required States to create a simplified administrative process for parents to voluntarily acknowledge paternity at the time of a child's birth.²⁴ The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) increased State responsibilities for establishing paternity and encouraged all unmarried parents (whether seeking public assistance or not) to establish paternity. It also imposed a penalty in the form of reduced Temporary Assistance for Needy Families (TANF) funding if a State failed to achieve a 90-percent paternity establishment percentage (PEP) and had not improved its PEP the prescribed amount over the prior year.^{25, 26}

Building on PRWORA, the Child Support Performance and Incentive Act of 1998 (CSPIA) established a performance-based incentive and penalty system in which States receive incentive funding based on performance in five areas.²⁷ One measure is the rate of paternity establishment.²⁸ Since paternity is the first step to establishing a child support order, achieving a higher rate of paternity establishment is critical to ensuring support for children and custodial parents and meeting the other

performance measures, such as support order establishment. Following implementation of these Federal laws, rates of paternity establishment increased substantially. The national IV-D paternity establishment percentage (PEP) rate was 65 percent in FY 2000 (the year CSPIA's performance measures took effect) and by FY 2018, the national rate was above 90 percent.^{29, 30} (Some States have PEP rates above 100 percent, due to counting paternity establishments in the current year for children born in prior years.³¹)

Paternity Establishment Percentage Rates: Incentives and Penalties

States may earn payment incentives and/or incur penalties based on their PEP rates. OCSS awards incentive payments to States with a PEP rate at 50 percent or higher, and States with a PEP rate above 80 percent gain the full incentive payment.³² OCSS imposes a penalty in the form of reduced TANF funding when States do not meet a 90-percent PEP threshold. For States that do not meet the 90-percent threshold, OCSS sets a rate the States must meet the following year to avoid a penalty.³³ States can receive full incentive payments for meeting an 80-percent PEP threshold and still be subject to penalties for failing to reach the 90-percent PEP threshold. PEP data are maintained by States and they are audited by OCSS for completeness and accuracy.³⁴

In-Hospital Voluntary Paternity Acknowledgment

Federal law requires States to provide services so unmarried fathers can voluntarily acknowledge paternity in the hospital.³⁵ In-hospital acknowledgment allows parents to establish paternity without visiting an administrative office or court, and to name the father on the original birth certificate rather than modifying the certificate after birth.

State agencies have invested considerable resources in supporting in-hospital programs, including training hospital staff to facilitate paternity acknowledgment, and developing educational materials for parents. Voluntary acknowledgment requires both parents to sign a declaration of paternity, which legally certifies that the father is the parent of the child.³⁶

Post-Birth Paternity Establishment

In addition to in-hospital voluntary paternity acknowledgment, Federal law requires States to operate common paths for establishing paternity post-birth through other administrative or judicial processes.³⁷ States must have procedures in effect that allow for the establishment of the child's paternity from birth until age 18.³⁸ The child's mother or presumed father may request paternity establishment after the child's birth through an administrative process that is similar to in-hospital acknowledgment. Parents may also acknowledge paternity at State and local vital records offices, within a certain timeframe post-birth, which varies by State.³⁹

The child's mother or presumed father may also request paternity establishment through the courts. Judicial establishment may require genetic testing, in which a

buccal swab is rubbed inside the cheeks to collect DNA material.⁴⁰ States must allow genetic test results to serve as evidence of paternity without the need for additional testimony.⁴¹

OCSS Guidance and Flexibilities for States During the COVID-19 Pandemic

In its role of supporting State child support agencies, OCSS is responsible for providing guidance and technical assistance to help State agencies operate their programs according to Federal laws and regulations. This includes providing the agencies with information on practices that may be useful for program improvement and interpreting Federal policies, such as actions the agencies must take to comply with new and amended Federal laws.⁴²

The COVID-19 pandemic resulted in fewer paternity establishments nationwide.⁴³ According to preliminary OCSS data, the national number of paternities established or acknowledged decreased between FYs 2019 and 2020 by 13 percent (from 1.4 million to 1.2 million).⁴⁴

OCSS released a Frequently Asked Questions (FAQ) document to assist agencies in the “operational, administrative, and programmatic” challenges they were facing as a result of the pandemic. Last updated in February 2021, the FAQ included a mix of topics, such as extensions to IV-D agencies for reporting performance data and discussion of telework policies.⁴⁵

In May 2020, OCSS released a memorandum to IV-D directors acknowledging that State agencies were encountering significant challenges and that child support services nationwide were “severely disrupted” by the pandemic. The memorandum outlined a plan for granting IV-D agencies flexible accommodations in meeting State requirements such as required timeframes for certain child support services.⁴⁶

In October 2021, OCSS issued a proposed rule that would temporarily lower the required PEP performance threshold from 90 percent to 50 percent in order for a State to avoid a financial penalty for FYs 2020 and 2021.⁴⁷ On May 27, 2022, the final rule was published, which lowered the PEP performance threshold from 90 percent to 50 percent for FYs 2020 through 2022.⁴⁸

Methodology

Scope

This study assesses how the COVID-19 pandemic has affected paternity establishment services provided by IV-D agencies in the 50 States, the District of Columbia, and three territories (referred to here as State agencies), and identifies actions taken by the child support agencies to maintain those services.^{49, 50} We did not assess how the COVID-19 pandemic affected other services provided by child support agencies, such as establishing and enforcing child support orders.

We evaluated OCSS's actions to support State agencies in maintaining paternity establishment services, and the use of any flexibilities for State performance requirements between March 2020 to December 2022. We did not evaluate State performance or compliance with Federal standards.

Data Sources and Analysis

We used three data sources for our evaluation: (1) a survey of child support agencies in 50 States, the District of Columbia, and three territories; (2) interviews with State agency officials and frontline child support staff from nine States, and review of supporting documents; and (3) an interview with OCSS officials, and review of OCSS supporting documents.

State Survey. We administered an online survey between June and September 2022 to the 54 IV-D agencies including all 50 States, the District of Columbia, Guam, Puerto Rico, and the Virgin Islands. We received survey responses from all 54 State agencies for a 100-percent survey response rate. The survey included questions about how the COVID-19 pandemic affected paternity establishment services throughout the pandemic, the extent to which services were disrupted, and challenges with maintaining services. The survey asked respondents to describe actions they took to maintain paternity establishment services and lessons learned in addressing paternity establishment challenges and backlogs. The survey also asked State agencies about their experiences with OCSS's guidance and technical assistance for maintaining services during the pandemic, and what additional flexibilities they needed.

We used quantitative and qualitative analysis of the survey responses to identify challenges and actions taken, and to gain insight on OCSS support. The survey also provided illustrations and context. We used the survey responses to select a purposive sample of nine State agencies for interviews and document reviews.

State Agency Interviews and Document Reviews. We conducted interviews with State agency officials and frontline staff from nine agencies in September 2022 to add context and examples of challenges and actions taken to address those challenges during the pandemic. We also examined agency documents related to policies and practices for establishing paternity.

We used qualitative analysis of our State agency interviews to understand and illustrate the strengths and weaknesses of paternity establishment methods from multiple agency perspectives. Our interview analysis examined how State agencies used OCSS guidance and flexibilities to improve paternity establishment practices from the perspectives of the State agencies and what additional actions could improve Federal support to agencies.

OCSS Interview and Document Reviews. We conducted an interview with OCSS officials in November 2022 to understand their support efforts, including how OCSS formulated and distributed guidance, and how it responded to State agency questions and concerns during the pandemic. We analyzed the interview responses

to provide context and insights into OCSS's perspective on State agency strategies to provide paternity establishment services during the pandemic.

We also requested and reviewed OCSS documentation provided to State agencies, including memorandums outlining flexibilities, actions, and guidance to maintain paternity establishment practices. Our analysis of documents examined how OCSS identified and approached challenges and relayed information to State agencies related to maintaining paternity establishment services during national emergencies.

Limitations

Our analysis included self-reported data that we did not independently verify. However, our interviews offered an opportunity to determine the general viability of the survey responses. We also did not evaluate whether actions taken by State agencies improved their operations.

Standards

We conducted this study in accordance with the *Quality Standards for Inspection and Evaluation* issued by the Council of the Inspectors General on Integrity and Efficiency.

FINDINGS

All State agencies reported disruption to paternity establishment services during the COVID-19 pandemic

The widespread nature of the pandemic created unique and unprecedented challenges to maintaining paternity establishment services, some of which persist. All 54 State agencies reported that they experienced some level of disruption to paternity establishment services, with more than half of State agencies (31 of 54) reporting significant disruptions. State agency respondents spoke often of the scale of the pandemic and its effect on nearly all aspects of operations for State agencies and their partners in establishing paternity, including hospitals and vital records offices.

“[Paternity establishment] involves institutions across government and private sectors...[T]here is sharing data, sharing forms, working with the courts. When the pandemic hit, I think we were all taken aback by the scale of the emergency.” – OCSS Regional Program Manager

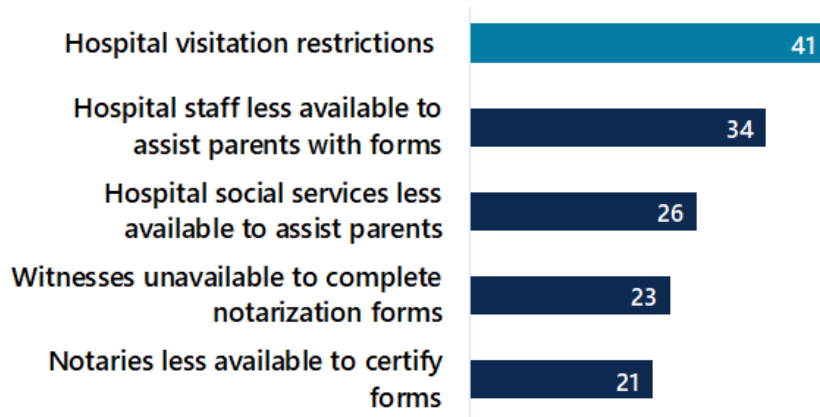
These disruptions created challenges for State agency staff. Nearly three-quarters of State agencies (40 of 54) reported that the average time to establish paternity increased during the pandemic, and 25 of the 40 agencies with delayed times said the average time to establish paternity had not returned to pre-pandemic time frames at the time of our data collection in mid-2022. The difficulty establishing paternity in the hospital caused by the pandemic also resulted in increased workloads for State agency staff. More than half of State agencies (33 of 54) reported that their staffs’ workloads increased during the pandemic due to an increase in post-birth paternity establishment cases. An agency official in a large State said staff had to work overtime to address the backlog of paternity establishment cases caused by the pandemic. An official in a different State agency said that while their staff did not need to work overtime to address the backlog, it was still an “intensive effort” to maintain the paternity establishment caseload during the initial months of the pandemic.

Most State agencies reported challenges to in-hospital services largely due to COVID-19 precautions and visitation restrictions

In response to the COVID-19 pandemic, hospitals took precautions and enforced visitation policies that restricted who could be present in birthing units. Fifty of the 54 State agencies reported disruption to paternity acknowledgment services that

occurred in-hospital. More than one-third of these agencies (19 of 50) characterized the disruption as significant. (See Exhibit 1 for common challenges.)

Exhibit 1: State agencies reported that hospital visitation restrictions were the most common of the challenges to in-hospital voluntary paternity acknowledgment programs during the COVID-19 pandemic. (n=54)



Source: HHS-OIG analysis of 54 State agency survey responses, 2022.

Three-quarters of State agencies (41 of 54) reported that hospital visitation restrictions were a challenge to in-hospital paternity establishment. One State agency official wrote, “Because many hospitals restricted people other than the mother to enter the facility, putative fathers may not have had the opportunity to acknowledge paternity during that critical time period.”

Further, hospitals’ COVID-19 precautions limited the participation of others needed to assist parents with completing the paternity acknowledgment forms at the time of birth. Two-thirds of State agencies (34) reported that parents received less support from hospital staff to assist with paternity establishment throughout the pandemic, and almost half (26) said hospital social services staff were less available to assist parents. In one State, agency officials said the health information management staff who handle birth certificates were sometimes restricted from entering the birthing centers to assist parents. Agency officials also reported that, given the intense care needs of the pandemic, hospital staff who would normally assist parents with paternity acknowledgment were called upon to focus on other priorities. One State agency official said, “resources were diverted within hospitals to concentrate on critical care and the paternity program took a back seat...”

Hospital precautions during the pandemic also limited the ability of notaries and witnesses to be present to complete paternity acknowledgment forms. Twenty-three State agencies reported that visitation policies limited the presence of witnesses needed to sign paternity acknowledgment documents. Twenty-one State agencies said notaries were less available to certify in-hospital voluntary paternity acknowledgment forms.

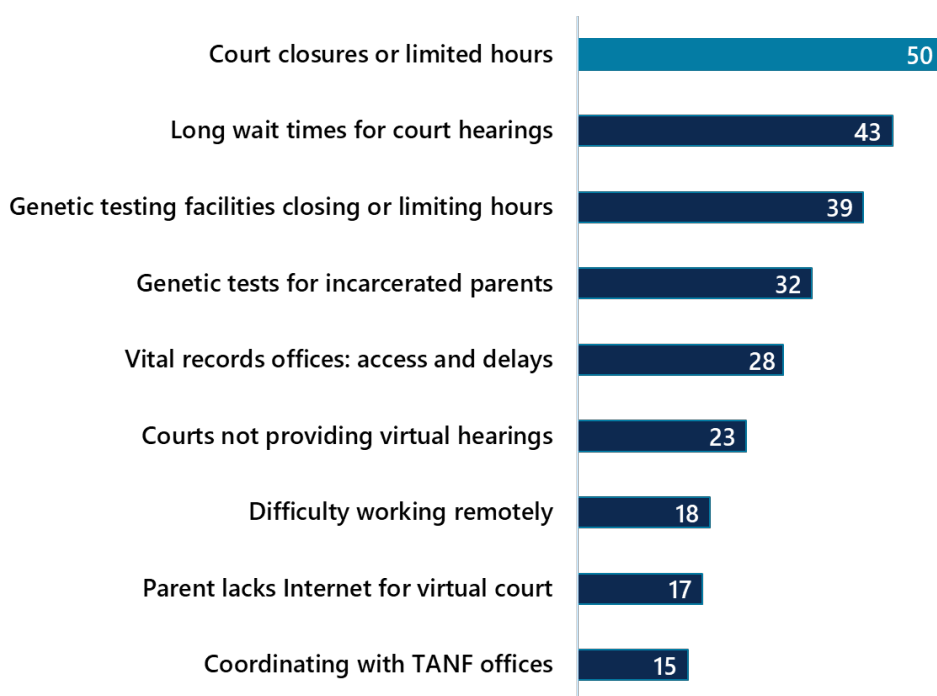
Most State agencies did not have paternity acknowledgment services to engage fathers, notaries, and witnesses remotely

Use of virtual communication could have resolved limitations on participation from fathers, notaries and witnesses, but 43 of the 54 State agencies did not meet with parents virtually to complete in-hospital paternity acknowledgment forms. An official from one of the 11 State agencies that met with parents virtually to complete in-hospital paternity acknowledgment forms said they created a process so parents could upload Acknowledgment of Paternity documentation. “That was quicker than through the mail,” the official said. “We were trying to adapt our documents and forms to have...virtual ways and means of getting to us.”

State agencies reported challenges to post-birth services due to court closures, restricted office hours, and lack of virtual services

COVID-19 also disrupted paternity establishment services that occur outside the hospital, via the courts, administrative processes, and genetic testing. All 54 State agencies reported that these post-birth paternity establishment methods were disrupted during the pandemic. Half of the State agencies (27 of 54) characterized the disruption to post-birth paternity establishment as significant. (See Exhibit 2 for common challenges to post-birth paternity establishment.)

Exhibit 2: State agencies reported that court closures or limited hours were their most common of the challenges to post-birth paternity establishment during the COVID-19 pandemic. (n=54)



Source: HHS-OIG analysis of 54 State agency survey responses, 2022.

Most State agencies reported that court closures and restricted court hours hampered post-birth paternity establishment services

Nearly all State agencies (50 of 54) reported that court closures or restricted court hours were a challenge to post-birth paternity establishment during the pandemic. A State agency official said the courts in a major city limited activities to emergency proceedings for more than a year and there were no in-person hearings for family court. When the courts reopened, only cases that were deemed emergency proceedings would advance through family court. An official from the State agency said child support matters “were not deemed essential.” An official from a different State agency said that the State had only a small number of child support-related court hearings throughout 2020 and into 2021. “Courts did not have anything for three solid months,” the official continued, “and when we did resume the hearings, they were very slow.”

Backlogs caused by court closures and long wait times for paternity establishment hearings were a challenge for 43 of the 54 State agencies. One State agency reported that the backlogs were particularly severe in larger jurisdictions where some people might have had a lack of Internet and telephone access. The director for one State agency estimated that their courts were still working through backlogs of thousands of cases, including paternity establishment cases, at the time of our review.

Closure and restricted hours for genetic testing sites also hampered paternity establishment services

Parents and State agencies use genetic testing to confirm paternity; however, 39 of the 54 State agencies reported that the pandemic resulted in genetic testing facilities closing or limiting their hours. State agencies said that before the pandemic they had many genetic testing sites located in courthouses, making it a “one-stop shop” for paternity establishment, according to one agency official. Court closures and restricted hours reduced access to these services. Other State agencies provided genetic testing in their child support agency offices before the pandemic, but these offices were closed to the public for a period of time during the pandemic.

“It was clear immediately...at the beginning of the pandemic that this would be a significant impact on State programs.” – State agency director

In addition, more than half of the State agencies (32 of 54) said that restricted access to prisons during the pandemic hampered onsite genetic testing of incarcerated parents. OCSS and State agencies also noted that there were challenges to genetic testing even when testing sites were open, including with the sufficiency of testing supplies and ensuring that staff were properly trained for administering genetic tests using COVID-19 precautions.

State agency coordination with vital records and TANF offices became more difficult

As with courts, vital records offices closed or restricted hours during the pandemic. State agency officials identified two problems related to vital records offices during the pandemic: processing delays (23 of 54 State agencies) and limitations in accessing vital records offices (17 of 54 State agencies). One State agency official said, "Once we request information, they're supposed to [provide it in] 48 hours. Some were not done in 48 days."

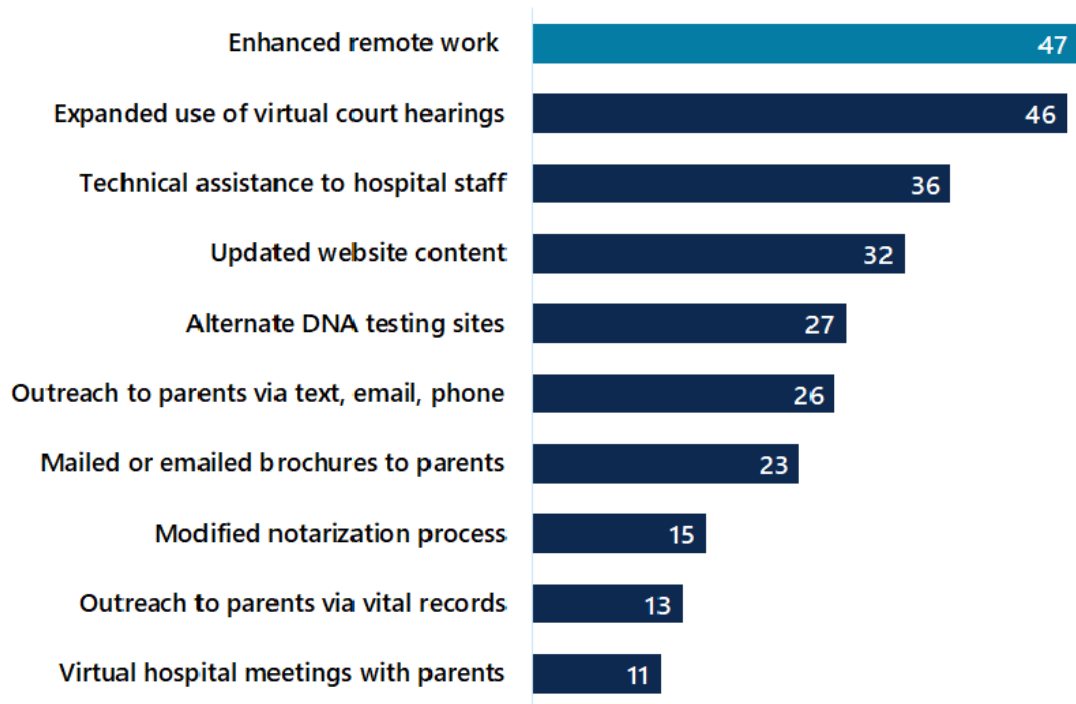
Public assistance offices had similar closures and restricted hours, with 15 State agencies citing challenges coordinating with TANF services. Because TANF recipients must cooperate with the child support program as a condition of receiving benefits, State TANF agencies refer custodial parents to the child support agencies. One State agency official said that TANF offices went to remote work during the pandemic, which led to backlogs in processing TANF applications and to a "significant decrease" in paternity establishment referrals.

State agencies responded to pandemic challenges by adopting virtual processes, expanding outreach, and other actions to modernize services

State agencies reported that in taking action to maintain paternity establishment services during the pandemic, they improved these services moving forward. Half of the State agencies (27 of 54) reported changing their practices to facilitate in-hospital paternity establishment, and all of the 54 State agencies said they changed some aspect of their post-birth paternity establishment process. State agencies increased the use of virtual services in courts; increased telework; found alternate genetic testing sites; and conducted more outreach to parents via phone, email and other methods.

While many State agencies said that these adjustments were challenging during the pandemic, agency officials reported that some of these services were more customer-centered and allowed more convenience for families. State agency officials said in interviews that the challenges caused by the COVID-19 pandemic transformed paternity establishment services for the better. Officials said that their processes went from "old fashioned" to "the 21st century" and that the improvements "made us more valuable to new customers." (See Exhibit 3 on the next page for actions the State agencies took to maintain paternity establishment services during the pandemic.)

Exhibit 3: State child support agencies were asked which of the following actions they took to facilitate paternity establishment services during the COVID-19 pandemic. (n=54)



Source: HHS-OIG analysis of 54 State survey responses, 2022.

To mitigate case backlogs, State agencies worked with courts to increase virtual hearings and encouraged use of administrative tools such as e-filing

State agencies took actions to facilitate court processes during the pandemic. Most State agencies (46 of 54) reported working with courts to start or expand the use of remote court hearings. An official from one State agency said, “We have been leaning really hard into virtual court. It is so much better of a customer experience.” An official from OCSS said the rate of parents showing up for court “skyrocketed” when States transitioned to virtual hearings because parents did not have to worry about finding a babysitter, going downtown to the courthouse, and finding parking.

State agencies also reported an increase in the capability to file court documents electronically. Thirty-five State agencies worked with courts to develop and expand the use of electronic signing and filing of forms (e-filing). The officials from one of the agencies said their courts were already going through a modernization process that allowed electronic orders to be submitted to the court, but e-filing became a priority when the pandemic hit. The officials from a different State agency said e-filing helped their courts work through a 6-month backlog of cases caused by court closures during the pandemic.

In one State, agency officials said that before the pandemic they scheduled their judicial paternity establishment cases in batches in their courthouses. Court backlogs and restricted hours made it difficult to schedule paternity establishment hearings and find time on the docket to batch cases. Although the State agency reported that it did not conduct any virtual court hearings to establish paternity prior to the pandemic, it worked with the courts to create a virtual process so families did not have to be in person for many cases.

In another State, officials discovered during the pandemic that some of their offices were not using an existing administrative-only paternity establishment process, so they provided additional guidance and promoted the administrative process to help minimize the number of cases that needed to proceed through the backlogged courts.

“Our new customers are truly virtual...They don’t want to come into a lobby and sit all day... Our [service] has become more enhanced by becoming paperless. Yes, COVID pushed that.” – State agency official

Some State agencies changed their process of notarizing paternity establishment documents. Fifteen of 54 State agencies said they modified the process of notarizing paternity establishment documents. Officials from one State agency said that prior to the pandemic, the agency would notarize paternity acknowledgment forms in its offices. When its offices closed during the pandemic, the agency allowed the parents to use notaries in other locations and submit the documents to the child support agency.

Most State agencies increased telework and remote technical assistance, which helped maintain their services for families

Most of the State agencies (47 of 54) reported that they purchased equipment and increased technical assistance for child support offices to help them perform their work remotely. Representatives from one State agency said they had no infrastructure for remote work before the pandemic. Their staff had been using desktop computers anchored to the office, but by mid-summer of 2020 the agency had purchased laptops for all staff, which enabled them to maintain services while working outside the office.

Many State agencies developed alternate arrangements to safely conduct genetic testing for parents

Half of the State agencies (27 of 54) reported providing alternate genetic testing arrangements or sites. Officials from one agency said they set up “drive by” genetic testing sites where parents could perform a swab for the genetic test themselves, with a child support agency employee serving as a witness for the test. “‘Witness testing’ allowed us to have physical distancing,” one State agency official said. “It’s something

we will [use] moving forward in terms of being that close in someone's space. We've learned that we have some flexibility we didn't know [we had] when it came to [genetic] testing." Another State agency moved genetic testing from the courts, which were closed, to their regional offices, where the tests were conducted by the staff of a national lab-testing chain.

Some State agencies increased training, technical assistance, and communication with hospitals to help maintain services

Agency officials said that by working with some hospitals and other offices, they were able to complete in-hospital voluntary paternity acknowledgments despite visitation restrictions. Thirteen State agencies reported that they increased the technical assistance and training they provided to hospital staff, and 11 said they increased their communication about paternity establishment with hospital staff. Examples of other enhanced communication included expanded outreach to hospital vital records offices to facilitate acknowledgments and filing of birth certificates.

Half of the State agencies used new forms of outreach to parents that promoted paternity establishment

State agencies developed various methods of outreach to parents for promoting paternity establishment during the pandemic. About half of the State agencies (26 of 54) conducted enhanced outreach to parents via text, email, or telephone to educate them about paternity establishment and promote the process during the pandemic. The officials from one State agency said they created a phone hotline and a dedicated email address for paternity establishment customer service during the pandemic. "I think really during COVID, we became more customer centered," an official from the agency said.

"The pandemic forced us to be innovative and it pressed fast forward on those innovations. I don't know [if] any of us would have seen these things in our careers without the pandemic." – State agency director

Thirteen of the 54 State agencies reported that they contacted vital records offices to identify cases of nonmarital births for which there was not an establishment of paternity and conducted outreach to inform the mothers of their services. Officials from one of the State agencies said they worked with vital records to send outreach mailings to thousands of mothers and estimated that about 20 percent of the mailings resulted in an acknowledgment of paternity.

Many State agencies (32 of 54) created or updated website content on paternity establishment for parents during the pandemic. One State agency said it created a customer service call center and made it possible for parents to contact the agency through a mobile application. Agents would screen cases and respond to customers within two days. Another State agency created postcards with a Quick Response (QR)

code, which hospital staff distributed, to inform new parents of the services available to them. The State agency reported that it also developed a system of sending email alerts to parents to remind them of genetic testing appointments.

OCSS temporarily lowered the State performance threshold for paternity establishment to prevent States from losing Federal funding

The disruption to paternity establishment services caused some child support agencies to be at risk of losing millions of dollars in TANF funding. By law, agencies that did not meet a 90-percent PEP threshold in a given year were at risk of being penalized by OCSS if they did not raise their PEP the prescribed amount in the following year. PEP performance declined for 41 States, according to FY 2020 data, and about a third of States faced a possible financial penalty of a reduction of 1-2 percent of their TANF funding if they did not take sufficient corrective action the following year.^{51, 52}

Child support agencies began requesting relief from performance measures and case processing timelines as early as March 2020. Between March and June of 2020, OCSS published FAQs to assist State agencies and provided flexibilities for administrative requirements and timeframes. The flexibilities did not extend to PEP-related financial penalties because those penalties are statutorily mandated and OCSS was exploring what options may be available.

OCSS explored numerous legislative and regulatory options over the course of many months to address the PEP-related financial penalties. In March 2021 it moved forward with developing a Notice of Proposed Rulemaking (NPRM), relying on statutory authority allowing the Secretary to modify the requirements related to PEP to take into account such additional variables as the Secretary identifies that affect the ability of a State to meet the requirements.⁵³ The NPRM, published on October 19, 2021, proposed temporarily lowering the PEP threshold from 90 percent to 50 percent for FYs 2020 and 2021.

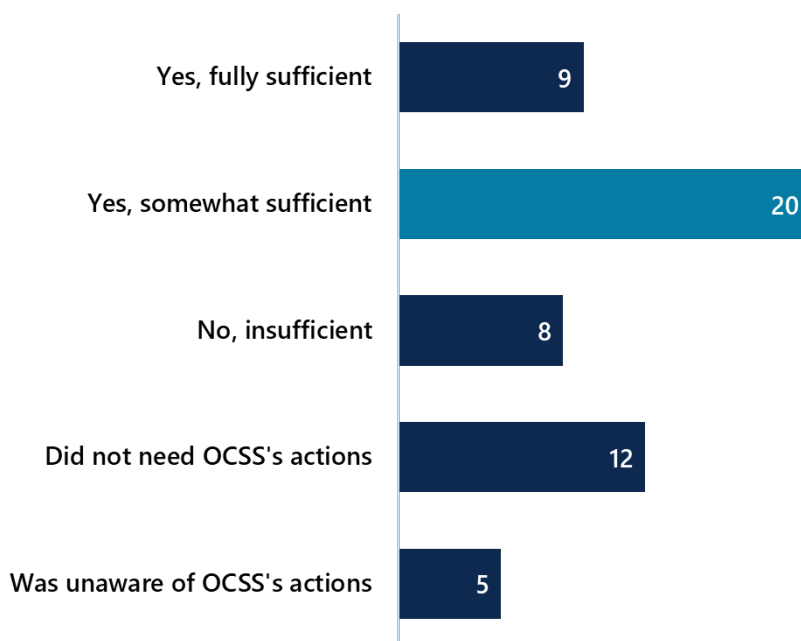
The *Paternity Establishment Percentage Performance Relief Final Rule* was published on May 27, 2022, and became effective immediately. It modified the PEP performance threshold from 90 percent to 50 percent for FYs 2020, 2021, and 2022.⁵⁴ Therefore, child support agencies whose PEP stayed above 50 percent during that timeframe would avoid financial penalties.

State agencies had mixed assessments of OCSS’s support during the COVID-19 pandemic, citing the lowered performance threshold and other support as beneficial

Most State agencies reported that the support they received from OCSS regarding paternity establishment during the pandemic was “fully sufficient” (9 of 54) or “somewhat sufficient” (20 of 54).

One State agency explained that, “[OCSS] was available for any questions and/or concerns we had regarding this issue throughout the pandemic.” Officials in a different State agency said their OCSS regional office specialist was “extremely helpful” during the pandemic. “As we implemented the new processes, we ran them by him to make sure we were staying in bounds of Federal regulations,” the State agency’s director said. (See Exhibit 4 for State agency responses regarding support from OCSS.)

Exhibit 4: State agencies were asked: “Have OCSS’s actions to help your IV-D agency maintain paternity establishment services during the COVID-19 pandemic been sufficient?” (n=54)



Source: HHS-OIG analysis of 54 State survey responses, 2022.

State agency officials were particularly supportive of OCSS lowering the paternity performance threshold. “We dropped to 82 percent...and we had no idea if we would improve the next year or not,” one State agency official said, expressing the importance of the temporary lowering of the PEP requirement.

Eight State agencies called OCSS's actions to help maintain paternity establishment services "insufficient." Some of these State agencies said they would have benefited from more rapid action by OCSS. "OCSS was very, very slow to respond to the problem of paternity establishment for State programs, even though it was clear immediately – and was raised to OCSS immediately," one State agency official wrote on their survey. Another suggestion from State agency officials was that OCSS share practical advice and guidance among the agencies. For example, one State agency official suggested that OCSS serve as a "central clearinghouse" to promulgate best practices and practical guidance for maintaining paternity establishment services.

OCSS officials confirmed that they did not provide formal guidance or technical assistance on paternity establishment during the pandemic, but that their regional offices were in frequent contact with State agencies. OCSS officials said that State agencies may have emergency preparedness agreements that call for them to assist each other during times of disruption, but the agreements typically concern localized emergencies, such as fire or water damage, and OCSS does not oversee these State agreements. In their communication with States, the regional offices shared information about other State agency practices on an ad hoc basis, OCSS officials said, and were aware of State agency efforts to support each other and share information. "I really think the States were as inventive as they could be," one OCSS official said. "Every single challenge you can imagine was coming at them [during the pandemic]."

CONCLUSION AND RECOMMENDATIONS

State child support agencies reported that significant disruptions due to the COVID-19 pandemic led them to alter processes in ways that modernized paternity establishment. These innovations can continue to benefit the program and parents, if supported. We make recommendations to use the lessons learned from the unprecedented COVID-19 challenges to sustain these innovations in paternity establishment and better prepare for future emergencies.

We recommend that OCSS:

Create forums for identifying and sharing State agency best practices in providing paternity establishment services

Spurred by the challenges posed by the COVID-19 pandemic, State agencies adopted new practices to maintain paternity establishment services. In some cases, State agencies revolutionized the way they establish paternity, becoming much more customer-focused. Agency officials shared best practices and improvements with each other informally and through their member associations, but reported that additional knowledge sharing would have been beneficial.

OCSS should create forums and mechanisms to regularly share promising practices across States related to overcoming emergencies and other challenges. The forums should focus on the various innovations made during the pandemic and how those innovations can be integrated into paternity establishment work ongoing. Active information sharing should continue in order to help child support agencies learn and benefit from the successes of their colleagues. This practice would provide OCSS with an opportunity to vet State agency practices in order to promote those it perceives as most useful and in compliance with requirements. The forums for sharing best practices could include newsletters, websites, webinars, conference calls, and in-person training, providing OCSS with opportunities to engage further with State agencies to identify and address emerging challenges.

Bolster State agency resilience during emergencies

State agencies were unprepared for maintaining paternity establishment services during the COVID-19 pandemic. Current Federal requirements for State IV-D plans do not include provisions for emergencies, either localized or widespread, other than requiring States to continuously operate their automated systems that collect and disburse child support payments. OCSS should, through attestation, site visits, or other means, ensure that emergency plans account for a range of possible hazards, including a viral pandemic, cyber-security attacks, and more. State agencies need to build their capacity for resilience and flexibility and build strong relationships with key

stakeholders – including hospitals, courts, vital records offices, and genetic testing centers – so services can be maintained in difficult circumstances. Although it is not addressed in this report, the enhanced emergency planning could also address maintaining services for other child support enforcement services not covered in this report, such as establishment and enforcement of child support orders. Provisions could include planning for State agency office operations, such as telework capabilities, and coordination with other entities involved in paternity establishment, such as hospitals, courts, vital records offices, and parents.

AGENCY COMMENTS AND OIG RESPONSE

ACF concurred with our two recommendations. OIG appreciates the efforts of ACF and OCSS to support the work of State child support agencies. The ACF comments are summarized below. For the full text of their comments, see the Appendix.

Regarding our first recommendation that OCSS create forums for identifying and sharing State agency best practices, ACF concurred and stated that OCSS recognizes the importance of maintaining communication and will continue to offer forums to share best practices, including regular calls and meetings, and its newsletter. We recommend that OCSS enhance these efforts given that State agencies reported that they would have benefited from OCSS sharing more practical advice and guidance and communicating best practices among the States. These enhancements should include seeking new opportunities for engagement that feature active information sharing between OCSS and States about guidance and best practices. The additional forums could include webinars, conference calls, and in-person sessions.

Regarding our second recommendation that OCSS bolster State agency resilience during emergencies, ACF concurred and stated that it is committed to providing technical assistance to States to ensure service delivery during emergencies. OCSS will work closely with ACF's Office of Human Services Emergency Preparedness and Response to develop materials. In addition, OCSS reported that it is dedicating time during its FY 2024 regional meetings for presentations and discussions around the benefits of Continuity of Operations planning. OIG appreciates these planned efforts to bolster State agency resilience during emergencies and looks forward to updates from ACF on their implementation. ACF also said that OCSS is planning a notice of proposed rulemaking to allow modification of State agency performance standards during national emergencies, which would increase its ability to be flexible with its response to an emergency.



ADMINISTRATION FOR
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July 6, 2023

Ms. Ann Maxwell
Deputy Inspector General
U.S. Department of Health and Human Services
330 Independence Avenue, SW.
Washington, DC 20201

Dear Ms. Maxwell:

I am writing to provide the Administration for Children and Families' (ACF) response to the Office of Inspector General's (OIG) draft report titled, "Widespread Pandemic Disruption Spurred Innovation to State Paternity Establishment Practices," OEI-06-21-00150, which contains recommendations for the Office of Child Support Services (OCSS).

The COVID 19 pandemic required all levels of government to focus on health and safety. While some ACF programs had the authority to provide for emergency relief, OCSS did not have the authority or flexibility in the current regulations.

To address penalty relief due to the impact of the COVID-19 pandemic, ACF issued a final rule (87 FR 32090) on May 27, 2022, which provided states relief from performance penalties by modifying the Paternity Establishment Percentage performance requirement from 90 percent to 50 percent for fiscal years 2020, 2021, and 2022. To solve lack of flexibility going forward, OCSS is planning a notice of [proposed rulemaking](#) (Modifications to Performance Standards During Times of National Calamities) for the modification to performance standards during times of national emergencies. This rule would establish standards allowing OCSS to provide state child support programs with relief from certain performance penalties due to natural disasters and other calamities.

We appreciate the opportunity to review and comment on the report. Below you will find our response to each recommendation.

Recommendation 1: Create forums for identifying and sharing State agency best practices in providing paternity establishment services.

ACF Response: ACF concurs with this recommendation. OCSS recognizes the importance of maintaining communication, especially during times of emergency. OCSS will continue to offer forums to share best practices for issues facing the child support agencies. The OCSS Office of Regional Operations hosts calls with state and tribal directors on a regular basis as well as annual meetings that provide opportunities for sharing best practices. Additionally, articles around best practices are frequently published in the [Child Support Report newsletter](#) reaching a nationwide audience. For example, the September 2022 newsletter featured an article on Oregon changing


its IV-D paternity establishment percentage; the November 2022 newsletter highlighted Washington’s virtual trainings on paternity establishment; and the May 2023 newsletter highlighted Maine staff being certified in conducting the genetic testing sampling.

Recommendation 2: Bolster State agency resiliency during emergencies.

ACF Response: ACF concurs with this recommendation. OCSS is committed to providing technical assistance to states to ensure service delivery in times of an emergency. Continuity of Operations Plans (COOP) are not a State IV-D plan requirement. However, OCSS will work closely with ACF’s Office of Human Services Emergency Preparedness and Response in material development and is committed to dedicating time during the fiscal year 2024 regional meetings for presentation and discussion around the benefits of COOP planning. OCSS will share the material when it is developed.

Again, I appreciate the opportunity to review and comment on this draft report. Please direct any follow-up inquiries to our OIG liaison Scott Logan, Office of Legislative Affairs and Budget, at (202) 401-4529.

Sincerely,



January Contreras
Assistant Secretary
Administration for Children and Families
U.S. Department of Health and Human Services

ACKNOWLEDGMENTS AND CONTACT

Acknowledgments

Marshall Allen served as the team leader and Charis Burger served as the project lead for this study. Others in the Office of Evaluation and Inspections Dallas Regional Office who conducted the study include Ariel Arguelles and Anthony Soto-McGrath. Office of Evaluation and Inspections headquarters staff who provided support include Althea Hosein, Jennifer Gist, and Christine Moritz.

This report was prepared under the direction of Ruth Ann Dorrill, Acting Regional Inspector General for Evaluation and Inspections in the Dallas Regional Office.

Contact

To obtain additional information concerning this report, contact the Office of Public Affairs at Public.Affairs@oig.hhs.gov. OIG reports and other information can be found on the OIG website at oig.hhs.gov.

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ABOUT THE OFFICE OF INSPECTOR GENERAL

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ENDNOTES

- ¹ Michelle Osterman, Brady Hamilton, Joyce Martin, Anne Driscoll, and Claudia Valenzuela, *Births: Final Data for 2020*, National Vital Statistics Reports, February 7, 2022. Accessed at <https://www.cdc.gov/nchs/data/nvsr/nvsr70/nvsr70-17.pdf> on November 29, 2022.
- ² Paul A. Rebman, Mageen C. Caines, and Patricia A. Harrison, "In-Hospital Paternity Establishment: Experiences and Meaning Perceived by Unmarried Parents," *Journal of Health Care for the Poor and Underserved*, Vol. 29, Issue 1, February 2018, pp. 497-508.
- ³ "Chapter 3 – Establishing Fatherhood," OCSS, *Child Support Handbook*, February 28, 2013, p. 15. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/ocse/child_support_handbook_with_toc.pdf on July 21, 2021.
- ⁴ 45 CFR § 303.5.
- ⁵ Based on pre-inspection interviews with OCSS officials. Additional support can be found at Fragile Families Research, *In-Hospital Paternity Establishment and Father Involvement in Fragile Families*, February 2005. Accessed at <http://www.jstor.org/stable/3600192> on July 20, 2021.
- ⁶ Fragile Families Research, *In-Hospital Paternity Establishment and Father Involvement in Fragile Families*, February 2005. Accessed at <http://www.jstor.org/stable/3600192> on July 20, 2021.
- ⁷ OCSS, "Chapter 3 – Establishing Fatherhood," *Child Support Handbook*, February 28, 2013, p. 15. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/ocse/child_support_handbook_with_toc.pdf on July 21, 2021.
- ⁸ National Responsible Fatherhood Clearinghouse, *Paternity Establishment: Information for Practitioners Working with Unmarried Fathers*. Accessed at https://www.fatherhood.gov/sites/default/files/resource_files/e000004134.pdf on December 9, 2022.
- ⁹ National Responsible Fatherhood Clearinghouse, *Working with Fathers to Explain the Importance of Establishing Paternity*, December 7, 2021. Accessed at <https://www.fatherhood.gov/for-programs/non-residential-fathers/working-fathers-explain-importance-establishing-paternity> on December 9, 2022.
- ¹⁰ 86 Fed. Reg. 57770, 57771 (October 19, 2021). Accessed at <https://www.govinfo.gov/content/pkg/FR-2021-10-19/pdf/2021-22553.pdf> on December 1, 2021.
- ¹¹ Part B of P.L. 93-647 (January 4, 1975) amended the Social Security Act to add Section IV-D. The child support enforcement (CSE) statute is found in Sections 451 through 469B of the Social Security Act (42 U.S.C. § 651 through § 669b). The CSE federal regulations are found in 45 CFR Parts 301 through 310.
- ¹² During the data collection phase of this report, the agency was known as the Office of Child Support Enforcement, OCSE. For more information about the June 2023 name change to the Office of Child Support Services (OCSS), see <https://www.govinfo.gov/content/pkg/FR-2023-06-05/pdf/2023-11815.pdf>.
- ¹³ Throughout this report, we refer to IV-D agencies located only in States, the District of Columbia, and territories. IV-D agencies located in Tribal Nations are not included in our description of IV-D agencies and are excluded from our study.
- ¹⁴ Title 42 U.S.C. § 608(a)(2) and § 654(29).
- ¹⁵ Federal law links the child support enforcement program with the Temporary Assistance for Needy Families (TANF) program for purposes of financial penalties. States operate their child support programs as a condition to receiving TANF block grant funding. Since the enactment of the child support enforcement program in 1975, child support agencies that do not meet Federal performance requirements or are noncompliant with Federal requirements receive a reduction in their State's TANF funding. Social Security Act § 409(a)(5).
- ¹⁶ OCSS, FY 2021 *Child Support Enforcement Preliminary Report*, 2022, pp. 49, 50. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/ocse/fy_2021_preliminary_report.pdf on November 25, 2022.

¹⁷ OCSS, *2021 Child Support: More Money for Families*. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/ocse/2021_infographic_national.pdf on November 29, 2022.

¹⁸ Social Security Act, § 454; 42 U.S.C. § 654.

¹⁹ Ibid.

²⁰ 45 CFR § 301.13.

²¹ 45 CFR § 302.10.

²² 45 CFR § 95.621(f)(2)(G)

²³ ACF, *Automated Systems for Child Support Enforcement: A Guide for States*, updated 2017, section H-5, pp. 98-99. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/ocse/certification_guide_2017_final.pdf, 2023.

²⁴ The Omnibus Budget Reconciliation Act of 1993, P.L. 103-66 (enacted August 13, 1993), § 13721.

²⁵ The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), P.L. 104-193 (enacted August 22, 1996), § 341, incorporated at 42 U.S.C. § 652(g)(1).

²⁶ States have the choice to be evaluated on one of two measures of PEP: the *IV-D Paternity Establishment Percentage*, or the *Statewide Paternity Establishment Percentage*. The *IV-D Paternity Establishment Percentage* is the ratio of the total number of children in the IV-D caseload in the fiscal year (or, at the option of the State, as of the end of the fiscal year) who have been born out of wedlock and for whom paternity has been established or acknowledged to the total number of children in the IV-D caseload as of the end of the preceding fiscal year who were born out of wedlock. The *Statewide Paternity Establishment Percentage* is the ratio of the total number of minor children who have been born out of wedlock and for whom paternity has been established or acknowledged during the fiscal year, to the total number of children born out of wedlock during the preceding fiscal year. See 45 CFR § 305.2(a)(1).

²⁷ Child Support Performance and Incentive Act of 1998 (CSPIA), P.L. 105-200 (enacted July 16, 1998), § 201.

²⁸ The other measures include (1) support order establishment; (2) current support collections; (3) cases paying toward arrears, and (5) cost-effectiveness. The amount of incentive payment depends on the funds available in the FY, the reliability of the IV-D agencies' data, the child support agencies' total amount of child support collections, and the relative performance of other IV-D agencies. Penalties are assessed when a state's measured level of performance in paternity establishment, support order establishment, or current collections falls below the specified level, or when a state's data used to compute incentive measures are found to be incomplete or unreliable, or when a state is found to be not in compliance with certain child support requirements. Program performance measures, standards, financial incentives, and penalties are detailed at 45 CFR Part 305.

²⁹ OCSS, *FY 1999 and FY 2000 Annual Report to Congress*, December 1, 2000. Accessed at <https://www.acf.hhs.gov/css/report/fy-1999-and-fy-2000-annual-report-congress> on July 22, 2021.

³⁰ OCSS, *FY 2018 Annual Report to Congress*, March 24, 2021. Accessed at <https://www.acf.hhs.gov/css/report/fy-2018-annual-report-congress> on February 3, 2023.

³¹ OCSS, *The Story Behind the Numbers: The Child Support Program is Focused on Performance*, November 2016, pp. 7, 32. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/ocse/sbtn_csp_focused_on_performance.pdf on February 3, 2023.

³² 42 U.S.C. § 658a(b)(6)(A).

³³ 42 U.S.C. § 652(g)(1) and (2).

³⁴ 45 CFR § 305.60.

³⁵ 45 CFR § 302.70(a)(5)(iii)(B).

³⁶ 45 CFR § 302.70(a)(5)(iii).

³⁷ 42 U.S.C § 666(a)(2).

³⁸ 42 U.S.C. § 666(a)(5)(A)

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- ³⁹ OCSS, "Chapter 3 – Establishing Fatherhood," *Child Support Handbook*, February 28, 2013. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/ocse/child_support_handbook_with_toc.pdf on July 21, 2021.
- ⁴⁰ 42 U.S.C. § 666(a)(5)(B)(i).
- ⁴¹ 42 U.S.C. § 666(a)(5)(F)(iii).
- ⁴² OCSS, Policy Guidance Overview. Accessed at <https://www.acf.hhs.gov/css/policy> on July 22, 2021.
- ⁴³ 86 Fed. Reg. 57770, 57771 (October 19, 2021). Accessed at <https://www.govinfo.gov/content/pkg/FR-2021-10-19/pdf/2021-22553.pdf> on December 1, 2021.
- ⁴⁴ OCSS, FY 2021 *Child Support Enforcement Preliminary Report*, 2022, p. 8. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/ocse/fy_2021_preliminary_report.pdf on February 4, 2023.
- ⁴⁵ OCSS, *COVID-19: Frequently Asked Questions for Child Support Programs*, February 10, 2021. Accessed at <https://www.acf.hhs.gov/css/covid-19-faqs-child-support-programs#faqs> on February 4, 2023.
- ⁴⁶ OCSS, *Flexibilities for State and Tribal Child Support Agencies during COVID-19 Pandemic*, DCL-20-04, May 28, 2020. Accessed at <https://www.acf.hhs.gov/css/policy-guidance/flexibilities-state-and-tribal-child-support-agencies-during-covid-19-pandemic> on April 23, 2021.
- ⁴⁷ 86 Fed. Reg. 57770 (October 19, 2021). Accessed at <https://www.govinfo.gov/content/pkg/FR-2021-10-19/pdf/2021-22553.pdf> on February 4, 2023.
- ⁴⁸ 87 Fed. Reg. 32090, 32091 (May 27, 2022). Accessed at [2022-11391.pdf \(govinfo.gov\)](https://www.govinfo.gov/content/pkg/FR-2022-11391/pdf/2022-11391.pdf) on February 4, 2023.
- ⁴⁹ Tribal child support agencies were excluded from this study.
- ⁵⁰ This report uses the term "States" to refer to the child support agencies in the 50 States, District of Columbia, Guam, Puerto Rico, and the Virgin Islands.
- ⁵¹ 87 Fed. Reg. 32090, 32091 (May 27, 2022).
- ⁵² 45 CFR § 305.40(a)(1).
- ⁵³ 42 U.S.C. § 652(g)(3)(A).
- ⁵⁴ 87 Fed. Reg. 32090 (May 27, 2022).