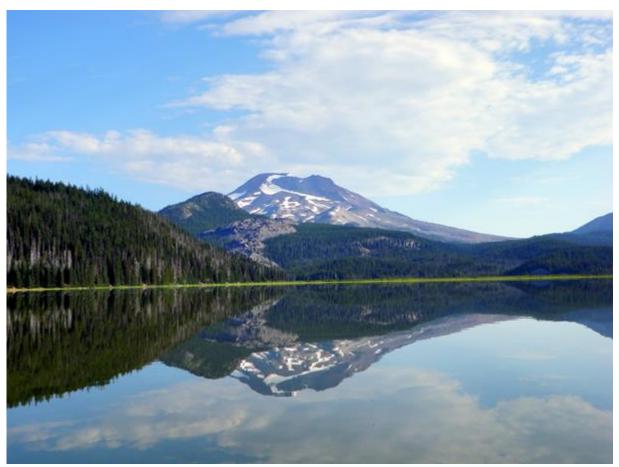


Self-Assessment Report



South Sister from Sparks Lake in Deschutes County, Oregon

Federal Fiscal Year 2023

Prepared by the Research Analysts March 2024

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I. Executive Summary

A. Introduction

The standards and criteria for state self-assessment review and report processes are established in the Code of Federal Regulations, Title 45, Chapter III, Part 308 (45 CFR 308). It specifies that states must conduct an annual review of eight required program criteria. Oregon submits its self-assessment results to the Office of Child Support Services (OCSS) Region 10 Office of Regional Operations and to the OCSS Commissioner through the automated Self-Assessment Reporting System no later than six months after the review period.

This is Oregon's 25th annual self-assessment. It covers the 12-month period from October 1, 2022, through September 30, 2023. The assessment reviewed the following eight categories:

- Case Closure
- Establishment of Paternity and Support Orders
- Enforcement of Orders
- Disbursement of Collections
- Medical Support Enforcement
- Review and Adjustment (Modification)
- Intergovernmental Services
- Expedited Process

Background

In 1975, the state legislature established the Oregon Child Support Program as required by Title IV-D of the Social Security Act. The Oregon Department of Justice has administered the program since 2003. The Department's Division of Child Support (DCS) maintains offices around the state and works with the Civil Recovery Section of the Department's Civil Enforcement Division on certain judicial actions. The Department also contracts with 19 county District Attorney (DA) offices to assist in providing child support services (as of August 1, 2023, the number is 18). While active in state courts, the program primarily uses administrative processes to establish, modify, and enforce child support orders. The following tables are synopses of Oregon's child support caseload and staffing as of September 30, 2023.

Table 1 – Program Information

Caseload Size		Types of
DCS Caseload	103,926	Current A
DA Caseload	29,931	Former A
Program Caseload	133,857	Never As

Types of Cases	
Current Assistance	17,728
Former Assistance	77,506
Never Assistance	38,623

Program Staffing

DCS Staff	539
DA Staff	121
Program Staff	660

B. Self-Assessment Results

Oregon's efficiency rates and corresponding federal benchmarks are displayed below in Table 2.

Table 2 – Self-Assessment Results

Criterion	Cases Where Required Activity Occurred or Should Have Occurred	Cases Where Required Activity Occurred within Timeframe	Efficiency Rate (Confidence Level of Sample)	Federal Minimum Standard	Previous Year's Efficiency Rates
Case Closure	433	411	94.92%	90%	98.90%
Establishment	341	178	52.20%	75%	100%
Enforcement	447	434	97.09%	75%	98.67%
Disbursement	81,962	81,442	99.37%	75%	99.37%
Medical	385	385	100%	75%	99.75%
Review & Adjustment	411	397	96.59%	75%	95.75%
Intergovernmental	778	683	87.79%	75%	96.37%
Expedited Process 6-month	384	372	96.88%	75%	92.33%
Expedited Process 12-month	384	383	99.74%	90%	97.63%
TOTAL:	85,525				

C. Summary

Oregon surpassed seven of the eight required federal compliance benchmarks. A corrective action plan is necessary for the establishment category and is detailed in section IV below.

II. Methodology

A. Introduction to Methodology

Oregon reviewed a focused sample group of child support cases in seven categories to determine compliance with 45 CFR 302 and

303 and the Social Security Act (Section 454B(c)(1)).

To conduct a statistically valid assessment and select a sample that would achieve a 90% confidence level, Oregon utilized focused samples. Oregon used the statistical equation in Figure 1 to achieve the 90% confidence level requirement.

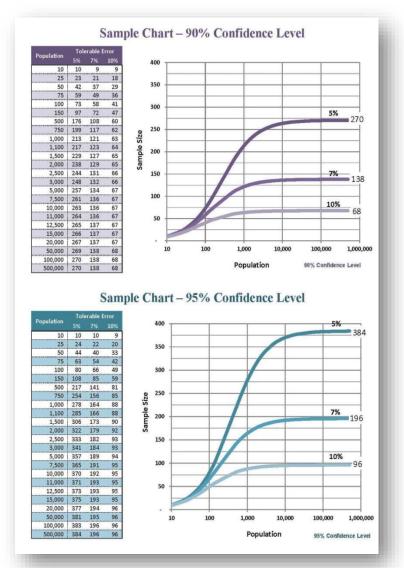
n = p*q/(E/Z)^2 S*P/(S+P-1)

Figure 1 – Confidence Level Statistical Equation

The formula for Oregon's statistical equation to achieve its confidence level states:

- n = the sample size
- z = the z score
- á = 1 confidence interval
- p = probability
- q = 1 p
- E = tolerable error rate

Oregon's desired error rate is 5% or less. A presumed probability of 50-50 was used (50% chance the desired outcome would occur,





and 50% chance the desired outcome would not occur). Using the formula above and assuming a 90% confidence level, a table was created to indicate the number of cases required for review per identified population. A comparative table for a 95% confidence level was also used to determine the number of cases to sample to achieve the 95% confidence level as shown above in Figure 2.

To ensure that a case was included in the review for a single category only, each category sample was run separately from the others, except for Disbursement. Cases selected for the first category sample were not considered in the next category sample and so forth until the final category sample was pulled. This process resulted in a reduction of the total available population for the subsequent categories; therefore, the population sizes for most categories do not reflect the actual number of cases.

B. State Self-Assessment Coordination

Program Compliance Criteria

Oregon continues to use the March 1998 Self-Assessment Core Workgroup Report model to conduct case assessments. With the implementation of Oregon's child support system, Origin, all cases receive an automated review, and all cases receiving an error from Origin go through an additional review conducted by analysts in seven of the categories. The technical team identified an issue in the Origin review for the establishment category. Therefore, analysts reviewed all sample cases this year for the establishment category.

To establish an efficiency rate, Oregon used the formula specified in the Self-Assessment Core Workgroup Report:

Efficiency [Cases with appropriate action/Total number of cases with required action]

Case Review - General Rules

The assessment is performance-based, focusing on outcomes rather than processes. Each category is reviewed for compliance with corresponding federal regulations established in 45 CFR 308. The following relevant definitions apply:

- An *outcome* is the result of case action within a specific category.
- An *action* is an appropriate outcome within a specific category.
- An *error* is either a failure to take a required action or taking an incorrect action within a specific category.

The assessment of a case is based on four general case-evaluation rules:

- A case is reviewed only on the criteria for which it was sampled.
- A case receives only one action or error in the category for which it is sampled.
- Compliance timeframes for initiating reciprocal and responding reciprocal interstate cases are reviewed separately.
- If an outcome is pending or not successfully completed due to the timeframe expiring after the review period, the previous required action is evaluated.

Cases are initially screened for possible exclusion. A case is excluded if:

- No action was necessary during the review period.
- The action was completed prior to, or after, the review period.
- There was insufficient time to take the last required action, and no other actions were previously required.
- The case qualified for closure pursuant to 45 CFR 303.11, and it was not in the sample for compliance with case closure criteria.
- Other reasons relevant to unique criteria exist.

Concur Case Review Process

Oregon implemented the Concur Case Review Process during the 2004 Self-Assessment as an enhancement to the case review process. This process is used every year, providing many benefits to the Oregon Child Support Program:

- 1. The program efficiency rating increases when the field provide sufficient documentation validating a case action that was previously considered not in compliance.
- 2. Program confidence in the reported outcomes improves because of field participation in the determination of the outcomes.
- 3. Program awareness of the review categories and related criteria is increased.
- 4. The understanding of federal requirements is increased in both the Division of Child Support and District Attorney offices.

Prior to field office review, the system reviews the cases and determines whether the outcome qualifies as an "action" (appropriate action taken) or an "error" (failed to take required action or system unable to evaluate). A research analyst reviews the error cases to determine the last required action and whether the outcome can be changed to an action. Cases still labeled as errors after research analyst review are referred to their respective field office representatives for additional review. The representatives either concur or do not concur with the analyst's determination and provide additional information to support their determination.

The analysts consider any additional information provided by the field office and make a final determination regarding compliance. This determination considers the applicable federal regulations associated with each of the review categories. The outcome of the determination is shared with the respective field office representatives. The outcomes are then finalized, and the report is published and submitted to OCSS.

In response to the Concur Case Review Process this year, nine offices out of twenty-eight did not concur with analyst findings. Based on information provided by workers in the field offices, analysts were able to determine that four of the offices had sufficient documentation to reverse the error findings for twelve of the cases. This represents 3.58% of cases reviewed in the concur process. This process allows analysts to educate on federal regulations as well as review for updates to procedures to assist staff in improving compliance.

C. Universe Definition and Sampling Procedures

To obtain focused samples, categories were broadly defined to avoid the systematic exclusion of a population subset. Separate populations of cases were identified for each category based on the specified definitions. The population samples included cases that were excluded due to definition ambiguity or because of human error during data entry. For this reason, an exclusion rate was anticipated within each sample. Sample sizes were based on the number of cases required to achieve 95% confidence level, ensuring that the final review resulted in the minimum sample size required for a 90% confidence level.

D. Summary of Methodology

Table 3 provides descriptions of the unique sample data extracted for each criterion. The population size varies each year and determines the minimum number of cases needed to achieve the 90% confidence level. For each criterion, the program exceeded the minimum number of cases required.

			# Cases to			
			Achieve			
		Case	90% Confidence	Sample	System	Manually
Criterion	Sample Data Description	Population	Interval	Size	Reviewed	Reviewed
Case Closure	Any case qualifying for closure or closed during the review period.	38,824	268	433	0	433
Establishment	Any case in which a new administrative paternity-only order or support order was needed, in process, or finalized during the review period.	11,621	263	341	0	341
Enforcement	Any case with an ongoing income withholding in place. Also includes cases where a new or repeated enforcement action was required during the review period.	94,144	269	447	447	144
Disbursement	Any case with a payment during the review period. Analysis is conducted on the last payment received for each case.	81,962* *Represents only the last disbursement per case	269* *Based on population of the last disbursement per case	81,962	81,962	0
Medical	Any case with a support order established or modified during the review period.	5,449	257	385	385	139
Review & Adjustment (Modification)	Any case with an order that can be modified. Also includes cases with a modification action initiated no more than 6 months prior to the review period, or the modification was finalized or denied during the review period.	7,183	260	411	411	83
Intergovernmental	Any case coded with a responding or initiating state Federal Information Processing Standards (FIPS) code other than Oregon during the review period. Also includes any case with a possible need for an initiating reciprocal.	22,880	266	778	778	510
Expedited Process	Any case with an administrative support order established during the review period.	2,044	238	384	384	83

Table	3 - 2023	Self-Assessment	Sample	Details
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III. Self-Assessment Results

A. Introduction to Self-Assessment Results

Federal regulations require each state to meet a minimum compliance benchmark of 75% for each required program category except for Expedited Processes (12-month) and Case Closure. These two program categories must meet a minimum compliance benchmark of 90%. Oregon surpassed the required federal compliance benchmarks in seven of the eight program areas for the review period October 1, 2022, through September 30, 2023.

B. Self-Assessment Results

Table 4 – Self-Assessment Results

Criterion	Cases Where Required Activity Occurred or Should Have Occurred	Cases Where Required Activity Occurred within Timeframe	Efficiency Rate (Confidence Level of Sample)	Federal Minimum Standard	Previous Year's Efficiency Rates
Case Closure	433	411	94.92%	90%	98.90%
Establishment	341	178	52.20%	75%	100%
Enforcement	447	434	97.09%	75%	98.67%
Disbursement	81,962	81,442	99.37%	75%	99.37%
Medical	385	385	100%	75%	99.75%
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Expedited Process 6-month	384	372	96.88%	75%	92.33%
Expedited Process 12-month	384	383	99.74%	90%	97.63%
TOTAL:	85,525				

C. Discussion of Self-Assessment Results

The following section provides a detailed breakdown by review category of the population, sample size, cases reviewed, and errors found during the 2023 Self-Assessment.

It is important to consider that the error breakdown shows the percentage of errors found in the sampling reviewed. When the percentage of errors is compared to the total population of cases, the resulting figure represents the number of errors that would reasonably be found if the entire program caseload had been reviewed. For example, if the case closure category had a 96% efficiency rate, using the error rate of 4% and multiplying it by the total population of closed cases within the review period (39,162*0.04), there is a reasonable potential for 1,566 total case closure errors within the program caseload.

Case Closure Review

Table 5 – 2023 Case Closure Efficiency

2023 Case Closure Efficiency		94.92%
Federal Benchmark		90%
Population Size		38,824
Cases Sampled		433
Cases Reviewed		433
Cases Met Federal Benchmark		411
Error Description	CFR Reference	Errors
Did not send closure notice to parent/person who receives support	45 CFR 303.11(d)(4)	1
Did not qualify for closure	45 CFR 303.11(b)(1)-(12)	15
Did not interview custodial parent about unknown father	45 CFR 303.11(b)(6)(iv)	1
Did not wait 60 calendar days to close case after sending closure notice	45 CFR 303.11(d)(4)	5
	Total Case Closure Errors	22

Oregon experienced a decrease of 3.98 percentage points in efficiency from last year but continues to outperform the required 90% federal benchmark for the case closure category. "Did not qualify for closure" made up 68.18% of the errors in this category. The federal self-assessment reviews have identified a need for educating staff on business process to qualify for closure and how Origin's closure automation functions. Cases reviewed that did not wait 60 calendar days to close made up 22.73% of errors and were caused by not selecting the correct closure reason which triggers automated closure.

Establishment Review

Table 6 – 2023 Establishment Efficiency

2023 Establishment Efficiency		52.20%
Federal Benchmark		75%
Population Size		11,621
Cases Sampled		341
Cases Reviewed		341
Cases Met Federal Benchmark		178
Error Description	CFR Reference	Errors
Did not complete case opening procedures within the required 20 calendar days	45 CFR 303.2(b)(1)	114
Did not complete locate activities within the required 75 or 90 calendar days, or immediately upon receiving new locate information	45 CFR 303.3(b)(3) and (5)	28
Did not complete service within the required 90 calendar days from date Parent Who Pays Support located, or unsuccessful service (diligent effort) was not documented on the case	45 CFR 303.4(d)	21
	Total Establishment Errors	163

Oregon did not meet the federal benchmark for the establishment category. Referrals received from the Oregon Department of Human Services (ODHS) no longer provide the non-custodial parents' relevant identifiers, address information, and in most cases are referred with an "unknown name." This information is essential for Oregon's automated system to function placing the burden of locating the parent on staff using manual processes. These cases made up 69.94% of the errors in case opening.

Errors completing locate activities made up 17.18% of cases in the establishment category. The defect in Origin's automated locate that contributed to these errors has since been resolved. The remaining 12.88% of errors were due to not completing service within the 90 calendar days.

Enforcement Review

Table 7 – 2023 Enforcement Efficiency

2023 Enforcement Efficiency		97.09%
Federal Benchmark		75%
Population Size		94,144
Cases Sampled		447
Cases Reviewed		447
Cases Met Federal Benchmark		434
Error Description	CFR Reference	Errors
Case qualified but was not submitted for federal or state tax offset	45 CFR 303.6(c)(2)	5
Did not complete locate activities within the required 75 calendar days or 90 calendar days, or immediately upon receiving new locate information	45 CFR 303.3(b)(3) and (5)	8
	Total Enforcement Errors	13

Oregon experienced a 1.58% decrease in efficiency for the enforcement category compared to the prior fiscal year but remains well above the benchmark at 97.09%. Origin's automated locate issue has been corrected to eliminate errors caused by not completing locate activities. There were five cases identified that qualified but were not submitted for state tax offset.

Disbursement Review

Table 8 – 2023 Disbursement Efficiency

	Total Disbursement Errors	520
Did not disburse collection within two working days after receipt	45 CFR 308.2(d)(1)	520
Error Description	CFR Reference	Errors
Cases Met Federal Benchmark		81,442
Cases Reviewed		81,962
Cases Sampled		81,962
Population Size		81,962
Federal Benchmark		75%
2023 Disbursement Efficiency		99.37%

Oregon's efficiency in the disbursement category remains the same as last federal fiscal year. The program has maintained an efficiency of 99% for the last five years, with the exception of 2021 where the program dipped slightly to 98.70%. Oregon remains well above the required 75% efficiency rate for this category.

Medical Review

Table 9 – 2023 Medical Efficiency

2023 Medical Efficiency	100%
Federal Benchmark	75%
Population Size	5,449
Cases Sampled	385
Cases Reviewed	385
Cases Met Federal Benchmark	385
	Total Medical Errors 0

For the third time, Oregon has achieved a 100% efficiency in the medical category. Staff can be commended for their due diligence in gathering participants' health care coverage, including this information in the guideline calculator, and in ensuring at least one parent is ordered to provide health care coverage. Oregon's automated system, Origin, is generating the national medical support notice to employers when appropriate.

Review and Adjustment (Modification) Review

Table 10 – 2023 Review and Adjustment (Modification) Efficiency

2023 Review and Adjustment (Modification) Efficiency		96.59%
Federal Benchmark		75%
Population Size		7,183
Cases Sampled		411
Cases Reviewed		411
Cases Met Federal Benchmark		397
Error Description	CFR Reference	Errors
Modification not completed within required timeframe	45 CFR 303.8(e)	13
Did not complete locate activities within the required 75 or 90 calendar days, or immediately upon receiving new locate information	45 CFR 303.3(b)(3) and (5)	1
	Total Modification Errors	s 14

Oregon continues to surpass the 75% benchmark in the review and adjustment (modification) category and accomplished a slight increase in efficiency compared to last year. All but one identified errors were related to not completing a modification within 180 days. The increase in performance illustrates the priority the program places on modifications to ensure families have just and equitable child support orders.

Intergovernmental Review

Table 11 – 2023 Intergovernmental Efficiency

2023 Intergovernmental Efficiency		87.79%
Federal Benchmark		75%
Population Size		22,880
Cases Sampled		778
Cases Reviewed		778
Cases Met Federal Benchmark		683
Error Description – Initiating Intergovernmental	CFR Reference	Errors
Did not notify responding state of case closure and provide reason for closure within required timeframe	45 CFR 303.7(c)(11)	32
Did not provide requested information to the responding state within 30 calendar days	45 CFR 303.7(c)(6)	2
Did not refer case to responding jurisdiction within 20 calendar days	45 CFR 303.7(c)(4)(ii)	28
Total Initiat	ing Intergovernmental Errors	62
Error Description – Responding Intergovernmental	CFR Reference	Errors
Did not close case or withdraw IWO within required timeframe	45 CFR 303.7(d)(9)	26
After receiving new responding reciprocal request, the Central Registry did not forward case and provide acknowledgement to initiating state within the required 10 working days	45 CFR 303.7(b)(2)	1
Did not notify initiating jurisdiction of new information received within required timeframe	45 CFR 303.7(a)(7)	6
Total Respond	ing Intergovernmental Errors	33
Тс	tal Intergovernmental Errors	95

Oregon's efficiency rate remains above the benchmark in the intergovernmental category but experienced a drop of 8.69 percentage points in efficiency compared to last year. The technical team is working to correct a system defect that should address the 33.68% of errors of not notifying the responding jurisdiction of case closure and the reason for closure. However, further investigation is necessary to determine if a full change request is required to enhance the current functionality. It is necessary to refer a case to the responding jurisdiction within 20 days after determining a two-state remedy, and collecting all required documentation made up 29.47% of errors. Closing the case or withdrawing an income withholding within 20 days made up 27.37% of errors.

Expedited Process Review 6-month

Table 12 – 2023 Expedited Process 6-month Efficiency

2023 Expedited Process – 6-month Efficiency		96.88%
Federal Benchmark		75%
Population Size		2,044
Cases Sampled		384
Cases Reviewed		384
Cases Met Federal Benchmark		372
Error Description	CFR Reference	Errors
6-month federal timeframe to establish paternity and to establish, modify, and enforce support orders	45 CFR 303.101(b)(2)(i)	12
r	Manth Fundited Duscass Funder	10

6-Month Expedited Process Errors 12

The efficiency rate for the 6-month expedited process category increased this year by 4.55 percentage points. During the pandemic, Oregon experienced declines in this category and has recovered to almost meet the highest rate, which occurred in 2017.



Figure 3 – Expedited Process 6-Month Efficiency

Expedited Process Review 12-month

Table 13 – 2023 Expedited Process 12-month Efficiency

2023 Expedited Process – 12-month Efficiency		99.74%
Federal Benchmark		90%
Population Size		2.044
Cases Sampled		384
Cases Reviewed		384
Cases Met Federal Benchmark		383
Error Description	CFR Reference	Errors
12-month federal timeframe to establish paternity and to establish modify, and enforce support orders	n, 45 CFR 303.101(b)(2)(i)	1
1	2-Month Expedited Process Errors	1

Oregon also increased its efficiency rate for the expedited process 12-month category by 2.11% after declines during the pandamic. There was one error that was unavoidable due to a private action filed in circuit court during the administrative establishment process.



Figure 4 – Expedited Process 12-Month Efficiency

The charts and figures in this section indicate that actions were required on 3,197 cases, excluding the disbursement category, within the review period. There were 320 errors across these categories, of which 163 were in the establishment category. Based on the ratio of errors to cases requiring actions, for federal fiscal year 2023, Oregon experienced a 7.40 percentage point increase in overall errors compared to last year (2022 = 2.61%). If the establishment category is excluded from the calculation, Oregon has improved its errors by a 0.43 percentage point decrease (2022 = 5.93%).

The automation in Origin provides benefits for staff by freeing up more time to engage with the families of Oregon and provide services. If the automation is not performing as expected, this negatively affects performance. Determining whether manual processes can be implemented during defect resolution will reduce negative impact. The issue with automated locate made up 11.56% of the total errors for FFY 2023. Providing direction to staff to use manual resources during the resolution period is a lesson learned as Oregon continues to adopt to changes Origin brings to business processes.

D. Summary of Self-Assessment Results

Oregon surpassed the required federal compliance benchmarks in seven of the eight required program areas. Three categories showed an increase in efficiency from the prior review period, three categories decreased, and one remained the same. Prior years of program efficiency rates by FSA category are displayed below in Table 14.

Table 14 – Self-Assessment Results Over Five Years

Criterion	2019	2020	2021	2022	2023	Percentage Point Change from Previous Year
Case Closure	96.81%	99.52%	99.56%	98.90%	94.92%	-3.98%
Establishment	100%	100%	100%	100%	52.20%	-47.80%
Enforcement	81.19%	99.78%	99.34%	98.67%	97.09%	-1.58%
Disbursement	99.68%	99.41%	98.70%	99.37%	99.37%	0
Medical	100%	99.76%	100%	99.75%	100%	0.25%
Review & Adjustment (Modification)	98.98%	98.58%	98.83%	95.75%	96.59%	0.84%
Intergovernmental	97.26%	99.22%	96.41%	96.37%	87.79%	-8.58%
Expedited Process 6-month	96.94%	91.82%	90.96%	92.33%	96.88%	4.55%
Expedited Process 12-month	100%	99.74%	98.71%	97.63%	99.74%	2.11%

The most significant decrease was in the establishment category. The establishment category reviews case opening requirements, proposed order service requirements, locate activities, and final orders. An issue was identified that the sample was limiting review for only final orders. A manual workaround has been implemented until this issue is resolved. The total population for the establishment category was extracted and a manual random and statistically correct sample obtained. All cases were manually reviewed. Seventy percent of the errors in the establishment category were in case opening requirements. The Self-Assessment Analysis and Corrective Action Plan section in this report provides more detail.

The second largest decease in efficiency is in the intergovernmental category. Although Oregon surpassed the federal requirement benchmark, an 8.69 percentage point decline from last year is cause for evaluation. Figure 5 below illustrates the increase in error rate for the intergovernmental category.

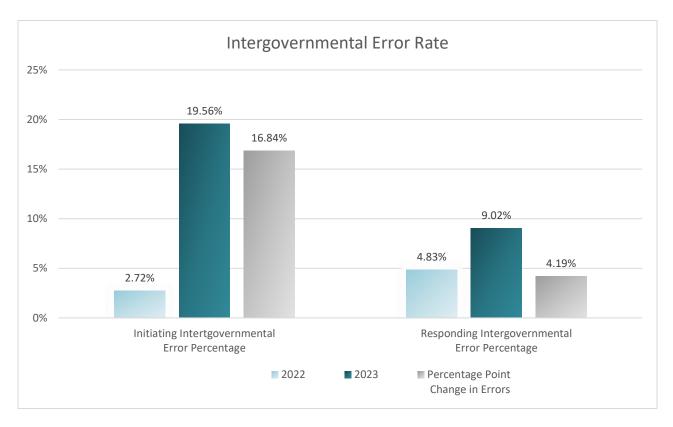


Figure 5 – Intergovernmental Error Rate: 2022-2023

There is an increase of 16.84% percentage point of errors in the initiating intergovernmental category. Not notifying the responding state of case closure and the reason for closure within the required timeframe made up 54.46% of the errors in the initiating intergovernmental category. The number of errors increased from 6 cases in 2022 to 32 in 2023. A fix in automation and business process has been identified and is being worked on by the technical team. Not referring cases to the responding jurisdiction within 20 calendar days made up 45.16% of the errors. This type of error has increased by 26.98 percentage points from last year and is a manual process.

There is an increase of 4.19% of errors in the responding intergovernmental category. Cases that did not close or withdraw the income withholding within 10 business days are 78.79% of errors in the responding reciprocal category. This type of error has increased 10.37% since last federal fiscal year and is caused by automated as well as manual processes.

Oregon's performance in the medical category received a perfect 100% efficiency and maintained or increased slightly in the disbursement, medical, and review and adjust (modification) categories.

The expedited process performance has increased considerably with a 2.11 percentage point increase in the 12-month category and a 4.55 percentage point increase in the 6-month category. Engagement with participants obtaining serviceable addresses is attributed to this increase.

IV. Self-Assessment Analysis and Corrective Action Plan

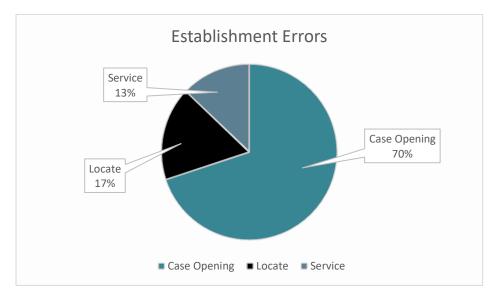
A. Introduction to Self-Assessment Analysis and Corrective Action Plan

Oregon did not meet the 75% federal benchmark in the establishment category during this federal fiscal year. Only 52.20% of cases met the efficiency rate. This category requires review of any case in which a new administrative paternity-only order or support order was needed, in process, or finalized during the review period. The review looks at federal requirements for the last action within the federal fiscal year. The last action can be a finalized order, that the case qualifies for service or service was attempted/completed, or case-opening activities.

B. Analysis of Errors

The total case population for the establishment category was 11,621. The sample size was 341 cases, of which 163 (47.80%) were classified as error. There are three error types within the establishment category: locate, service, and opening. The breakdown of errors is as follows and in Figure 6:

- Locate 28 (17%)
- Service 21 (13%)
- Case Opening 114 (70%)





C. Discussion of Reasons

Seventeen percent (28 cases) of the errors in the establishment category fell under the error type "Did not complete locate activities within the required 75 or 90 calendar days, or immediately upon receiving new locate information." Origin's automated locate functionality, which requests information from a partner agency, was stuck in pending status and did not reach the partner. This was identified as a defect. Review of these cases identified that manual resources were not being utilized in lieu of the automation locate defect.

Thirteen percent (21 cases) of the errors in the establishment category fell under the error type "Did not complete service within the required 90 calendar days from date Parent Who Pays Support located, or unsuccessful service (diligent effort) was not documented on the case." Review of these cases identified

that qualifying cases were not prioritized, the proposed order was not issued, and the timeline for service was not met.

Seventy percent (114 cases) of the errors in the establishment category fell under the error type "Did not complete case opening procedures within the required 20 calendar days." Review of these cases indicated 3.51% did not have a case created within 20 days, and 96.49% did not solicit necessary information from the custodial parent.

D. Corrective Action Plan

Table 15 – Corrective Action Plan for Establishment Category

Error	Action Plan for Estar	Action	Current				
Description	Cause of Error	Completed	Actions	Future Actions	Timeline		
Error Type - Locate							
Automated locate request did not process and was stuck in pending submission. Other resources were not initiated.	Code was modified when resolving a different defect.	Code has been corrected and tested.		Planned release over five days.	Production release scheduled for April 2024.		
		Error Type	e - Service				
Did not complete service of process or document unsuccessful service within 90 days.	Delays sending discovery, not prioritizing tasks, or analyzing participant addresses and breaks in business process.	Identified processes with need for review. Discussed with relevant managers who have oversight of Field Services managers to raise awareness of issue.	Assessing current priorities and determining which tasks alert for service and establishing timelines. Examining short- and long-term changes. Meetings with subject matter experts, Field Services managers, and workgroup to discuss action and remedies. Working with Education team for targeted training resources. Field Services managers and Chief will provide oversight and ensure completion of necessary actions.	Review with Field Services managers long- term changes for the workflow process and finalize process. Request system changes to streamline the IV- A referral process. Field Services managers to provide oversight to ensure cases are processed timely.	Proposed completion date for current actions by April 2024 and for noted future actions by May 2024.		

Error Description	Cause of Error	Action Completed	Current Actions	Future Actions	Timeline			
Error Type – Case Opening								
Cases created after a holiday did not meet the 20- day timeframe. Oregon is not	Case creation batches are not run on the weekend or a holiday. Cases assign to	Issue identified and a Service Request is created. Completed initial	Technical team is investigating options to remedy.	The Unknown	June 2024 Estimated			
soliciting necessary and relevant information from the custodial parent within 20 days of referral. Cases referred by IV-A without address or identifiers for the paying parent.	locator staff to find the non- custodial parent. Reassignment to case manager in Field Services is after 20-day timeline or discovery not sent timely.	review of process, identified gaps and priority tasks. Implemented immediate change to workflow. Overtime was employed and tasks reduced from 1850+ to 124 between 2/12/24 and 3/18/24.		Parents Team will send a discovery request to the parent who receives support when paternity is at issue at the time the CM041 task is worked. When demographic information for the paying party is obtained, the case reassigns to the Field Services office and generates an ES012 task. The case manager will review for a response and take next steps in moving the case forward.	completion of backlog is March 2024.			

E. Discussion of Corrective Action Plan

Errors in the establishment category identified a need to review business processes and case assignment, prioritization of tasks, training needs, and limitations and challenges that staff experience. One of these challenges is the lack of phone numbers for both custodial and non-custodial parents, which is essential to foster a relationship. Oregon is working with the IV-A program in the Oregon Department of Human Services (ODHS) to obtain this information as well as looking at other resources. Additionally, in-depth review of the errors provided on opportunity to reevaluate the existing defect and its prioritization for resolution.

F. Summary of Analysis and Corrective Action Plan

While some short-term remedies have been implemented and staff is working on the backlog, Oregon is developing a long-term plan to improve workflows and to provide additional training to staff. Managers and research analysts will monitor and track progress of the remediation activities listed above.

V. Conclusion

Oregon surpassed the required federal compliance benchmarks in all areas except the establishment category, excelled in improving the expedited process category, and achieved 100% for a third time in the medical category. Now that the automated system, Origin, is implemented and beyond the first couple of years of operation and maintenance, and beyond the impacts of the pandemic, the Oregon Child Support Program can assess business processes that were affected by the change in information received in IV-A referrals and changes with automation.

VI. The Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average four hours per response, including the time for reviewing instructions, gathering, and maintaining the data needed, and reviewing the collection of information.

VII. Attachments

A. Appendix 1 - Tables and Figures

- File size: 921 KB
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