



Oregon Department of Justice

Oregon Child Support Program

Supporting Parents to Support Children

Self-Assessment Report



South Sister from Sparks Lake in Deschutes County, Oregon

Federal Fiscal Year 2024

Prepared by the Research Analysts
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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 26th annual self-assessment. It covers the 12-month period from October 1, 2023, through September 30, 2024. 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 18 county District Attorney (DA) offices to assist in providing child support services (as of August 1, 2024, the number is 17). 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, 2024.

Table 1 – Program Information

Caseload Size		Types of Cases		Program Staffing	
DCS Caseload	98,764	Current Assistance	16,760	DCS Employees	538
DA Caseload	28,695	Former Assistance	72,516	DA Employees	133
Program Caseload	127,459	Never Assistance	38,183	Program Employees	671

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	447	435	97.32%	90%	94.92%
Establishment	263	194	73.76%	75%	52.20%
Enforcement	440	438	99.55%	75%	97.09%
Disbursement	77,825	77,409	99.47%	75%	99.37%
Medical	398	397	99.75%	75%	100%
Review & Adjustment	418	405	96.89%	75%	96.59%
Intergovernmental	772	751	97.28%	75%	87.79%
Expedited Process 6-month	386	377	97.67%	75%	96.88%
Expedited Process 12-month	386	386	100%	90%	99.74%
TOTAL:	81,335				

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.

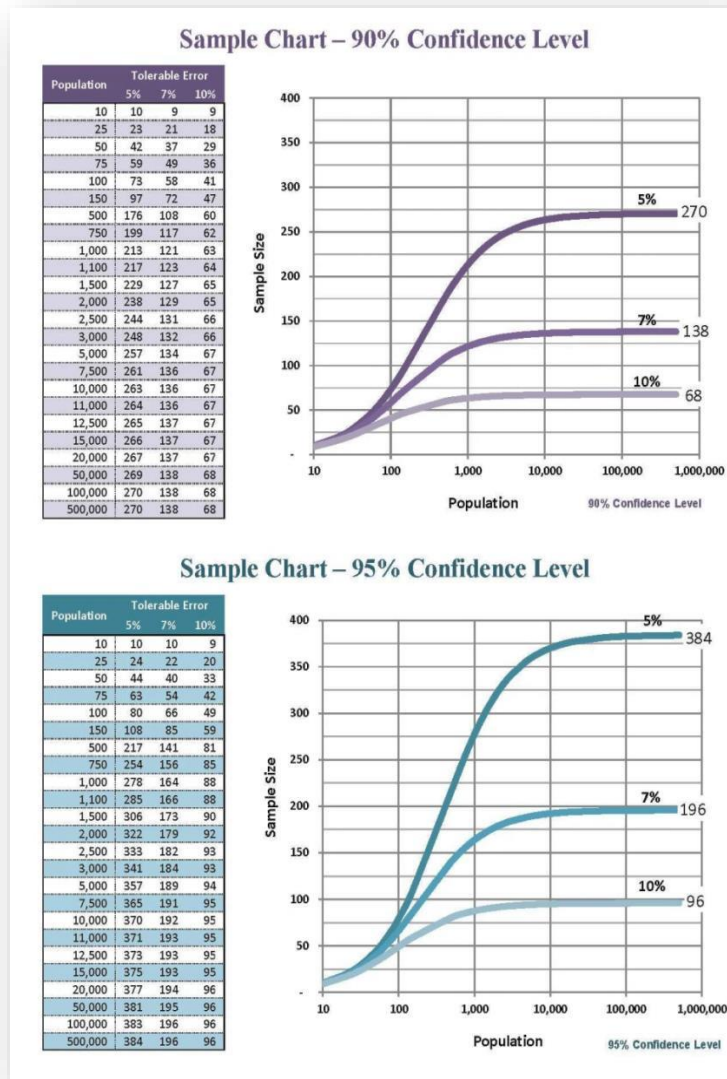


Figure 2 – Confidence Level Chart

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 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 research analysts reviewed all sample cases this year in the establishment category to ensure the technical issue identified last year remains resolved.

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. The business analyst team participated in this process when Oregon upgraded its computer system, which includes automation of actions that are reviewed. This process is used every year, providing many benefits to the Oregon Child Support Program:

1. The program efficiency rating increases when the field offices 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 office 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.
5. Identifies system errors that the business analysts can prioritize and resolve.

Prior to field office (which includes DA offices) and technical services review, the system analyzes 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 or the business analyst team 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 or the business analyst. The outcomes are then finalized, and the report is published and submitted to OCSS.

In response to the Concur Case Review Process this year, 8 of 24 offices did not concur with analyst findings. Of the errors identified for the concur process, 65% went to field offices and 35% to business analysts. Based on information provided during the concur process, the research analysts were able to determine that 53% of reviews had sufficient documentation to reverse the error findings. Business analysts determined there was an issue with how the system tracked certifying state tax offsets. They verified all state tax offsets were certified and consequently errors were changed to actions. This resulted in 85% of the errors reviewed by business analysts being changed to actions.

The concur process allows for engaging the expertise of employees who are doing the work to help the research analysts refine the review criteria.

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.

Table 3 –2024 Self-Assessment Sample Details

Criterion	Sample Data Description	Case Population	# Cases to Achieve 90% Confidence Interval	Sample Size	System Reviewed	Manually Reviewed
Case Closure	Any case qualifying for closure or closed during the review period.	37,608	268	447	447	83
Establishment	Any case in which a new administrative paternity-only order or support order was needed, in process, or finalized during the review period.	10,200	263	263	263	263
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.	90,447	269	440	440	137
Disbursement	Any case with a payment during the review period. Analysis is conducted on the last payment received for each case.	77,825* *Represents only the last disbursement per case	269* *Based on population of last disbursement per case	77,825	77,825	0
Medical	Any case with a support order established or modified during the review period.	5,737	257	398	398	112
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.	7,886	261	418	418	60
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.	22,458	266	772	772	207
Expedited Process	Any case with an administrative support order established during the review period.	2,060	238	386	386	83

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, 2023, through September 30, 2024.

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	447	435	97.32%	90%	94.92%
Establishment	263	194	73.76%	75%	52.50%
Enforcement	440	438	99.55%	75%	97.09%
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Expedited Process 12-month	386	386	100%	90%	99.74%
TOTAL:	81,335				

C. Discussion of Self-Assessment Results

The following section looks at different categories to see how well cases were managed in 2024. It compares the efficiency rate concluded from the sample to the federal benchmarks.

Oregon utilized a 95% confidence interval for the sample selection except for the establishment category where a 90% confidence interval was used because of necessary case exclusions due to coding. Using a sample selection with a smaller and randomized selection of cases provides the means to conduct a thorough case review. Confidence interval demonstrates 95% (or 90%) confidence that the sample is representative of the true population. That means if every case in the total population was reviewed, the efficiency rate result would be the same as the sample selection.

It is important to note that the error count in the sample is not the error count in the total population. The true error count in the total category population of cases can be found by multiplying the case category's error rate found in the sample by the number of cases in the category's total population.

Case Closure Review

Table 5 – 2024 Case Closure Efficiency

2024 Case Closure Efficiency		97.32%
Federal Benchmark		90%
Population Size		37,608
Cases Sampled		447
Cases Reviewed		447
Cases Met Federal Benchmark		435
Error Description	CFR Reference	Errors
Did not send closure notice to parent/person who receives support	45 CFR 303.11(d)(1)	1
Did not qualify for closure	45 CFR 303.11(b)(1)-(21)	9
Did not make a good faith effort and waited to send the closure letter an unreasonable number of days before or after the first or last attempt to contact the unreachable Parent/Person Who Receives Support (or their trustee or personal representative)	45 CFR 303.11(b)(15)	1
Did not wait 60 calendar days to close case after sending closure notice	45 CFR 303.11(d)(1)	1
Total Case Closure Errors		12

Oregon has an increase of 2 percentage points in efficiency from last federal fiscal year and outperforms the required 90% federal benchmark by 7 percentage points. Cases that did not qualify for closure made up 75% of the errors. Of these, 44% were inappropriately closed for non-cooperation. Case reviews indicate a misperception of qualifiers to close a case for this reason and lack of understanding of continuation of service when a participant no longer is on state assistance.

Establishment Review

Table 6 – 2024 Establishment Efficiency

2024 Establishment Efficiency		73.76%
Federal Benchmark		75%
Population Size		10,200
Cases Sampled		263
Cases Reviewed		263
Cases Met Federal Benchmark		194
Error Description	CFR Reference	Errors
Did not complete case opening procedures within the required 20 calendar days	45 CFR 303.2(b)(1)	40
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)	2
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)	27
Total Establishment Errors		69

Oregon increased efficiency by 21% percentage points but failed to meet the federal benchmark by a little more than 1 percentage point for the establishment category. Not meeting the case opening requirements within 20 calendar days made up 58% of the errors. Case reviews verify that 83% of these errors were made prior to Oregon implementing the FFY 2023 corrective action plan. Locate errors were

reduced by 93% when comparing the number of errors from FFY 2023. Service completed within the 90 calendar days made up 39% of the errors for this federal fiscal year. When comparing to FFY 2023, this error increased by 22%.

Enforcement Review

Table 7 – 2024 Enforcement Efficiency

2024 Enforcement Efficiency		99.55%
Federal Benchmark		75%
Population Size		90,447
Cases Sampled		440
Cases Reviewed		440
Cases Met Federal Benchmark		438
Error Description	CFR Reference	Errors
An enforcement action was necessary (that did not require service) but it was not completed within the required 30 calendar days.	45 CFR 303.6(c)(2)	2
Total Enforcement Errors		2

Oregon experienced a 2-percentage point increase in efficiency for the enforcement category compared to the prior fiscal year and remains well above the benchmark at 99.55%. There were two cases identified that qualified for license suspension where action was not taken. There were no errors in submitting for federal or state offset and completing locate activities. When comparing the total number of errors in the enforcement category from FFY 2023 to FFY 2024, the program reduced the errors by 85%.

Disbursement Review

Table 8 – 2024 Disbursement Efficiency

2024 Disbursement Efficiency		99.47%
Federal Benchmark		75%
Population Size		77,825
Cases Sampled		77,825
Cases Reviewed		77,825
Cases Met Federal Benchmark		77,409
Error Description	CFR Reference	Errors
Did not disburse collection within two working days after receipt	45 CFR 308.2(d)(1)	416
Total Disbursement Errors		416

Oregon’s efficiency in the disbursement category increased slightly from last federal fiscal year. The program continues to maintain an efficiency of 99% for the last five years, except for 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 – 2024 Medical Efficiency

2024 Medical Efficiency		99.75%
Federal Benchmark		75%
Population Size		5,737
Cases Sampled		398
Cases Reviewed		398
Cases Met Federal Benchmark		397
Error Description	CFR Reference	Errors
National Medical Support Notice (NMSN) not sent to providing party's new employer.	45 CFR 303.32(c)(1)	1
Total Medical Errors		1

Oregon has stayed between a 99.75% and 100% efficiency rate since 2019 in the medical category. Employees prioritize meeting all requirements when establishing or modifying an order. Origin's automated system generates the National Medical Support Notice. There was one anomaly in the sample selection where this action did not occur, which caused a 0.25 percentage point decrease when comparing to the 100% efficiency from FFY 2023.

Review and Adjustment (Modification) Review

Table 10 – 2024 Review and Adjustment (Modification) Efficiency

2024 Review and Adjustment (Modification) Efficiency		96.89%
Federal Benchmark		75%
Population Size		7,886
Cases Sampled		418
Cases Reviewed		418
Cases Met Federal Benchmark		405
Error Description	CFR Reference	Errors
Modification not completed within required timeframe	45 CFR 303.8(e)	13
Total Modification Errors		13

Oregon had a slight increase in efficiency compared to last federal fiscal year by 0.3 percentage points and continues to surpass the 75% benchmark in the review and adjustment (modification) category. All identified errors were related to not completing a modification within 180 days. Twenty-three percent of the cases identified with this error had to be referred to the Office of Administrative Hearings, which impacts the timing for completing the modification.

Intergovernmental Review

Table 11 – 2024 Intergovernmental Efficiency

2024 Intergovernmental Efficiency		97.28%
Federal Benchmark		75%
Population Size		22,458
Cases Sampled		772
Cases Reviewed		772
Cases Met Federal Benchmark		751
Error Description – Initiating Intergovernmental		CFR Reference
Did not notify responding state of case closure and provide reason for closure within required timeframe		45 CFR 303.7(c)(11)
		9
Total Initiating Intergovernmental Errors		9
Error Description – Responding Intergovernmental		CFR Reference
Did not close case or withdraw IWO within required timeframe		45 CFR 303.7(d)(9)
		9
Did not notify initiating jurisdiction of new information received within required timeframe		45 CFR 303.7(a)(7)
		3
Total Responding Intergovernmental Errors		12
Total Intergovernmental Errors		21

Oregon’s efficiency rate in the intergovernmental category increased by 10 percentage points when compared to last federal fiscal year. The number of errors for notifying the responding state of case closure decreased from FFY 2023. Oregon is working on a change to an automatic CSENet code that is contributing to this error as well as updates to training and procedures to assist employees in understanding federal requirements and improving this error efficiency rate. No reviews were identified that had an error in referring a case within 20 calendar days or providing requested information within 30 calendar days. Last year, the program made changes to when employees determine that a two-state action is required. The results of this change in the sample selection this federal fiscal year confirm meeting the 20-day federal compliance. Oregon also increased efficiency in closing the responding case within 10 days by 65% when comparing errors from FFY 2023. Review of business processes and a task prioritization was implemented last year to improve this error efficiency. The efficiency for providing new information increased by 50%. No errors were found in forwarding and providing acknowledgment to the initiating state by Oregon’s Central Registry. Table 15 and Figure 5 below illustrate the decrease in error type count for the intergovernmental category.

Table 12 and Figure 3 below provide insight into the error count improvements within the intergovernmental category from FFY 2023 to 2024. The table categorizes six different error types and displays the count of errors within each category across the two years. The graph illustrates the percentage difference in error counts for error categories that were present in both FFY 2023 and 2024. This highlights the reduction in the error count compared to the prior year. The error types not included in the graph had no recorded errors in 2024. Together, the table and graph demonstrate the overall increase in efficiency and reduction of errors over the 2-year timeframe.

Table 12 - Intergovernmental Error Description

CFR	Intergovernmental Perspective	Error Description	FFY 2023	FFY 2024
45 CFR 303.7(c)(11)	Initiating	Did not notify responding state of case closure and provide reason for closure within required timeframe	32	9
45 CFR 303.7(c)(6)	Initiating	Did not provide requested information to the responding state within 30 calendar days	2	0
45 CFR 303.7(c)(4)(ii)	Initiating	Did not refer case to responding jurisdiction within 20 calendar days	28	0
45 CFR 303.7(d)(9)	Responding	Did not close case or withdraw IWO within required timeframe	26	9
45 CFR 303.7(b)(2)	Responding	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	1	0
45 CFR 303.7(a)(7)	Responding	Did not notify initiating jurisdiction of new information received within required timeframe	6	3
Total Errors			95	21

Intergovernmental Error Type Count Per Year with Percent Differences

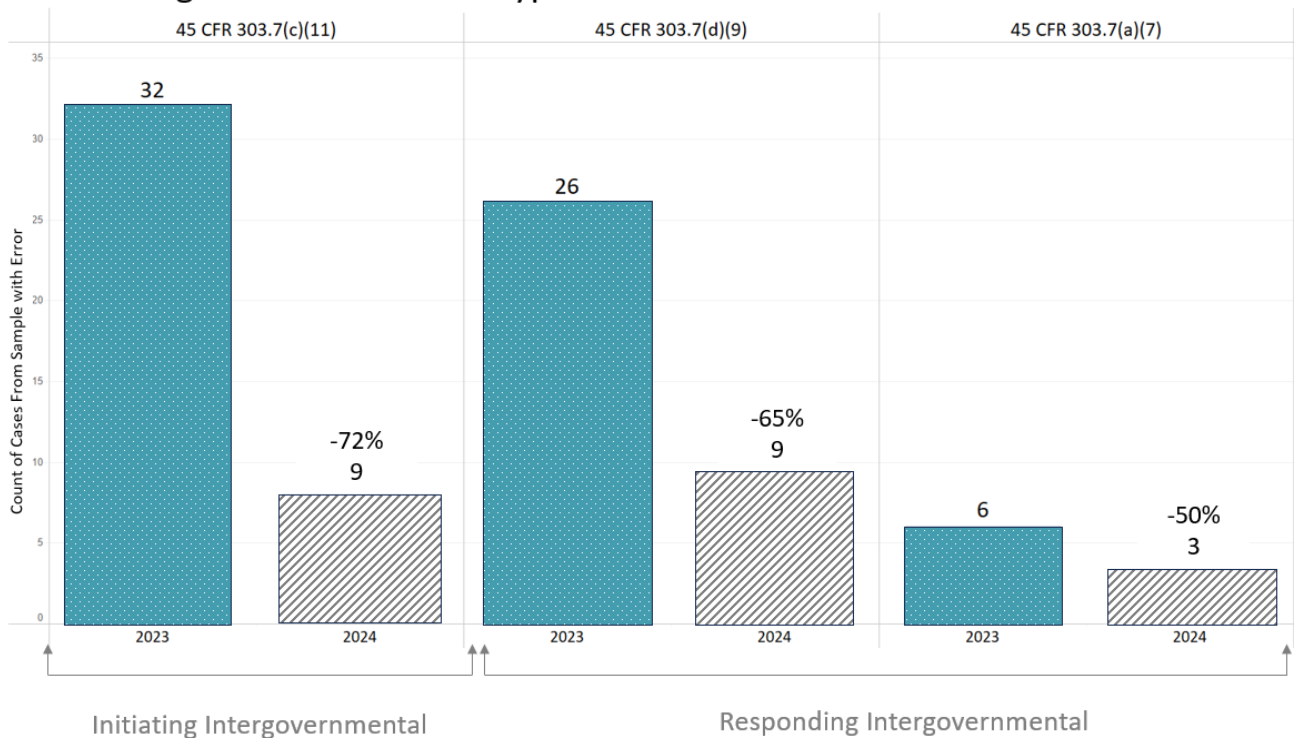


Figure 3 – Intergovernmental Error Type Count: FFY 2023-2024

Expedited Process Review 6-month

Table 13 – 2024 Expedited Process 6-month Efficiency

2024 Expedited Process – 6-month Efficiency		97.67%
Federal Benchmark		75%
Population Size		2,060
Cases Sampled		386
Cases Reviewed		386
Cases Met Federal Benchmark		377
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)	9
6-Month Expedited Process Errors		9

The efficiency rate for the 6-month expedited process category increased this year by 0.79 percentage points. The efficiency rate of 97.67% is the highest rate in this category Oregon has achieved in a decade. The next closest efficiency rate was 97.04% in FFY 2017.

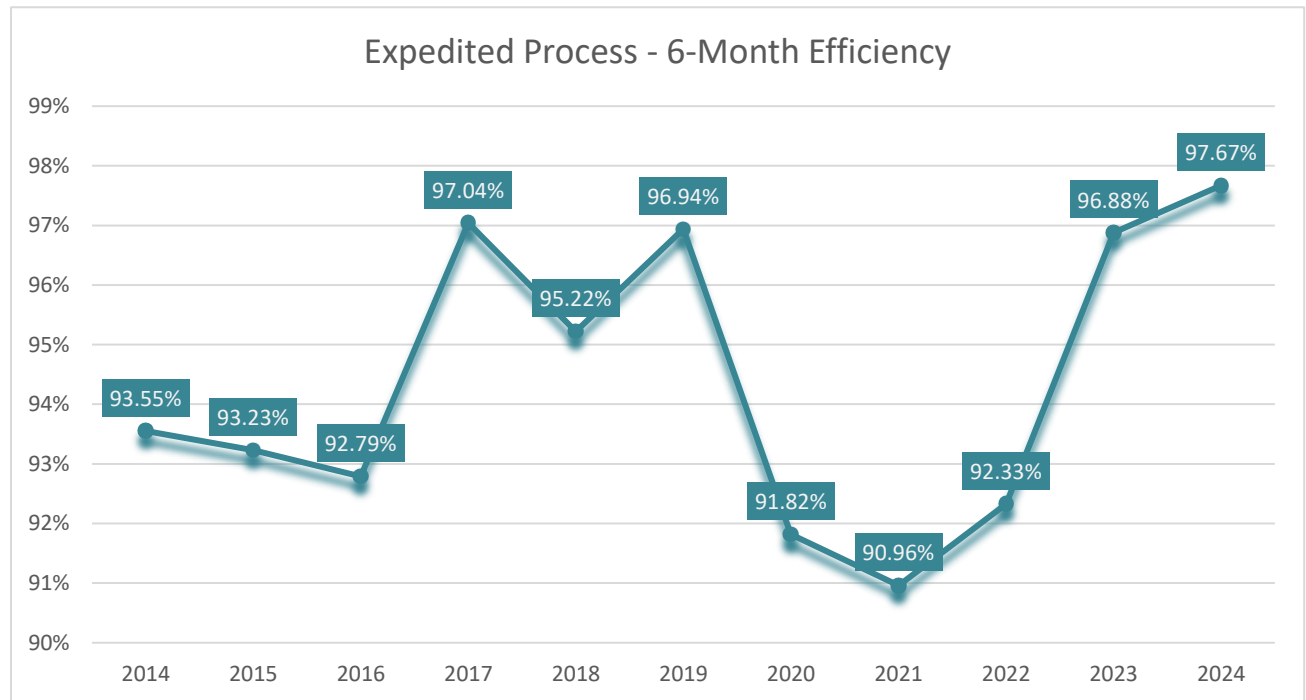


Figure 4 – Expedited Process 6-Month Efficiency

Expedited Process Review 12-month

Table 14 – 2024 Expedited Process 12-month Efficiency

2024 Expedited Process – 12-month Efficiency	100%
Federal Benchmark	90%
Population Size	2060
Cases Sampled	386
Cases Reviewed	386
Cases Met Federal Benchmark	386
12-Month Expedited Process Errors	
	0

Oregon also increased its efficiency rate for the expedited process 12-month category by 0.26% and achieved a 100% efficiency rate. This is the third time Oregon has achieved a perfect efficiency rate in the last decade.

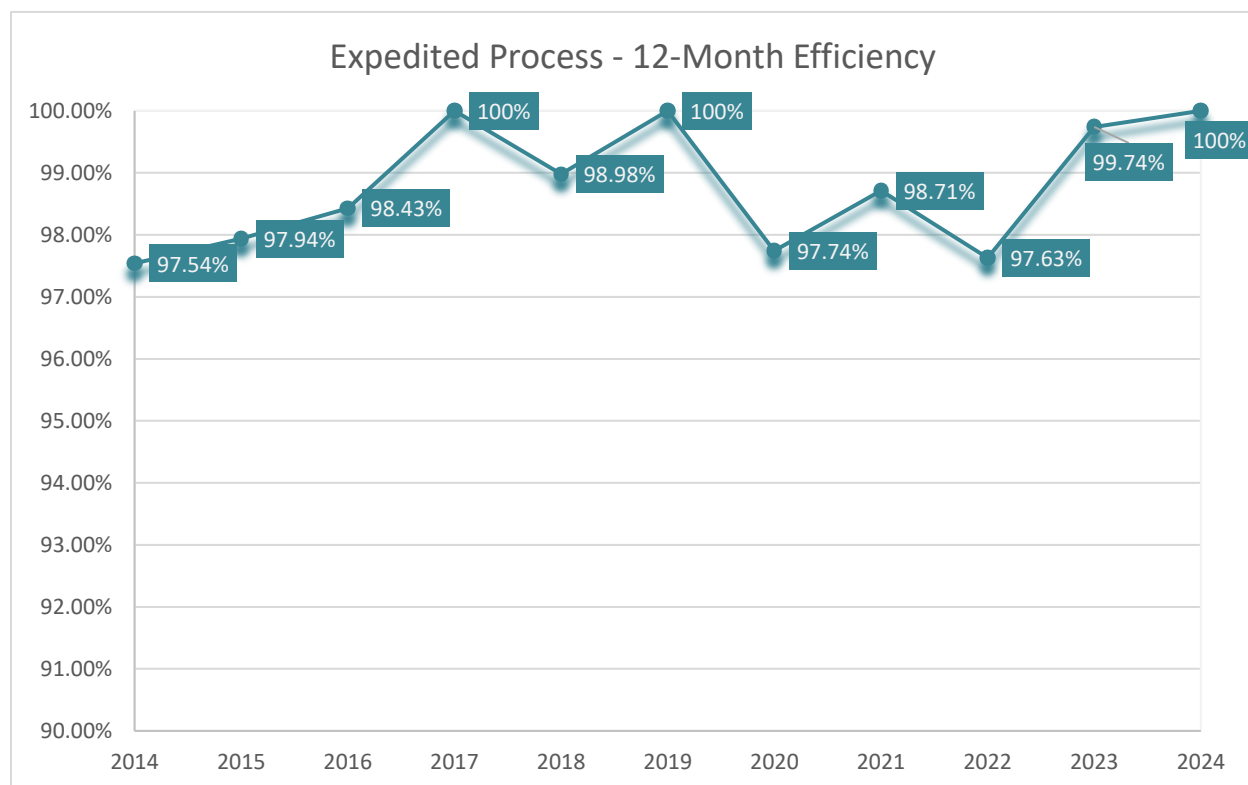


Figure 5 – Expedited Process 12-Month Efficiency

The charts and figures in this section indicate that actions were required on 3,124 cases, excluding the disbursement category, within the review period. There were 127 errors across these categories, of which 69 were in the establishment category. Based on the ratio of errors to cases requiring actions for federal fiscal year 2024, Oregon experienced a 6-percentage point decrease in overall errors compared to last year (4% in FFY 2024 compared to 10% in FFY 2023).

The program’s dedication to Oregon families is evident in the results achieved this federal fiscal year. Additional training was provided to managers about how research analysts complete reviews in the federal self-assessment. Business processes in conjunction with system automation was evaluated and changes implemented for a more desired result in efficiency.

D. Summary of Self-Assessment Results

Oregon surpassed the required federal compliance benchmarks in 7 of the 8 required program areas. Seven categories showed an increase in efficiency from the prior review period and one category decreased slightly. Prior years of program efficiency rates by FSA category are displayed below in Table 15.

Table 15 – Self-Assessment Results Over Five Years

Criterion	2020	2021	2022	2023	2024	Percentage Point Change from Previous Year
Case Closure	99.52%	99.56%	98.90%	94.92%	97.32%	2.40
Establishment	100%	100%	100%	52.20%	73.76%	21.56
Enforcement	99.78%	99.34%	98.67%	97.09%	99.55%	2.46
Disbursement	99.41%	98.70%	99.37%	99.37%	99.47%	0.10
Medical	99.76%	100%	99.75%	100%	99.75%	-0.25
Review & Adjustment (Modification)	98.58%	98.83%	95.75%	96.59%	96.89%	0.30
Intergovernmental	99.22%	96.41%	96.37%	87.79%	97.28%	9.60
Expedited Process 6-month	91.82%	90.96%	92.33%	96.88%	97.67%	0.79
Expedited Process 12-month	99.74%	98.71%	97.63%	99.74%	100%	0.26

The establishment category did not meet the 75% benchmark but had the most significant increase in efficiency by 22 percentage points compared to last federal fiscal year. The establishment category reviews case opening requirements, proposed order service requirements, locate activities, and final orders. All cases in the sample were manually reviewed. The Self-Assessment Analysis and Corrective Action Plan section in this report provides more detail.

Case closure and enforcement categories increased efficiency by more than 2 percentage points and Disbursement, Review & Adjust, and Expedited Process categories increased by less than 1 percentage point.

Oregon’s performance in the medical category decreased slightly by 0.25 percentage point with one error for FFY 2024 when compared to the 100% efficiency rate from FFY 2023.

The second largest increase in efficiency, 10 percentage points, is in the intergovernmental category. Oregon acknowledged a 9-percentage point decline last year and took proactive action this federal fiscal year to correct the decline. Three of the error type reasons from FFY 2023 achieved 100% compliance this year. The remaining 3 error type reasons increased efficiency between 50% and 75% this federal fiscal year.

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 as only 73.76% 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 or completed, or case-opening activities.

B. Analysis of Errors

The total case population for the establishment category was 10,200. The sample size was 263 cases, of which 69 (26.23%) were classified as errors. There are three error types within the establishment category: locate, service, and opening. The breakdown of errors is as follows and shown in Figure 6:

- Locate – 2 (3%)
- Service – 27 (39%)
- Case Opening – 40 (58%)

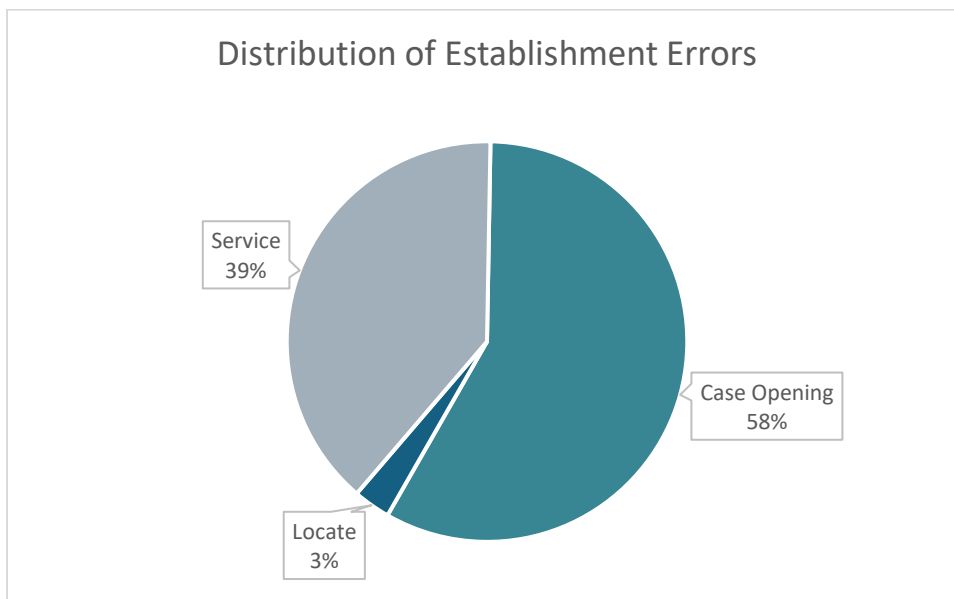


Figure 6 – Distribution of Establishment Errors

Figure 7 compares the count of establishment errors for FFY 2023 and FFY 2024 by type of error.

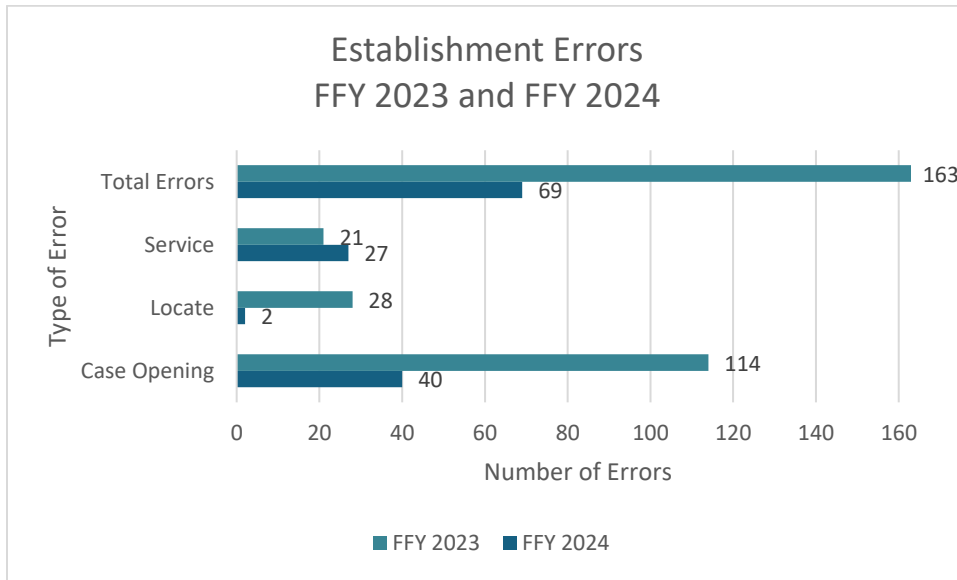


Figure 7 - Establishment Errors FFY 2023 and FFY 2024

Figure 8 displays the percentage of case opening errors that occurred prior to implementing the corrective action plan from the federal self-assessment FFY 2023.

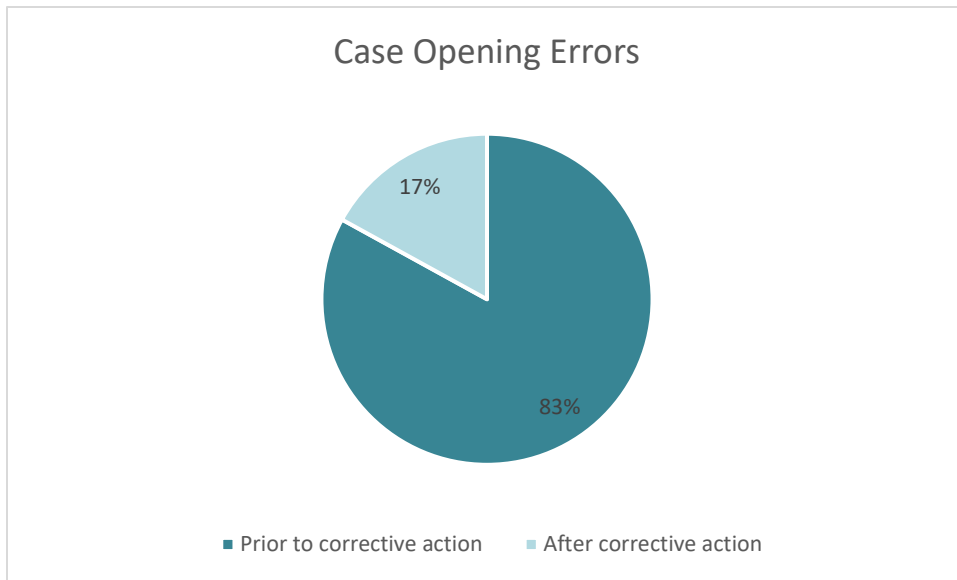


Figure 8 - Case Opening Errors

C. Discussion of Reasons

Errors in the establishment category under the error type “Did not complete locate activities within the required 75 or 90 calendar days, or immediately upon receiving new locate information” reduced from 17% in FFY 2023 to 3% with a final count of 2 errors for FFY 2024. The reduction in errors is attributed to prioritizing and fixing an issue with Origin’s automated locate functionality identified last fiscal year.

Thirty-nine percent (27 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.” This error reason increased from FFY 2023 to FFY 2024 and is a priority focus in this year’s corrective action plan. A system task (ES467) that identifies cases to meet this requirement is being fine-tuned to assist employees and managers for prioritizing. Understanding the automated locate is a key component in the business process for serving the paying parent. A job aid has been created to aid employees in their analysis of locate partner responses to identify the most current address for the paying parent.

Fifty-eight percent (40 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.” The number of errors were reduced from 114 (FFY 2023) to 40 (FFY 2024). Further review of these errors identified 83% of the errors occurred prior to the program implementing its corrective action plan outlined in the federal self-assessment FFY 2023, while 7 errors occurred after the corrective action plan was implemented in March 2024. Further discussion on these cases identified a misunderstanding on when the 20-day calendar start date occurs, which has been corrected.

D. Corrective Action Plan

Oregon established a quality assurance and control workgroup, which is reviewing and compiling quality checklists from all offices into one comprehensive checklist for all field service offices to use. This is still in progress and being vetted prior to implementing. Oregon has put various measures in place that resulted in a dramatic decrease in errors, listed under “Action Completed” below. Oregon is confident that the process improvements implemented or currently in progress will result in meeting or exceeding this performance measure for FFY 2025.

Table 16 – Corrective Action Plan for Establishment Category

Error Description	Cause of Error	Action Completed	Current Actions
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 released to Production.	No further actions needed.

Error Description	Cause of Error	Action Completed	Current Actions
<p>Did not complete service of process or document unsuccessful service within 90 days.</p>	<p>Delays sending discovery, not prioritizing tasks, or analyzing participant addresses and breaks in business process.</p>	<p>Identified processes with need for review.</p> <p>Discussed with senior managers who have oversight of Field Services managers to raise awareness of issue.</p> <p>A job aid was created to aid employees in their analysis of locate partner responses to identify the most current address for the paying parent.</p> <p>A section-wide process has been implemented to ensure all offices are reviewing tasks associated with discovery monthly. (CM041)</p> <p>Examined necessary short- and long-term changes. Meetings with subject matter experts, Field Services managers, and workgroups have occurred to identify areas needing action and remedies.</p>	<p>Assessing current priorities and determining which tasks alert for service and establishing timelines. This is an ongoing process.</p> <p>Working with Education team for targeted training resources. This is ongoing, given that it is unknown when the changes will be done in Origin and employees are empowered to speak up about recommended changes.</p> <p>Field Services managers, Branch managers, and Chief are tracking the review of tasks related to discovery monthly to correct the error. This started in July 2024 and will be ongoing with all offices.</p> <p>A system task (ES467) that identifies cases to meet this requirement has a defect and is triggering inappropriately. The defect has been submitted for processing in Origin. A further change is being drafted for an Origin improvement to streamline processes, thereby allowing employees to prioritize tasks appropriately. A workgroup has been created to review and recommend a fix for this issue, which should be completed by September 2025.</p> <p>Continuous process improvement with the IV-A referral process.</p>
<p>Cases created after a holiday did not meet the 20-day timeframe.</p>	<p>Case creation batches are not run on the weekend or a holiday.</p>	<p>Issue identified and a Service Request is created.</p> <p>Improved the business process to mitigate the holiday case creation concerns.</p>	<p>No further actions needed.</p>
<p>Oregon is not 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. 83% of the errors occurred prior to the program implementing its corrective action plan in FFY 2023.</p>	<p>Cases assign to locators to find the non-custodial parent. Reassignment to case manager in Field Services is after 20-day timeline or discovery not sent timely.</p>	<p>Completed initial review of process, identified gaps and priority tasks.</p> <p>Implemented immediate change to workflow. Overtime was employed and tasks reduced from 1,850+ to 124 between 2/12/24 and 3/18/24.</p> <p>Further discussion on these cases identified a misunderstanding on when the 20-day calendar start date occurs, which has been corrected.</p> <p>Processes have been streamlined to ensure tasks are being prioritized and worked appropriately to meet the 20-day timeline.</p> <p>A system defect was identified and corrected on 7/12/24.</p>	<p>No further actions needed.</p>

E. Discussion of Corrective Action Plan

The percentage of errors in the establishment category has decreased by 58% when compared to FFY 2023 and was achieved in a 6-month timeframe. The program has implemented training for management regarding the federal self-assessment as well as offering individual office trainings. In addition to corrected actions already implemented, additional tools for employees to meet the requirement for service are being carried out.

Oregon continues to collaborate with the IV-A program within the Oregon Department of Human Services (ODHS) to obtain participant information and strengthen partnerships. Oregon has transitioned away from a centralized mailbox system in favor of a more personalized approach, working directly with each branch and team at their local offices. This shift allows for better communication, stronger relationships, and more efficient collaboration. Additionally, co-attended events are being coordinated to further enhance engagement and partnership efforts.

F. Summary of Analysis and Corrective Action Plan

Oregon continues with long-term plans to improve workflows and to provide additional training. 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 and excelled in improving in all categories apart from a slight decrease in the medical category. The Oregon Child Support Program continues to assess business processes, educate on system functionality, and fine-tune procedures. Training material on the federal self-assessment has been implemented for all employees, including management. These combined actions have increased efficiency in serving Oregon's families.

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: 942.5 KB
- Uploaded on: 03/26/2025