



DEPARTMENT OF HEALTH & HUMAN SERVICES

U.S. REPATRIATION PROGRAM

GENERAL AGREEMENT

Between

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

And

Name of State: Kentucky

Name of State Agency (Non-emergency Activities) Cabinet for Health and Family Services, Department for Community Based Services

Name of State Agency (Emergency & Group Activities) Cabinet for Health and Family Services, Department for Community Based Services

I. PURPOSE

The purpose of this Memorandum of Understanding (MOU) is to enhance the working relationship between Federal and State partners and to better coordinate the provision of temporary services to groups and individuals through the Repatriation Program. This MOU is between the State of Kentucky and the Administration for Children and Families (hereinafter referred to as ACF) of the United States (U.S.) Department of Health and Human Services' (HHS). It explains the roles and collaborative efforts of the State of Kentucky and ACF in assisting U.S. citizens and/or their dependents evacuated from foreign countries during emergency situations. Coordinated planning and joint efforts by the State of Kentucky and its agencies with ACF are essential for the delivery of services in such situations.

II. BACKGROUND

The U.S. Repatriation Program (Program), administered by the Office of Refugee Resettlement (ORR), was established under Section 1113 of the Social Security Act (Assistance for U.S. Citizens Returned from Foreign Countries). Within the U.S., HHS has the lead coordinating role during emergency and non-emergency repatriations and is responsible for coordinating the provision of temporary assistance to eligible U.S. citizens and their dependents. This responsibility was delegated by the HHS Secretary to the Administration for Children and Families (ACF) and later redelegated by ACF to the ORR.

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ACF, on behalf of the Secretary of HHS, "is authorized to develop plans and make arrangements for provision of temporary assistance within the United States" to aid repatriates who meet the criteria prescribed by Section 1113 (42 U.S.C. 1313(b)). In implementing such plans and arrangements, the Program provides temporary assistance to U.S. citizens and their dependents who have been identified by the Department of State (DOS) as having returned, or having been brought from a foreign country, to the U.S. because of destitution, illness, war, threat of war, or a similar crisis and who are without available resources.

The Program was later expanded in response to legislation enacted by Congress to address the particular needs of persons with mental illness. Further refinements occurred in response to Executive Order 12656. The Program addresses issues presented by repatriates falling within four general categories: (1) ongoing and routine arrivals of individual repatriates, (2) arrivals of mentally ill repatriates, (3) group repatriations, and (4) emergency repatriations. The ongoing routine arrivals of individual repatriates and the repatriations of mentally ill persons together constitute the Program non-emergency activities. The Program Emergency activities include group repatriations, which are evacuations of 50-500 eligible individuals, and emergency repatriations are evacuations of 500 or more eligible individuals. Operationally, these activities involve different kinds of preparation, resources and implementation. However, the core Program policies and administrative procedures are essentially the same. ACF serves as the lead agency during both emergency and non-emergency activities within the U.S. During non-emergency activities, overseas DOS conducts an initial assessment and refers identified U.S. citizens and dependents to ACF and/or its designee for HHS eligibility determination. DOS also ensures transportation of eligible individuals to the U.S. ACF and/or its designee are the sole point of DOS contact for repatriation cases. Upon eligibility determinations, cases are referred to the State non-emergency coordinator or designated state agency for assistance with coordination, case management, and provision of temporary services. During emergency activities, States will provide assistance as described under Section V (c) (8) (9) of this document. Repatriates are returned to the U.S. through designated DOS transportation modes. Upon arrival to the U.S. States perform an initial eligibility assessment utilizing HHS/ACF forms. Authorized ACF personnel will make final eligibility determination.

III. AUTHORITIES

Section 1113 of the Social Security Act, 42 U.S.C. 1313; 24 U.S.C. Sections 321 through 329; Executive Order 12656 as amended; and Program regulations in 45 C.F.R. Parts 211 and 212. Web links to applicable authorities are included in Attachment A.

1 Temporary assistance is defined as money payments, medical care, temporary billeting, transportation, and other goods and services necessary for the health or welfare of individuals (including guidance, counseling, and other welfare services). This assistance is given in the form of a loan and generally must be repaid to the U.S. Government.

VI. PARTIES

A. Administration for Children and Families (ACF) of the U.S. Department of Health and Human;

B. State of: Kentucky _____

State designated agencies:

Agency Name (Non-emergency activities): Cabinet for Health and Family Services, Department for Community Based Services

Agency Name (Emergency/Groups activities): Cabinet for Health and Family Services, Department for Community Based Services

V. PROVISIONS

A. Parties Acknowledge that:

1. Program supports initial arrival costs covered by ~~the Program appropriations. Individual and~~ group repatriates are eligible by virtue of their U.S. citizenship and/or relationship to the U.S. citizen consistent with 42 U.S.C. 1313(a) (1) or 24 U.S.C. 321(d).
2. Repatriates, in consultation with DOS, select their State of Final Destination and communities in accord with the U.S. Supreme Court's decision in Shapiro v. Thompson, 394 U.S. 618 (1969) and other applicable laws.
3. ACF authorize staff will make final eligibility determinations, as well as determinations about any changes to repayment conditions, terms, or amounts pertaining to a recipient of temporary assistance.

B. Party's signatory:

1. Listed signatory (ies) is (are) authorized to sign on behalf of the State designated agency (hereinafter Agency) and to bind State to the MOU.
2. If the Agency delegates or assigns responsibilities or activities described in this document to one or more additional State or local government agencies or organizations, contractors, or grantees, the Agency will ensure that such entities abide by the provisions of this MOU.

C. Agency Agrees that:

1. The Secretary of Health and Human Services and the Comptroller General of the United States or any of their duly authorized representatives shall have access to and the right to examine and monitor any directly pertinent books, documents, papers, reports and records of the Agency covering transactions related to this MOU. The Agency agrees to maintain such records in the manner prescribed by Federal regulations 45 C.F.R. Sections 74.53(a) through (e) and (g).

Non-Emergency Repatriation

In re: Services Under Section 1113 of the Social Security Act

Implementing Regulations: 45 C.F.R. Part 212

2. Upon receipt of notification by ACF or its contractor/grantee representative, of the possible return to the U.S. of one or more individuals who may be in need of temporary assistance, the Agency shall: (a) obtain information regarding such individuals as may be requested by ACF or its contractor/grantee representative; (b) ascertain whether such individuals are without available resources upon arrival to the U.S.; and (c) if advised by ACF that any individual is otherwise eligible for temporary assistance under Section 1113 of the Social Security Act, shall provide assistance and services to that individual in accordance with 45 C.F.R. Part 212 and all manuals, policies, and procedures issued by ACF based on applicable Federal requirements.

3. An individual who has returned from a foreign country and who has applied for temporary assistance without prior referral to the Agency from ACF, the Agency, before providing assistance to such individual, shall contact ACF to ensure eligibility and proper referral. Services will be provided upon ACF's referral and in accordance with Federal regulations at 45 C.F.R. Part 212 only if such individual is eligible to receive temporary assistance under Section 1113 of the Social Security Act.

4. The Agency will coordinate with relevant Tribes or Tribal organizations with respect to Native American repatriates in need of assistance.

In re: Services Under 24 U.S.C. Sections 321 through 329

Implementing Regulations: 45 C.F.R. Part 211

5. Upon receipt of notification by ACF or its contractor/grantee representative, of the possible return to the U.S. from a foreign country of a mentally ill person eligible to receive assistance or services authorized by 24 U.S.C. Sections 321 through 329, the Agency shall: (a) obtain information regarding the mentally ill individual as may be requested by ACF or its contractor/grantee representative and (b) shall provide assistance and services to the mentally ill

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individual in accordance with 45 C.F.R. Part 211 and all manuals, policies, and procedures issued by ACF based on applicable Federal regulations.

6. With respect to a mentally ill individual who has returned from a foreign country and who has applied for assistance and/or services without prior referral to the Agency from ACF, the Agency, before providing assistance or services to such individual, shall contact ACF to ensure eligibility and proper referral. Services will be provided upon ACF referral and in accordance with Federal regulations at 45 C. F.R. Part 211 only if such mentally ill individual is eligible to receive such assistance under 24 U.S.C. Sections 321 through 329.

7. Mentally ill individuals who are found ineligible to receive assistance and/or services pursuant to 24 U. S.C. Sections 321 through 329 shall be treated as applicants for temporary assistance under Section 1113 of the Social Security Act in accordance with Article V, paragraphs C.2, C.3 and C.4 of this MOU.

Emergency and Group Repatriations

In re: Services Under Executive Order 12656 and Section 1113

8. Upon receipt of notification by ACF of a possible Emergency or Group Repatriation where eligible U.S. citizens are brought back to the U.S. from a foreign country due to war, threat of war, invasion, or similar crisis and need to receive temporary services, the designated Agency would be responsible for assisting ACF in carrying out the local operational responsibility for the reception, temporary care, and onward transportation for the non-combatant evacuees. This responsibility is detailed under the National Emergency Repatriation Plan, Operational Guide. The designated Agency shall provide or arrange for such services in accordance with all manuals, policies, and procedures issued by ACF based on applicable Federal regulations.

9. Agency will develop and maintain a State Emergency Repatriation Plan.

D. ACF Agrees that:

ACF will reimburse the Agency or subcontractors , whenever applicable, contingent upon available funding for reasonable, allowable, and allocable costs of providing the services or assistance under this MOU in accordance with the provisions of Federal regulations found at 45 C.F.R. Parts 212 and 211, all manuals, policies and procedures issued by ACF and the applicable Cost Principles.

E. Agency and ACF Agree/Acknowledge that:

1. Each party to this MOU is a separate and independent organization. As such, each organization retains its own identity in providing services.
2. Each enters into the MOU voluntarily.
3. ACF and the Agency contact information is included in Attachment B. The Agency should submit any changes in personnel to ACF and its contractor/grantee representative by replacing Attachment B as needed. Revised copies of Attachment B may be transmitted by email, facsimile, or regular mail to the contacts specified thereon. The Attachment B shall be reviewed at least annually to maintain accurate and current contact information.
4. ACF and the Agency agree to implement Program activities in accordance with applicable Federal and State regulations and other relevant authorities.
5. In the event of termination, ACF shall reimburse the Agency for allowable services, assistance, or costs subject to availability of funds, incurred before such date of termination, but will not reimburse costs incurred after the effective termination date.
6. No disclosure of information of a personal and private nature of an individual obtained at any time by any person, organization, or institution in the course of discharging duties under 24 U.S.C. Sections 321 through 329 or under Section 1113 of the Social Security Act shall be made except as specified in Federal regulations at 45 C.F.R. Sections 211.14 and 212.9, and to the extent that such disclosures are consistent with restrictions imposed by the Privacy Act, the Health Insurance Portability and Accountability Act, and any other applicable Federal and State laws or requirements.
7. No eligible person shall, on the ground of their race, color, national origin, or religion, be excluded from participation in any activity described under this MOU, be denied any benefits, or otherwise subjected to discrimination of any nature in the provision of services.
8. Applicable Office of Management and Budget (OMB) audit/reporting requirements are in Attachment C.

VI. Period of Performance

The services or assistance to be provided by the Agency under this MOU shall commence on the date of the execution of this MOU and shall continue indefinitely, unless terminated by either party upon ninety days' (90 days) written notice. Email, facsimile, or regular mail shall be used to transmit official written notifications.

A termination notice from ACF shall be submitted to the Agency representative identified in the most recently updated copy of Attachment B.

A termination notice from the Agency shall be submitted to the U.S. Repatriation Program, and shall be signed by the Governor, or authorized State Agency representative who signed the MOU, or an official acting for or succeeding the MOU signatory.

This MOU is effective on the date of signature.

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VII. SIGNATURES

1. UNITED STATES OF AMERICA BY ACF ASSISTANT SECRETARY

Signature: _____

Date: _____

Name: Steven Wagner

Title: Acting Assistant Secretary

Administration for Children and Families

Department of Health and Human Services

**2. STATE OF KENTUCKY BY THE GOVERNOR AND/OR DESIGNATED AGENCY
HEAD**

Governor

Date

Governor Name (print)

A. Non-Emergency Activities:



Agency Authorized Signature

10/31/17

Date

Adria Johnson

Agency Authorized Name

Commissioner, Department for Community Based Services

Agency Authorized Title and Department

B. Emergency & Group Repatriation



Agency Authorized Signature

10/31/17

Date

Adria Johnson

Agency Authorized Name

Commissioner, Department for Community Based Services

Agency Authorized Title and Department

Attachments:

- A- Legal Authorization
- B- Contact Information Form
- C- OMB Audit/Reporting Requirements



DEPARTMENT OF HEALTH AND HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES
OFFICE OF REFUGEE RESETTLEMENT
330 C Street S.W.
Washington, D.C. 20201

U.S. REPATRIATION PROGRAM
ATTACHMENT B
STATE REPATRIATION PROGRAM COORDINATORS CONTACT FORM
Designated by the Governor or State Authorized Staff

STATE OF Kentucky

DATE: 10/30/17

State Non-Emergency Repatriation Coordinator:

Main Contact

Name: Lisa R. Smith
Position: Internal Policy III
Agency: CHFS/DCBS/DPP
Address: 275 East Main Street, 3E-A Frankfort, KY 40621
Telephone: 502-564-7835 Ext. 3603
Emergency Number:
FAX: 502-564-4853
Email: lisar.smith@ky.gov
Website: http://chfs.ky.gov/

Back-Up Contact

Name: Gretchen Marshall
Position: Assistant Director
Agency: CHFS/DCBS/DPP
Address: 275 East Main Street, 3E-A Frankfort, KY 40621
Telephone: 502-564-6852 Ext. 3606
Emergency Number: 502-330-6230
FAX: 502-564-4853
Email: gretchen.marshall@ky.gov
Website: http://chfs.ky.gov/

State Emergency & Group Repatriation Coordinator

Main Contact

Name: Gretchen Marshall
Position: Assistant Director
Agency: CHFS/DCBS/DPP
Address: 275 East Main Street, 3E-A Frankfort, KY 40621
Telephone: 502-564-6852 Ext. 3606
Emergency Number: 502-330-6230
FAX: 502-564-4853
Email: gretchen.marshall@ky.gov
Website: http://chfs.ky.gov/

Back-Up Contact

Name: Tracy DeSimone
Position: Branch Manager
Agency: CHFS/DCBS/DPP
Address: 275 East Main Street, 3E-A Frankfort, KY 40621
Telephone: 502-564-7835 Ext. 3571
Emergency Number: 502-234-8738
FAX: 502-564-4853
Email: tracy.desimone@ky.gov
Website: http://chfs.ky.gov/

State Emergency Operation Center Tel.: 1-800-255-2587
State Emergency Operation Center Fax: 502-607-1614
State Emergency Operation Center E-mail: ky-by-hyomg.hsl.kyom-duty-officers@mail

Federal Contact:

Name: Elizabeth B. Russell
Position: Coordinator, HHS Repatriation Program
Agency: Office of Refugee Resettlement
Administration for Children and Families
U.S. Department of Health and Human Services
Address: 330 C Street S.W., Washington DC 20201
Telephone: 202-401-9246 or 4845
FAX: 202-401-0981
Email: Elizabeth.Russell@acf.hhs.gov
Website: http://www.acf.hhs.gov/programs/orr/