# FORM ACF-202 – TANF CASELOAD REDUCTION REPORT

Date of Completion <u>December 2, 2019</u>											
St	ate: Georgia		Fiscal Year to which credit applies: 2020								
	Overall Report _X_ Two-parent Report	(check one)	Apply the overall credit to the two-parent participation rate?	yes _X no							
	PART 1 – Eligibility Changes Made Since FY 2005 (Complete this section for EACH change)										
1.	Name of eligibility change: Change of two-parent households to a solely state-funded program										
2.	Implementation date of eligibility change: FY 2007										
3.		ect work participation	policy: Beginning October 2007, Georgia requirements from TANF. Two-parent famfunded-program.								
4.	(attach supporting materials to the	is form): The averageses. The average mon	stimated impact of this eligibility change ge monthly caseload between October 1, 20 othly two-parent cases for FY 2018 (7 cases cload Reduction Credit.								

OMB Control No.: 0970-0338 Expiration Date: 08/31/2020

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## PART 2 - Estimate of Caseload Reduction Credit

(Complete Part 2 using Excel Workbook provided.)

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## FORM ACF-202 – TANF CASELOAD REDUCTION REPORT Overall Credit

	A	В	C	D	E	F		
1	Georgia			Fiscal Year to which credit applies:		2020		
2				Date of Completion:	12/2/2019			
3	PART 2 – Estimate of Caseload Reduction Credit							
5	Impact of All Changes		-	Casaland Badustian Calculation				
6	Change of two-parent households	-7	<u>,                                    </u>	Caseload Reduction Calculation FY 2005 TANF Caseload	44 747			
7	to solely state-funded program	-/	-	FY 2005 TANF Caseload FY 2005 SSP Caseload	41,747 208			
8	lo solely state-ittrided program		-	Total FY 2005 Caseload				
9			-		41,955			
_			=	FY 2019 TANF Caseload	9,654			
10			-	FY 2019 SSP Caseload	0			
11			_	Total FY 2019 Caseload	9,654			
12			_	Excess MOE Cases in FY 2019	0			
13				Adjusted FY 2019 Caseload	9,654			
14			_	Caseload Decline	32,301	77.0%		
15			_	Decline – Net Impact	32,294			
16								
17				Caseload Reduction	on Credit =	77.0%		
18								
19								
20			_					
21			_					
22								
23								
24								
25			-					
	Net Impact	-7						
27	::							
28								

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#### **PART 3 -- Certification**

I certify that we have provided the public an appropriate opportunity to comment on the estimates and methodology used to complete this report and considered those comments in completing it. Further, I certify that this report incorporates all reductions in the caseload resulting from State eligibility changes and changes in Federal requirements since Fiscal Year 2005.

(signature)

Tom C. Rawlings

(name)

Division Director, Georgia Division of Family and Children Services

(title)

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