



Office of Temporary and Disability Assistance

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Administrative Directive Memorandum

Section 1

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Suggested Distribution:	Regional Offices (OCFS) Temporary Assistance Directors Adult Services Directors Children Services Directors (Including Child Protective Unit) Medicaid Directors Staff Development Coordinators Accounting Supervisors
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Attachments:	Attachment 1: Sample Notification Letter to Social Services District Commissioner Attachment 2: Sample Referral Attachment 3: Sample Pre-Arrival Plan Attachment 4: RR-03: Loan Waiver and Deferral Request Form Attachment 5: RR-04: Non-emergency Monthly Financial Statement Form Attachment 6: RR-05: Privacy and Repayment Agreement Form Attachment 7: RR-06: Refusal of Temporary Assistance Form Attachment 8: RR-07: Temporary Assistance Extension Request Form Attachment 9: U.S. Repatriation Program Welcome Package Attachment 10: Expenditures Statement and Claim for Reimbursement (RF-7) Assistance for U.S. Citizens Returned From Foreign Countries (LDSS-931) Attachment 11: Sample Repatriation Activity Log Attachment 12: Sample Closing Letter
Attachment Available Online:	<input type="checkbox"/>

Filing References

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
06-ADM-11	06-ADM-11		PL 86-571 PL 87-64 42 U.S.C. §1313 , 24 U.S.C. §321 et seq., 45 C.F.R. Parts 211 and 212	Fiscal Reference Manual Vol. 2 Ch. 3, Pages 152-154.	<p>ORR Repatriation Guide: Sections 1-5</p> <p>ORR Repatriation Program Policy – Clarification of the term United States</p> <p>DHHS/ACF Repatriation Program Fact Sheet</p> <p>ORR State Letter 12-06: Authorized Resettlement Areas for Eligible U.S. Repatriates</p> <p>ORR Information Memorandum: State Repatriation Agreement-- Clarification for Section II, Background, August 2013</p> <p>ORR Information Memorandum: New Repatriation Forms</p>

Section 2

I. Summary

Repatriation is the return of a United States (U.S.) citizen from a foreign country. The United States Repatriation Program (USRP) provides assistance, as defined in Section 2, III, A. of this ADM, to U.S. citizens and their dependents who have repatriated and are in need of assistance (hereinafter referred to as “repatriates”). USRP is a loan program funded by the federal Department of Health and Human Services (HHS) Administration for Children and Families (ACF) and administered through the Office of Refugee Resettlement (ORR). The program is operated through the International Social Service-United States Branch (ISS-USA), pursuant to a cooperative agreement with ORR.

The Office of Temporary and Disability Assistance (OTDA), Bureau of Refugee Services (BRS) administers USRP in New York State, pursuant to a Memorandum of Understanding (MOU) with HHS/ORR. OTDA's BRS works with social services districts ("districts") to coordinate the arrivals of repatriates and develop plans for services. Repatriates are not required to participate in USRP and may decline services.

Districts are eligible for 100% federal reimbursement for providing services to eligible repatriates for up to 90 days including assistance in the form of cash payment, medical care (including counseling and psychiatric care), temporary shelter, transportation (including ambulance, if necessary), and other goods and services necessary for their health and welfare. Some repatriates, such as unaccompanied children and mentally ill individuals, may require specialized assistance from districts. USRP is not intended to assist individuals achieve self-sufficiency, but to provide services, generally, up to the point where they have resources immediately accessible to meet their needs. See, 45 C.F.R. Part 212.

II. Purpose

The purpose of this Administrative Directive (ADM) is to describe the responsibilities of OTDA and districts under USRP.

III. Background

USRP was established in 1935 under Section 1113 of the Social Security Act (Assistance for U.S. Citizens Returned from Foreign Countries), to provide short-term assistance to U.S. citizens and their dependents who have been identified by the U.S. Department of State (DOS) as having returned, or been brought from a foreign country, to the U.S. because of destitution, illness (including mental illness), war, threat of war, or a similar crisis, and are without available resources.

USRP assistance is not an entitlement, but a service loan that must be repaid to the federal government. USRP assistance is available to eligible repatriates for up to 90 days if they sign the Department of Health and Human Services' RR-05: "Privacy and Repayment Agreement Form" (RR-05) for the loan (see Attachment 6). Repatriates have the right to refuse services because this loan program is voluntary.

ISS-USA is the main point of contact between OTDA and the federal agencies involved in USRP. In New York State, OTDA is the main point of contact between ISS-USA and the district that will provide direct services to the repatriate.

A repatriate has the right as a U.S. citizen to travel and to live in any state that he/she may choose. Assistance may be provided to repatriates arriving in the anticipated county of residence within New York State or to repatriates in transit from the port of entry in New York to the place of final destination. As described in Section V. A. Repatriation Process, the district may be asked to provide necessary transitional support and services to the repatriate who will either remain in the county or will be in transit to another county or state.

The statutory authority for the repatriation of U.S. citizens is located at 42 U.S.C. §1313. The regulations for repatriation of U.S. citizens are located at 45 C.F.R. Part 212. The statutory authority for repatriation of a mentally ill U.S. citizen is located at 24 U.S.C. §§ 321- 329. The regulations for repatriation of a mentally ill U.S. citizen are located at 45 C.F.R. Part 211.

For additional information on the repatriation program, please connect to the following links:
<https://www.acf.hhs.gov/orr/programs/repatriation>
<http://www.iss-usa.org/services/repatriation>

A. Definitions

- 1. Port of Entry (POE):** This is the location in the U.S. to which the repatriate first arrives from a foreign country. In many cases, the POE is also the final destination where the repatriate will be returned and resettled. The POE in New York State is usually JFK Airport.
- 2. Final Destination:** The final destination is where the repatriate will be returned and resettled. DOS, in consultation with the repatriate, determines the final destination which might be based on the place of last residence, location of friends or family, or place of birth among other determinants. Repatriates have the constitutional right to decide where they want to live in the U.S. For unaccompanied minors, the determination of final destination is made by DOS. When determining state of final destination, priority is given to the child's best interest, safety and resources available to meet his/her needs. The rationale for the selection of the final destination is typically explained in the referral.
- 3. Escort:** Escorts accompany repatriates on their travel from overseas to the U.S. DOS staff are responsible for determining if an escort is needed and making the arrangements. Escorts are strongly recommended for repatriates who are mentally incompetent; experiencing confusion due to medication; suffering from substance use disorders or medical conditions; frail; non-ambulatory; unaccompanied minors; and/or a danger to themselves and/or others. Typically, escorts travel with the repatriate from overseas to the POE. For repatriates in need of escorts from POE to final destination, ISS-USA, with approval from ORR, arranges for escorts to the final destination, unless it is reasonable and allowable to use the same overseas escort to the final destination. The escort stays with the repatriate until they are met by the district worker.
- 4. Privacy Act Waiver (PAW) (DS-3072):** Repatriates sign this waiver overseas to authorize DOS to share and collect information necessary to coordinate their repatriations.
- 5. Limited Privacy Act Waiver:** Some repatriates choose to limit the individuals or entities that DOS can share their information with. They sign a limited privacy act waiver that allows confidential information to be released only to the individuals or entities specifically listed in the document. The referral usually indicates whether the PAW is limited or all-inclusive.
- 6. Health and Safety Exemption (HSE):** If the repatriate is an unaccompanied minor, refused or is not able to sign the PAW and it's not possible to obtain a Certificate of Mental Incompetence, DOS has the authority to invoke the Health and Safety Exemption (HSE). The HSE allows DOS to release information about the repatriate regarding their repatriation.
- 7. RR-05: Privacy and Repayment Agreement Form (RR-05):** A repatriate must sign this form in order to participate in USRP (exceptions apply to mentally ill and unaccompanied minor repatriates). Through this form, eligible repatriates or authorized legal custodians agree to accept services under the USRP's terms and conditions. The RR-05 combines a Privacy Act Statement and a Loan Repayment Agreement (see Attachment 6). The Privacy Act Statement authorizes HHS to release personally identifiable information to appropriate agencies (such as OTDA and the district) for the purpose of providing services. The RR-05 commits the repatriate to reimburse HHS/ORR for repatriation expenses incurred on his/her behalf. A completed RR-05 must be obtained by the district as soon as possible after meeting the repatriate at the POE and/or final destination.

- 8. Certificate of Mental Incompetence:** 24 U.S.C. §§ 321-329 authorizes HHS to arrange for the reception and hospitalization in the U.S. of a U.S. citizen with a mental illness who is returning from a foreign country. To accomplish this, ISS-USA will ask the DOS to obtain all treatment records on the repatriate, the attending physician's recommendations for arrangements and the identification of any family members or friends who may be willing to assist. A Certificate of Mental Incompetence is a federal form signed by a certified medical practitioner and attached to the referral. A substitute document may be used to accomplish the same purpose. This document would identify the repatriate and establish an appropriate diagnosis of the mental condition, including the nature of the treatment that needs to be provided. This certification form may facilitate a district's efforts to provide safe coordination for an evaluation and assessment at a facility in the U.S. upon arrival of the repatriate. If the person has been found to be mentally incompetent and a Certificate of Mental Incompetence has been signed, the PAW and RR-05 are not needed.
- 9. Deportee:** A deportee is a person who has been or is being expelled from a foreign country. Deportees are typically involuntarily returned to the U.S. Depending on the case, repatriates can be deported to the nearest POE since the foreign government is bearing the expenses for the repatriate returning. As a result, these repatriations usually occur quickly with little information or time to plan and coordinate. As with all repatriates, a deportee is eligible for USRP services if their case has been approved by ORR.
- 10. USRP Temporary Assistance:** For the purposes of USRP, HHS includes in their definition of temporary assistance: cash payment, medical care (including counseling and psychiatric care), temporary shelter, transportation (including ambulance), and other goods and services necessary for the health and welfare of repatriates. HHS's use of the term "temporary assistance" should not be confused with what is statutorily referred to as Public Assistance (PA) and OTDA commonly refers to as Temporary Assistance (TA). USRP assistance is provided to eligible individuals in the form of a service loan and is available to eligible repatriates for up to 90 days. Any cash assistance provided is in the form of a loan and must be equivalent to the current Statewide Standard of Need for the equivalent household size according to Schedule SA-1 in Section 352.1 of 18 NYCRR. USRP cash assistance must not be issued on a TA case.
- 11. Case Management:** For the purposes of USRP, case management refers to the creation and oversight of a plan by the district to meet the immediate needs of the repatriate within 90 days. In executing the plan, the district must inform the repatriate about applying for public benefits, provide referrals, monitor the case to confirm the repatriate's continued eligibility and provide any direct services that are necessary for the repatriates immediate needs to be met.
- 12. Form RF-7 Expenditure Statement and Claim for Reimbursement, Assistance for U.S. Citizens Returned from Foreign Countries (LDSS 931):** The form LDSS 931 is submitted by districts to OTDA Budget, Finance, and Data Management (BFDM) for reimbursement of all allowable costs to assist the repatriate. The form appears in the OTDA Fiscal Reference Manual, Volume 2, Chapter 3. The Fiscal Reference Manuals are accessible to districts and sister agencies at the following intranet site address: <http://otda.state.ny.net/bfdm/finance/>.

B. Eligibility

The federal government determines eligibility for USRP prior to the repatriate's arrival to the U.S. The referral from ISS-USA is the indication that the person referred is eligible for USRP services and may receive assistance for up to 90 days. In rare circumstances, ORR may grant an extension of time beyond 90 days if the repatriate's circumstances warrant it. If a repatriate

qualifies and is approved for other types of benefits, obtains an income, or has access to other resources, then he/she is no longer eligible for services under USRP.

Broadly, USRP assists two eligible groups of U.S. citizens: those who are destitute and those who are mentally ill.

1. Destitute Repatriates

The eligibility requirements, found at 42 U.S.C. § 1313, are:

- i. The person must be a U.S. citizen or a dependent of a U.S. citizen. Dependents of U.S. citizens include: spouses, parents, spouse's parents, grandparents, unmarried minor children including adopted children and stepchildren, unmarried adult children who are dependent due to disabilities, and minor siblings of the U.S. citizen or his/her spouse.
- ii. The person must be identified by DOS as returning to the U.S. from a foreign country because of destitution, illness, war, threat of war, invasion, or similar situation.
- iii. The person must be without available resources for living expenses.

2. Mentally Ill Repatriates

Under 24 U.S.C. §321(d), a person is eligible for assistance under USRP if:

- i. The person is certified as a national of the U.S. by the Secretary of State.
- ii. The person has:
 - a) A certificate stating that the person has been legally adjudicated insane in a named foreign country; or
 - b) A certificate of an appropriate authority stating at the time of the certification, the person was in need of care and treatment in a mental hospital in a named foreign country.

IV. Program Implications

The district will receive referral information from OTDA's BRS and plan for and deliver direct services to each referred repatriate, as needed. The requested services must be coordinated and provided within the appropriate time frame. For repatriates who are in transit to their final destination, the district must plan and provide any and all services requested as described in this subsection, until the repatriate has departed to their final destination.

V. Required Action

A. Repatriation Process

1. Referral to District

DOS receives requests for repatriation from embassies and consulates abroad, determines eligibility, receives approval from ORR, and then refers eligible repatriates to ISS-USA. ISS-USA then informs OTDA's BRS, who subsequently forwards the referral to

the district where services and/or resettlement are being requested. OTDA's BRS sends the referral to the district commissioner with a cover letter (see Attachment 1 and Attachment 2). The referral typically contains some demographic information, including date of birth and Social Security number, a brief description of the history or the event that prompted the request for repatriation services, and the services that are being requested upon arrival. This information is sometimes incomplete and may occasionally contain some inaccuracies, but nonetheless provides a basis for creating a plan for services. It also indicates if a PAW or limited PAW was signed by the repatriate, allowing confidential information to be released to the entities involved in coordinating the repatriation. Additionally, the referral may contain attachments such as medical documentation or a photograph of the repatriate. Personal or private information of a repatriate that is received by, or otherwise in the possession of, districts should be treated as confidential. However, such information may be disclosed where permitted by 45 C.F.R. § 212.9 and 45 C.F.R. § 211.14.

When a district receives a referral of a repatriate from OTDA's BRS, it is responsible for designating a contact person for BRS. This person is typically the district worker or supervisor of the district worker who will provide the direct services to the repatriate. OTDA's BRS works with the district contact person to determine the best date and time for the repatriate's arrival. Generally, DOS is advised to arrange travel so that repatriates arrive at the Port of Entry (POE) or final destination during regular working hours (Monday through Friday from 9 AM to 5 PM), if possible, to maximize the availability of personnel and access to other agencies/facilities whose assistance is needed.

If the district needs clarification or additional information from the referral, they must communicate this to OTDA's BRS as soon as possible.

2. Pre-Arrival Planning

As soon as possible following the receipt of a referral, the district must develop and submit to OTDA's BRS a pre-arrival plan detailing how it will address the needs of the repatriate and provide the services requested (see Attachment 3). It is important to start the service planning process as soon as possible to be prepared in case of an imminent arrival. Examples of services that are frequently requested are: case management; transportation; shelter assistance; emergency cash assistance; mental health evaluation; medical intervention/assistance; admission into long-term care; hospitalization; home study and assistance in applying for public benefits. The pre-arrival plan should note the name and contact information for the district worker that will meet and greet the repatriate. Arrangements for services such as Hospital/Long-Term Care/Institutional Admissions/Evaluations must be arranged prior to arrival. Pre-arrival plans are subject to changes.

3. Meet and Greet

OTDA's BRS provides the district with the travel itinerary for the repatriate. The district is responsible for doing the "meet and greet", as described in this subsection, at the POE and/or final destination. A district may be asked to provide POE transit services, such as health/mental health assessment or temporary shelter, to a repatriate on his/her way to their final destination in another district.

Upon arrival, the district representative meets the repatriate at the airport or other place of arrival, provides him or her with a copy of the Repatriate Welcome Package (see Attachment 9) and explains the program and the requirement to repay the federal government for the cost of services received. If the repatriate agrees to participate in the program, he/she must sign the RR-05. If the repatriate does not agree to participate in the

program, the repatriate must sign the RR-06: Refusal of Temporary Assistance Form (see Attachment 7). If the repatriate refuses services, the district should offer a referral to a public shelter and provide information about local public and social services agencies before releasing the repatriate into his/her own care.

If the repatriate is enrolled in the program, the district assesses the repatriate to determine his or her needs and appropriate types of services. Based on this assessment, it may be necessary to make changes to the pre-arrival plan. The district worker then transports the repatriate to temporary shelter (usually a public shelter) or any other arrangements that have been made for the case. Any additional needed services are provided according to the pre-arrival plan, and arrangements should be made to maintain contact and follow-up with the repatriate.

On the day of arrival, the district worker must contact OTDA's BRS to confirm arrival of the repatriate and provide the disposition of the case. The signed RR-05 is scanned and e-mailed with encryption to OTDA's BRS as soon as possible, usually the following business day.

4. Emergency USRP Cash Assistance

The repatriate may receive cash benefits through the USRP for up to 90 days following their arrival to the U.S. A repatriate is not required to complete the LDSS-2921 and is not subject to TA requirements in order to receive Emergency USRP Cash Assistance.

- i. Emergency USRP Cash Assistance payments are disbursed in two-week increments and calculated in amounts equivalent to the current Statewide Standard of Need for the equivalent household size. Emergency USRP Cash Assistance must not be issued on a TA case.
- ii. Emergency USRP Cash Assistance is not provided retroactively. It is available only for the period of time remaining between the individual's request for assistance (typically when the RR-05 is signed) and the end of the ninety days following arrival in the U.S.
- iii. Districts must ensure that the amount of Emergency USRP Cash Assistance submitted for federal reimbursement does not exceed the ninety-day limit.
- iv. The district must obtain signed receipts for all Emergency USRP Cash Assistance payments.
- v. Eligibility for Emergency USRP Cash Assistance ends when applications for public benefits have been approved or the repatriate gains access to other resources to meet their immediate needs.

In special circumstances, and only with the prior written approval of ORR (copied to BRS), Emergency USRP Cash Assistance may be extended beyond 90 days. Written requests for approval of an extension must be made on the RR-07: Temporary Assistance Extension Request Form (see Attachment 8).

5. Follow-Up Case Management

In the days and weeks following the repatriate's arrival, the district provides services identified on the pre-arrival plan and through any subsequent assessments. The district worker maintains contact with the repatriate on a regular basis, assisting them to transition to longer-term services, as necessary, and submit timely applications to all available services such as PA, Supplemental Nutrition Assistance Program (SNAP), Medicaid, SSI and other public benefits. Repatriates who are physically and/or mentally ill may require more intensive follow-up.

The following chart outlines the guidelines for reimbursable case management hours by case type and provides a description of the general case management activities that are performed. If a case will exceed the number of allowable hours, the district must inform OTDA's BRS and provide an explanation as to why the case required additional hours. OTDA's BRS will inform ISS who may need to obtain approval from ORR to reimburse the excess case management hours.

Case Management Hours		
Case Type	# of Allowable Hours	Activities
Unaccompanied Minor Case	up to 5 hours	Planning and general coordination, home study, meet and greet, family placement; foster care placement.
Destitute Case	up to 5 hours	Planning for a repatriate with no mental health issues, meet and greet, transportation, assistance with application for public benefits, referral to resources in the community, shelter placement.
Critically ill (placed in hospital or nursing home)	up to 15 hours	Planning for the placement of a repatriate with medical issues, meet and greet, hospital medical evaluations, finding shelter, transportation, coordinate with the social worker of the facility to ensure discharge planning including referral to public assistance and or other benefits.
Certified Mentally Incompetent	up to 20 hours	Planning for a repatriate with mental health issues, meet and greet, onsite or hospital mental health evaluation, transportation, ensure the facility social worker is applying for public benefits. If the repatriate is released to their own care, the district worker will provide assistance with applications for public benefits, refer to resources in the community, find shelter placement.

Throughout the 90-day eligibility period, the district provides regular updates to OTDA's BRS on the status of the repatriate. OTDA's BRS provides this information to ISS-USA who uses it to determine when to close the case.

6. Case Closure

The district worker and repatriate maintain contact on a regular basis until it is determined by ISS-USA in consultation with OTDA's BRS and the district that assistance is no longer needed and the case should be closed. Cases are usually closed when applications for public benefits have been approved or the repatriate gains access to other resources to meet their immediate needs.

ISS-USA will discuss the possibility of closing the case with OTDA's BRS based on updates provided by the district. If the case is being closed before the end of the 90-day eligibility period, ISS-USA will send a letter to the repatriate stating such and send a copy to OTDA's BRS (see Attachment 12: Sample Closing Letter). ISS-USA will write a closing case summary with the specific history and circumstances of the case and the outcome. ISS-USA forwards this summary to OTDA's BRS who shares it with the district.

Repatriates who need their cases to remain open past the 90-day eligibility period must submit an extension request on the RR-07: Temporary Assistance Extension Request Form at least two weeks prior to the last eligibility date (see Attachment 8). The district must inform the repatriate of their ability to submit this request and may assist them in completing it or may complete it on their behalf.

7. Loan Recovery or Recoupment

The repatriate's signature on the RR-05 obligates him/her to pay back to the federal government the costs of repatriation services received. The repatriate's obligation to repay begins when the repatriate's case is closed. The Payment Support Center for ORR notifies the repatriate of the amount to be repaid and how to make payments. The district is not involved in the actual loan repayment collection activity but must report the last known address of the repatriate. In order to facilitate this action, the district should stay apprised of the current postal and/or physical address of the repatriate and report it to OTDA's BRS upon request and on forms and reports when applicable.

A repatriate may request an extension of time to make payments or a waiver of payment by submitting the RR-03 Repatriation Loan Waiver and Deferral Request Form (see Attachment 4). Districts may also assist repatriates in submitting this form or may submit it on behalf of a repatriate. Eligibility determinations for waivers are made by ORR in accordance with 45 C.F.R. §§ 211.13 and 212.7. Districts should use the Code of Federal Regulations as a basis for assisting repatriates in submitting a waiver request. The action that ORR takes on the waiver request does not have any effect on the federal reimbursement to the district.

Certified mentally incompetent repatriates and unaccompanied minors whose relative did not sign a RR-05 are automatically waived of their obligation to repay.

B. Mentally Ill Repatriates

Many repatriates that come through USRP suffer from mental illness. Mentally ill repatriates may require additional assistance traveling to the U.S. and help accessing mental health assessment and treatment. DOS is responsible for obtaining a medical evaluation, mental health certificate, certificate of mental incompetence and arranging for an escort if applicable. If the repatriate has not been found to be incompetent, DOS will also provide him or her with the Privacy Act Waiver (PAW).

DOS and ISS-USA will try to obtain as much information as possible in order to develop an appropriate plan for travel, arrival and resettlement. In many cases, DOS is unable to obtain a Certificate of Mental Incompetence. As a result, ISS-USA can only process the case as a regular destitute repatriate, despite a known or suspected mental illness.

If requested, the district must pre-arrange for a psychiatric evaluation by a qualified mental health provider upon arrival to determine whether the repatriate is mentally competent and the need for care. In many localities there are crisis teams with mental health expertise who can assist with the process.

After the assessment is made, if the repatriate is found to be competent to make decisions, the district must provide him or her with a copy of the Repatriate Welcome Package (see Attachment 9) and explain the program and the requirement to repay the federal government for the cost of services received.

After the assessment is made, if the repatriate is found to be competent to make decisions, the district must follow the repatriation process, as described in section V, Part A, of this ADM.

If following the assessment, the repatriate is found to be incompetent to make decisions, he/she is not required to sign the RR-05 in order to receive services. A determination should be made by the qualified mental health provider regarding the need for care. The qualified mental health provider should follow the appropriate procedures to make this determination. If the repatriate requires hospitalization, the district must follow-up with the hospital social worker regarding the repatriate until it is determined the case should be closed.

C. Involuntary Repatriation

1. Repatriation of U.S. citizens is generally voluntary, but there are instances in which individuals are involuntarily returned to the U.S. Examples of involuntary repatriation include:
 - i. U.S. citizens imprisoned and being deported from a country after finishing a jail sentence.
 - ii. U.S. citizens who have been hospitalized for mental or medical illnesses who do not have health care benefits/funds/supports in the country where they are residing and do not wish to return to the U.S. but the host country government has requested repatriation or deportation of the citizen.
 - iii. U.S. citizens who do not have a valid immigration status in the country where they are residing and have come to the attention of the host county government and are being deported.
2. In involuntary repatriation cases, the district should consider the following:
 - i. A repatriate that has been convicted of a crime and completed his or her punishment is eligible for all of the same services as any other participant in the USRP.
 - ii. If there is a warrant for the repatriate, law enforcement may be notified by DOS when the repatriate returns to the U.S. Generally, DOS will provide information regarding outstanding warrants in the U.S. and law enforcement support that will be needed from local authorities in advance.
 - iii. Deportees may be transferred back to the U.S. by way of host country arrangements. In these cases, DOS has limited information and little or no control over the arrival time, location or date. Deportees are often transported to the nearest POE.
 - iv. The medical documentation provided by DOS may be used to arrange for the repatriate to undergo a mental health examination upon arrival in the U.S. If the repatriate is hospitalized pursuant to 24 U.S.C. §§ 322 or 324, treatment is generally determined in accordance with State laws in effect governing the detention for care and treatment of persons alleged to be mentally ill. However, if a request is made to release a repatriate, the patient cannot be detained more

than 48 hours (excluding any period of time falling on a Sunday or legal holiday) after the receipt of the request unless within such time (1) judicial proceedings for such hospitalization are commenced or (2) a judicial extension of time is obtained, for a period of not more than five days for the commencement of such proceedings.

D. Unaccompanied Minors

Unaccompanied minors are defined as children under the age of 18, not in the care of their parents or another adult legally designated to care for them. DOS is responsible for gathering information about the minor including his or her age, current living situation, and any special needs the minor may have. DOS also attempts to find the minor's parents or legal guardian. DOS will also look for relatives in the host country and the U.S., if necessary.

The determination of final destination is made by DOS. When determining the state of final destination, priority is given to the child's best interest, safety and resources available to meet his/her needs. However, if the district identifies a potential risk of harm to the child that is beyond the district's ability to prevent, then such finding must be communicated to OTDA's BRS to allow the opportunity to consider alternative locations for the child.

Repatriation of unaccompanied minors follows the same procedures previously described plus some additional actions and information relevant to the repatriate's status as a minor:

1. If DOS has located a parent or capable relative willing to care for the child in New York State, OTDA's BRS will contact the district where that individual or family resides and request a home study for the potential placement. DOS and ISS-USA will rely on the findings of the home study to affect the physical movement of the child from abroad to the district. If the relative does not have legal custody of the minor, the district will assist the relative in obtaining custody.
2. If DOS does not find a suitable relative in the U.S., OTDA's BRS will request that the district make arrangements for the child to be placed in the foster care system and file the appropriate legal petition for custody. The USRP does not reimburse foster care costs. Foster care services must be funded through the regular foster care plan of the district.
3. In planning for the child's arrival, the district must investigate the child's available child welfare services history in New York State and use the information to plan for the proper placement and services for the child. New York State Social Services Law (Section 422) limits district authority to share Child Protective Services (CPS) information. Therefore, no communication with OTDA's BRS, DOS or ISS-USA should disclose this type of information.
4. Unaccompanied minors are not required to sign the RR-05 in order to receive services. However, if a family member who will take custody of the child wishes to receive services, the family member must sign the RR-05.
5. Repatriation cases for unaccompanied minors are typically closed immediately upon arrival of the child when they are transferred into the physical custody of their relative who does not wish to seek additional services; or the district for placement in foster care.

E. Required Forms and Claims for Reimbursement

Claims for reimbursement of expenses incurred by districts for repatriation services are submitted manually to the OTDA Bureau of Financial Services. Districts must complete and submit the RF-7 Expenditure Statement for Reimbursement – Assistance to U.S. Citizens Returned from Foreign Countries (LDSS-931) (see Attachment 10). Reports should be submitted immediately after any assistance has been provided to a repatriate.

Submit completed RF-7 to:

OTDA, Bureau of Financial Services
40 N. Pearl Street, 14C
Albany, NY 12243

The form and instructions appear in the OTDA Fiscal Reference Manual, Volume 2, Chapter 3.

Simultaneously, the following documents must be submitted to OTDA's BRS at 40 N. Pearl Street, 10-D, Albany, NY 12243:

1. The **original** signed form RR-05 Privacy and Repayment Agreement, if applicable, with the initial reimbursement request.
2. The **original** signed form RR-06: Refusal of Temporary Assistance Form (see Attachment 7), if applicable, with the initial reimbursement request.
3. Completed form RR-04 Non-Emergency Monthly Financial Statement (see Attachment 5)
4. All supporting documentation for each individual expense (e.g. **original** receipts, bills, signed cash disbursement forms).
5. Case notes must be provided with detailed descriptions of the activities performed that are itemized with the spent time in hours and minutes (see Attachment 11: Sample Repatriation Activity Log).

Administration and case management costs are reimbursable to the district under USRP. Time spent on the program will be reimbursed at the current hourly rate. Claims made by the district for administration and case management costs are not included in the loan that the repatriates must pay back to the federal government.

OTDA obtains payment for USRP costs from ISS-USA and subsequently reimburses the districts.

Claims for reimbursement of expenses incurred by districts for repatriation services must not be submitted as part of a TA case.

VI. Systems Implications

None.

VII. Additional Information (Optional)

Repatriates often have limited English Proficiency (LEP). Per 06-ADM-05 and 17-INF-14, districts must provide meaningful access to benefits, programs and services to individuals with LEP by providing free and timely language assistance through the provision of oral interpretation and the translation of vital documents.

VIII. Effective Date

Immediately

Issued By

Name: Linda Glassman

Title: Deputy Commissioner

Division/Office: Division of Housing, Refugee Services and Disability Determinations/Bureau of Refugee Services