

# ASPE ISSUE BRIEF

OFFICE OF THE ASSISTANT SECRETARY FOR PLANNING AND EVALUATION  
OFFICE OF HUMAN SERVICES POLICY - U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

## DRUG TESTING WELFARE RECIPIENTS: RECENT PROPOSALS AND CONTINUING CONTROVERSIES

### Background

In the years since welfare reform transformed federal cash assistance for the poor into the time-limited, work-focused Temporary Assistance for Needy Families (TANF) Program, the issue of substance abuse among welfare recipients has arisen periodically as a policy and programmatic concern.<sup>1</sup> In recent years there have been vigorous policy debates focused on welfare policy with respect to persons with drug felony convictions<sup>2,3</sup> as well as proposals to require drug tests as a condition of eligibility.<sup>4</sup>

This paper discusses the prevalence of substance abuse among TANF recipients, how States typically address substance abuse in their welfare programs, the variety of drug testing proposals now under discussion in States, and legal and practical issues raised by drug testing proposals.

### How prevalent is substance use, abuse, or dependence among TANF recipients?

Studies of the prevalence of substance abuse among welfare recipients have varied widely in their findings, with rates of between 4 and 37 percent reported. Much of the difference in prevalence rates found in these studies is due to different data sources, definitions and measurement methods, particularly the different thresholds used to define substance abuse. Another key difference is whether alcohol abuse and/or the abuse of prescription drugs are included in the estimate. In addition, drug use and abuse is higher among single men in States' General Assistance (GA) caseloads than among single (largely female) parents on TANF. So studies that define welfare to include GA beneficiaries often find higher rates. Typically, lower end estimates of around 5 percent or less focus on indications of

### ABOUT THIS ISSUE BRIEF

*This ASPE Issue Brief examines recent State and federal legislative proposals to require drug tests as a condition of TANF program eligibility. During 2010 and the first half of 2011, 82 bills on this subject were proposed in 31 State legislatures and the U.S. Congress. This brief, which was prepared by Laura Radel, Kristen Joyce, and Carli Wulff of ASPE's Office of Human Services Policy, describes potential uses and limitations of drug tests in the context of welfare programs.*

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diagnosable abuse of or dependence on illicit drugs among TANF or (for early estimates) Aid to Families with Dependent Children (AFDC) Program clients. Higher rates, in the 10 percent range, tend to include any past month use of illicit drugs. Rates in the highest ranges (15 percent or more) usually define substance abuse to include alcohol abuse and include any past year (rather than past month) use of illicit drugs. The highest rate noted to date in any study, 37 percent,<sup>5</sup> included female welfare recipients reporting having used any illicit drug at least once in the past year and/or two or more binge drinking episodes in the past month (with binge drinking defined as having had 5 or more drinks on the same occasion or within a couple of hours).

Most studies of TANF recipients and persons receiving other types of means-tested government assistance find rates of substance abuse that are somewhat higher than those in the general population not on assistance, though not greatly so. Typical among these is a 2002 analysis of substance abuse among persons in families receiving government assistance conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA).<sup>6</sup> That analysis found that past month illicit drug use was reported by 9.6 percent of persons age 12-64 in families receiving government assistance (including Medicaid, SSI, cash assistance, non cash assistance, and Food Stamps), compared to 6.8 percent of persons in families not receiving assistance. Of public assistance recipients treated for substance abuse in 2008, the most common primary substance of abuse was alcohol (37 percent of those treated). Other common primary substances of abuse were heroin (19 percent), cocaine (18 percent), and marijuana (14 percent). Approximately 4 in 10 public assistance recipients who were admitted to treatment in 2008 had a co-occurring psychiatric disorder in addition to their alcohol or drug problem.<sup>7</sup>

## **What does federal TANF law currently say about substance abuse among program recipients?**

Federal law currently includes two provisions specifically related to TANF recipients' substance use, both added by the 1996 welfare reform law, the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA, P.L. 104-193). Both refer only to the use and abuse of illicit drugs. First, there is a provision that says States may require drug tests for welfare recipients and may penalize those who fail such tests (21 U.S.C. 862b). In addition, the law includes a lifetime ban on TANF and Supplemental Nutrition Assistance Program (SNAP, formerly Food Stamps) benefits for persons convicted of a drug-related felony, though States have the option of modifying or opting out of the ban (21 U.S.C. 862a), and many have done so. Some States also use a provision allowing the use of Individual Responsibility Plans to require substance abuse treatment for beneficiaries who need it, and to sanction for noncompliance with that plan (42 U.S.C. 608(b)).

It should be noted that while proposals to introduce drug testing in State TANF programs have proliferated in recent years, action with respect to the drug felon ban has moved in the opposite direction. An increasing number of States have opted out of the drug felon ban in recent years because the unavailability of benefits was found to hinder the successful social and economic re-entry of persons released from prison. As of 2009, 11 states imposed the TANF ban on all drug felons, 26 states and the District of Columbia had modified the ban to impose it only under certain conditions, and 13 states had opted out entirely. Common modifications to the ban include to apply it only to persons whose drug felonies involve drug manufacture, distribution, or trafficking; to place time limits on the ban; or to exempt individuals who complete substance abuse treatment. While some states opted out or modified the drug felon ban early, other state modifications are relatively recent. Seven states enacted legislation to modify or eliminate the TANF drug felon ban between 2004 and 2009.<sup>8</sup>

## How do States typically address substance abuse in their TANF programs?

States have struggled to decide whether substance abuse in the context of the TANF program should be addressed as a public health issue, a criminal issue, a social issue, or a moral issue. Prior to welfare reform, few States made efforts to identify whether clients had alcohol or other drug abuse problems. That changed under welfare reform as employment and self sufficiency became primary program goals. In a survey at the time TANF was first implemented, States identified screening for substance abuse as one of their top challenges related to assessing the job readiness of TANF clients.<sup>9</sup> In the TANF era, a variety of States have identified substance abuse as a barrier to employment and have established mechanisms to encourage substance abuse treatment for those who need it.<sup>10,11</sup>

Many states already conduct substance abuse screening and assessment either as part of their TANF intake processes or at some point later, such as after an unsuccessful job search or if a beneficiary quickly loses an initial job. These efforts are intended to determine whether substance abuse presents a barrier to employment. States use various screening and assessment approaches within their TANF programs and vary in their efforts to link program participants who have substance abuse disorders with substance abuse treatment. The most commonly used screening approaches are question and answer instruments which are designed to detect evidence of alcohol and illicit drug abuse and dependence, such as the Substance Abuse Subtle Screening Inventory (SASSI), which has been shown to be reasonably accurate in detecting problem substance use, including alcohol abuse, in a variety of populations.<sup>12</sup> Other more specialized approaches to substance abuse screening have also been tested, with some success.<sup>13</sup> Clients who screen as potentially having a substance abuse problem are then referred to substance abuse specialists for a fuller assessment of their substance use, functioning, and treatment needs. However, TANF programs typically identify and refer far fewer clients to treatment than would be expected based on prevalence rates.<sup>14</sup>

In recent years more than half the States have considered legislation that would require their welfare agencies to administer drug tests to TANF applicants and/or recipients, though few have enacted laws on the topic (see Appendix A for details). These proposals vary in their content on many dimensions. Of those actually enacted, a broad, suspicionless drug testing program in Michigan had operated briefly in 1999 before being suspended by the courts. (“Suspicionless” testing refers to programs that test either everyone or a random subset without having reason to believe that the individuals tested have used illicit drugs.) Arizona has been testing TANF recipients for whom they have reason to suspect substance abuse (i.e. “for cause”) since 2009.<sup>15</sup> Missouri and Florida each passed drug testing legislation in 2011. Missouri will be testing current beneficiaries for cause,<sup>16</sup> while the Florida program requires suspicionless testing of all applicants.<sup>17</sup> During the initial weeks since Florida’s program began operations, 2 percent of TANF applicants there have tested positive.<sup>18</sup> In addition, more than 20 Indian Tribes also use drug testing in their Tribal TANF Programs, primarily to identify individuals in need of further assessment and treatment as part of their job readiness activities (details appear in Appendix B).<sup>19</sup>

Legislative proposals on drug testing vary widely. Some focus on punishment and cost savings and would deny benefits to individuals who test positive without efforts to provide substance abuse treatment, without opportunities for benefits to continue for children, and without procedural safeguards to ensure the reliability of positive results. Proposals in this category include bills introduced in Kentucky and Oregon (see Appendix A for details). Others are oriented toward identifying clients who need substance abuse treatment in order to achieve employment and self sufficiency goals. Such

proposals, including bills in Connecticut, Illinois and New York, would require substance abuse evaluation and treatment as a consequence of testing positive. Still others include provisions related to child well-being, requiring that children's benefits be paid to a third party who will ensure benefits are spent to meet the children's needs. Proposals in Maryland, Rhode Island, and South Carolina, among others, include this feature.

## **What does drug testing reveal and what limitations are inherent?**

Positive drug tests are intended to identify whether an individual has used specific substances recently. The most common tests detect five specific drugs (amphetamines, cocaine, marijuana, opiates and phencyclidine (PCP)); tests for additional drugs are also available at additional expense. They function by detecting in the tested individual's bodily fluids or tissues (e.g. urine, blood, saliva, or hair) the substance itself and/or metabolites produced as the body breaks down the substance. How long a substance may be detected depends on how quickly the body fully metabolizes the substance. Urine drug tests, which are the least expensive and most frequently used form of drug test, can generally detect marijuana use within the past week; cocaine, heroin and other "hard" drugs used within the past two days; and alcohol use within the past several hours (though alcohol is not often included in drug screens). Drug tests cannot measure frequency of use, nor do they indicate the severity of impairment or whether an individual has a substance use disorder that requires treatment. In addition, without medical review and confirmation testing on initial positive results,<sup>20</sup> urine screens also cannot distinguish between the illicit use of street drugs and the legitimate use of certain prescription and over-the-counter drugs. For instance, a drug test cannot distinguish between prescribed Tylenol with codeine and illicit opiates. Improper testing procedures and mishandling of samples can also produce inaccurate results.<sup>21, 22, 23</sup>

Drug testing has significant limitations in its ability to identify welfare recipients with substance abuse problems. One study concluded that drug tests would misclassify, either positively or negatively, more cash assistance recipients than it would accurately identify as having a substance abuse problem in need of intervention. Estimates for false negatives included those who abuse alcohol or other substances not detected by the most commonly used drug tests and those whose most recent use was not within the short window within which metabolites are detectable by urine screens. False positive results included users whose legitimate prescription drug use would be detected, persons with medical conditions (e.g. kidney disease) that can cause inaccurate results, as well as occasional users detected by the screen but who are not in need of treatment.<sup>24</sup>

Testing of hair rather than urine is often promoted because it is less invasive and can detect drug use over longer time periods. Hair tests cannot detect very recent drug use but do detect use that has occurred between (approximately) 10 and 90 days prior to the test (depending on the length of the hair). In addition to being more expensive than urine testing, however, hair testing raises several important concerns. As compared with urine drug tests, hair testing may more frequently result in positive results because of external (i.e. passive) exposure to drugs or chemicals. Hair treatments, such as coloring or straightening, can also affect the results of hair tests, making it more difficult to detect drug use. In addition, hair testing is not used in some Federal criminal justice proceedings because there is some evidence that naturally dark hair (e.g. that of African Americans and Asians) is more likely to test positive than lighter hair, leading to concerns of racial bias in the effects of testing programs.<sup>25</sup>

One study has examined the specific limitations of drug testing welfare recipients. A pilot test of a drug testing regime for welfare recipients in Florida concluded in 2003 that drug testing “did not produce reliable estimates of the level of drug use among TANF recipients.”<sup>26</sup> In particular, many recipients determined through a validated screening tool as likely to have a substance abuse problem nonetheless tested negative in urine drug screens. Studies have also found recipients’ drug use is largely unrelated to welfare exits,<sup>27</sup> long welfare stays, repeat welfare use or the length of time spent on welfare,<sup>28</sup> and is of only minor relevance in predicting employment success among welfare recipients.<sup>29</sup> However, one study did find that welfare reform led to declines in drug use and increased substance abuse treatment utilization among women at risk for relying on welfare.<sup>30</sup> The study concluded that there is evidence that the effects operated through both sanctions and work incentives. That is, drug users were discouraged from participating in the TANF program and those who found employment reduced their recreational use of illicit drugs. It should be noted, however, that the research base is weak and the few existing studies have not used rigorous methodologies.

## **What are the similarities and differences among TANF drug testing proposals being considered by the states?**

During 2010 and the first half of 2011, legislators in 31 states have proposed 82 bills that would require drug tests of TANF applicants and/or recipients.<sup>31</sup> There was also one proposal each in the U.S. House of Representatives and Senate. The many current legislative proposals differ on their features and are summarized in Appendix A. Features that differ widely among the bills include the following:

- Is the intent of the proposal to identify those in need of treatment or to exclude from assistance those with substance use disorders?
- Who is tested, applicants, persons receiving assistance, or both?
- Is testing “for cause,” (i.e. because some behavior provides a reason to suspect substance abuse) or is either everyone or a random sample tested without suspicion?
- What consequences result from a positive test?
- Are there procedural protections against false positive results?
- Are there restrictions to prevent disclosure and misuse of test results?
- Does the proposal include features intended to protect children from negative consequences of the denial of benefits?
- Does the State or do clients pay the up-front costs of drug tests?

The legislative proposals identified differ in the populations that would be subject to drug testing. Of the bills, 50 State bills plus the two congressional bills would require that applicants be tested, 35 State bills would require suspicionless testing of current recipients, and an additional 26 would test current recipients for cause. In addition, while nearly all bills focus on testing adult applicants or recipients, a small minority of State bills would require youth aged 13 or older be tested and proposed legislation in one State would require that all benefit recipients, including children under 12, be tested.

Consequences for a positive test vary. Most commonly, 55 bills would automatically deny benefits to those testing positive (for varying lengths of time from 90 days to several years), while 24 either require substance abuse evaluation and treatment or provide referral to services. For States providing treatment or referral services, some bills allow benefits to continue during treatment and many allow for earlier reapplication upon completion of treatment. About one-third of State bills provide for children and other family members to continue to receive the benefit (usually paid to a third party) if

the adult is either in treatment or is ineligible for benefits as a result of a positive test. In addition, while not mentioned in the statutory language, news reports regarding the implementation of Florida's new TANF drug testing law indicate that parents testing positive will be reported to the State's child abuse hotline.<sup>32</sup>

Fewer of the legislative proposals include procedural safeguards to protect against false positive results or the use of drug testing data for purposes unrelated to the TANF program: 24 allow for retesting, 13 note that results may not be used for criminal prosecution, and 12 would allow for administrative hearings or appeals. Eleven bills would require recipients to pay for the costs of testing, although some States would reimburse those who test negative.

## **On what basis have recent TANF drug testing programs been challenged in court?**

Drug testing is a common pre-employment condition among private employers. Testing by the government has resulted in Constitutional challenges – the most recent one involves a challenge to Florida state law. Courts have upheld the legality of drug testing by government agencies for individuals in sensitive positions and when public safety is involved, as well as for persons involved in accidents on the job and for certain public school students. Testing when there are specific reasons to suspect drug use is also allowed. However, courts have struck down suspicionless drug testing requirements when they have determined there is no real public safety issue.<sup>33</sup>

Michigan's 1999 program of suspicionless drug testing of TANF recipients was suspended by the courts after operating only a few weeks, and Florida's recently implemented policy of testing applicants is the subject of a pending challenge. The primary issue in the Florida challenge is whether such testing violates the Constitution's Fourth Amendment prohibition against unreasonable searches and seizures, which prevents the indiscriminate searching of individuals. Plaintiffs argue that since suspicionless testing involves no reasonable cause to suspect the individuals tested and courts have definitively ruled that drug tests constitute searches, suspicionless testing should not be allowed under the Fourth Amendment. Also at issue in some disputes in this area is the adequacy of due process protections provided to persons for whom a positive drug test results in the suspension of benefits. The Fifth and Fourteenth Amendments require that the government make available safeguards to prevent an individual from being deprived of property through arbitrary processes or results. In the context of drug testing, due process typically includes assuring that drug tests are processed by reputable, certified labs that conform to federal specifications, conducting more accurate confirmatory tests when initial results are positive, and having positive results reviewed by a Medical Review Officer who can determine whether the results may be due to legally obtained prescription drugs or medical conditions that may influence test results.

Drug testing by government agencies as a condition of eligibility for public benefits is an area of active litigation.<sup>34</sup> Governmental entities interested in conducting drug tests should examine relevant statutory and case law before implementing such requirements.

## **How much does it cost to implement drug testing in TANF programs?**

The estimated cost of drug testing TANF applicants and recipients varies by State and proposed law, depending on the proposed number of individuals who would be tested and the range of activities for

which costs were estimated. Aggregate cost estimates of proposed welfare drug testing legislation were identified for twelve States (see Appendix C for details). The estimated costs in these States ranged from \$92,487, for drug testing 20% of recipients and treating 2% of those tested in Louisiana, to \$20 million, for just the testing of all public assistance applicants and recipients in New York. Other estimates include the cost of increasing staff to monitor or administer the tests, as in Maryland and Missouri. Idaho's estimate includes the cost of making programming changes to the State's information system. Florida's law and Alabama's proposal require the applicant or recipient to pay for the up-front costs of the drug test, though both would reimburse those who test negative. Most estimates do not incorporate costs relating to increased substance abuse treatment utilization or to increased child welfare interventions.

Examples of costs used in State cost estimates include:

- Purchasing the drug tests, including initial and retests
- Laboratory fees
- Staff time to administer the tests
- Staff time to monitor compliance and eligibility
- Staff time to deal with increased administrative hearings
- Modifying facilities to accommodate the testing
- Modifying computer programs to include drug testing in eligibility
- Substance abuse treatment
- Hiring a contractor to administer the tests
- Legal fees if the law is challenged

None of the State cost estimates identified for this paper showed net savings resulting from proposed drug testing programs, though these are all legislative cost estimates rather than rigorous cost-benefit analyses. Also, none of the State cost estimates identified described anticipated unit costs of drug testing programs. However, an article from a magazine published by The Society for Human Resources Management reported in 2005 that, "testing an applicant or employee ranges from \$25 to \$44 for urinalysis... [while] hair follicle testing costs \$75 to \$150 per test."<sup>35</sup> News reports regarding the implementation of Florida's new drug testing policy have cited an estimate of \$30 per TANF recipient for the drug tests being required of applicants,<sup>36</sup> though the State's drug testing pilot program in the early 2000s cost \$90 per test once staff costs and other program costs were included.<sup>37</sup> Testing costs among the Indian Tribes that currently administer drug tests in their TANF programs ranges from \$15 per client to \$89 per client, with most reporting unit costs in the range of \$30 to \$50.<sup>38</sup>

## **What impact does drug testing of TANF applicants and recipients have on objectives, such as cost savings, child well-being and increased employment?**

**Cost Savings.** As noted above, some States anticipate drug testing TANF applicants and recipients will save money. Those who would fail the test, do not comply with the test, or are deterred from applying knowing they would be tested would help decrease the public assistance rolls. These savings, particularly savings from deterrence, are difficult to measure. However, none of the legislative costs estimates we identified estimated net savings as a result of the proposed drug testing programs. For instance, an analysis of Idaho's public assistance programs estimated savings from removing or deterring people with substance abuse issues at \$1.12 million. The cost of drug testing and treating all approved applicants was estimated to cost between \$1.2 and \$1.3 million.<sup>39</sup> In Louisiana, as noted above, drug testing for 20% of TANF recipients and treatment for those (2%) who test positive has been

estimated to cost \$92,487, while savings were expected to be \$31,248 for those who do not comply and have their benefits terminated. The net cost for Louisiana's proposal was estimated to be \$61,239.<sup>40</sup> The newly enacted Florida law would allow TANF applicants who failed the drug screen to designate a payee for their children to continue to be able to receive benefits. This provision would decrease the potential savings of drug screening in that State since only savings from the adults' benefits would be realized.<sup>41</sup> Savings would also be reduced if substance abuse treatment and child welfare costs that are likely to be incurred outside the TANF program were included.

**Child Well-Being.** Few proposals suggest child well-being improvements as a result of drug testing, though provisions for protective payees for children's benefits are intended to ensure funds are spent on children's needs. Proposals that sanction families by definition reduce the income available to the family and may therefore decrease child well-being. Sanctions and benefit decreases have been shown to increase the risk that children will be hospitalized and face food insecurity.<sup>42</sup> An Idaho analysis also suggests that children may be harmed unintentionally by drug testing programs because parents may refuse to apply for benefits knowing they will face drug testing or may refuse to complete treatment.<sup>43</sup> On the other hand, deterrent effects of drug testing may lead welfare applicants to reduce drug use, with potential positive effects for children. These potential effects, both positive and negative, are speculative. No rigorous research has investigated the impacts of TANF drug testing requirements.

**Increased Employability.** Some proponents of drug testing for TANF applicants and recipients support the practice because they believe testing will deter and/or detect and remediate substance abuse, which is seen as a barrier to employment. Little evidence is available to evaluate this proposition. An evaluation of a Florida drug testing pilot found that those welfare recipients who tested positive for drugs had similar employment outcomes as others on TANF. Florida's drug screening and testing pilot for TANF was implemented from January 1999 to May 2001. A total of 8,797 applicants and recipients were tested and 335, or 3.8%, tested positive for a controlled substance. Florida State University conducted an evaluation of the pilot and found that there was very little difference in employment and earnings between those who tested positive versus those who tested negative and concluded that the cost of the program did not justify the outcomes achieved and the program did not warrant full implementation.<sup>44, 45</sup> The study's review of the research evidence concluded that drug use is not a major barrier to employment for welfare recipients.<sup>46</sup> The authors of the Florida study caution that a disproportionate emphasis on drug use as a barrier to employment could be ineffective if other major barriers, such as physical and mental health problems, lack of job skills, and lack of transportation, are ignored. It should be noted that few drug testing proposals include substance abuse treatment components, making deterrence the primary mechanism through which decreased drug use or increased employment could result.

## Summary

Most estimates find that 5 to 10 percent of welfare recipients have substance abuse problems, rates that are a few percentage points higher than those found in the general population. These rates generally include only illicit drugs. However, as in the general population, alcohol abuse is the most prevalent substance abuse problem among welfare recipients. Drug tests detect recent drug use, but provide no information about frequency of use, impairment, or treatment needs.

The majority of states have active legislative proposals regarding drug testing of TANF applicants or recipients, though only a few have approved legislation and currently only Florida is conducting

suspicionless testing of TANF participants. The Florida drug testing program is currently under legal challenge. Bills being considered in state legislatures vary significantly on many features, including who is tested and under what circumstances, whether substance abuse assessments and/or treatment are made available to those who test positive, and whether the proposals include features intended to prohibit the misuse of information obtained and/or to protect the well-being of the children in households denied benefits.

## Appendix A: 2010 and 2011 Federal and State Legislative Proposals on TANF Drug Testing

State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
US Congress	S. 83 and H.R. 1769(2011)	Referred to committee	Requires states to certify that TANF applicants have been drug tested and states may include continued (random or set) testing of recipients	Not specified	Controlled substance as defined in section 102 of the Controlled Substance Act.	Not specified	Ineligible for benefits for positive test for two years (or for drug related crime after bill is in effect). No benefit at any time for three positive tests or three convictions.	States determine rehabilitation and treatment programs. Recipients may continue receiving benefits and must have clean drug test 6 months after entering treatment for continued receipt.	
Alabama	Senate Bill 496 (2011)	Pending Committee Action	Any person applying for temporary cash payments (dependent children under 18 are excluded)	Chemical, biological or physical instrumental analysis	Drug which are prohibited by law and include, but not limited to: amphetamine, tetrahydrocannabinol, oxycodone, cocaine, phencyclidine, opiate, barbiturate, benzodiazepine, methamphetamine, propoxyphene, tricyclic antidepressant, without a valid prescription	May retake the test one or more times	Ineligible for benefit for one year	Reapplication allowed after 6 months for documented treatment completion; If parent is ineligible, child remains eligible and payment is made to designated payee	Cost of test is responsibility of person being tested, but if person passes test, the amount of the test is added to first TANF benefit paid
	House Bill 157 (2011)	Pending Committee Action	Random testing of adult applicants plus required testing for someone who appears or acts in way that suggests they may be	Blood or urine	Schedule I, Schedules II-IV without valid Rx	Results not admissible in criminal proceeding without consent of person tested	Ineligible for benefits		

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State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
			under the influence						
Arizona	House Bill 2011b Senate Bill 1011 (2010)	Transmitted to governor and signed	All adult recipients receiving TANF with reasonable cause	Not specified	Controlled substances without Rx		Ineligible for benefits for one year		All bills have identical language
	Senate Bill 1620 (2011)	Transmitted to governor and signed	All adult recipients receiving TANF with reasonable cause	Not specified	Controlled substances without Rx		Ineligible for benefits for one year		Same language as 2010 bills
California	Senate Bill 384 (2009) and Assembly Bill 730 (2011)	Introduced	Random testing to determine ongoing eligibility	Unspecified "chemical" test	Schedule I, Schedule II (cocaine, opium, phencyclidine, methamphetamine), prescriptions without Rx		Benefits discontinued if treatment is not completed	1 year treatment program to continue receiving benefits	2009 and 2011 language nearly identical
Connecticut	Senate Bill 395 (2011)	Referred to committee	Periodic testing on all recipients over 18	Not specified	Illegal drugs		1st positive test: evaluation with either required education or treatment, 2nd positive test; same; 3rd positive test or for those who refuse treatment, benefits terminated	Treatment or education required for continued receipt	
Florida	House Bill 353 and Senate Bill 556 (2011)	Signed into law	All applicants (excludes dependent children under 18)	Not specified, but consistent with Florida statute 112.0455 (also	Not specified	Retesting allowed	Ineligible for benefit for one year (3 years after 2nd positive test)	Treatment information provided; Reapplication allowed after 6	Cost of test is responsibility of person being tested, but if person passes test,

## Appendix A: 2010 and 2011 Federal and State Legislative Proposals on TANF Drug Testing

State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
				vague)				months for documented treatment completion; If parent is ineligible; child remains eligible and payment is made to designated payee	the amount of the test is added to first TANF benefit paid; reads very similar to AL bill
Georgia	House Bill 464 (2011)	Introduced	Each recipient would be tested randomly once a year	Not specified	Marijuana or controlled substances without valid Rx	Retesting allowed; results not used for other purposes	Ineligible for benefit until clean test (2nd failure leads to two years of ineligibility)		Testing cost to be deducted from benefits
Iowa	House File 356 and Senate File 90	Both referred to committee	Adult applicants (at application) and recipients (annually, assigned random month)	Blood or urine (Senate bill has additional specifications)	Marijuana or controlled substances without valid Rx	Not admissible in court without consent (Senate includes language about confirmatory test for positive test and provision that person tested is able to request 2nd confirmatory test)	Ineligible for benefits		Costs deducted from benefits
Illinois	House Bill 11 (2011)	Referred to committee	May be required as condition of eligibility (to begin as pilot program in 3	To be reported by Department of Human Services annually	To be reported by Department of Human Services annually	Mandatory re-test of original sample	Ineligible for benefits if not participating in drug treatment program		

## Appendix A: 2010 and 2011 Federal and State Legislative Proposals on TANF Drug Testing

State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
			counties) [not required for individuals over 65]						
Illinois (continued)	House Bill 1402 (2011)	Referred to committee	Random testing of applicants	To be reported by Department of Human Services annually	To be reported by Department of Human Services annually		Ineligible for benefit for 1 year	Treatment must be completed within 60 days to continue to receive benefit (plus clear test after treatment is over); other family members remain eligible	Requires testing to file for nomination for state senator or representative
Indiana	House Bills 1452 and 1559 and Senate Bill 568 (all 2011)	Referred to committee	Universal testing of applicants; recipients over 18 to be tested based on reasonable suspicion	Urinalysis	Controlled substances without Rx	Appeals available, all positive samples are retested before action is taken	Ineligible for benefit for 1 year	If completing rehab program, TANF benefits available on day of treatment completion; child remains eligible	Includes language about exclusion from Medicaid for positive test; drug testing language similar between all bills
Kentucky	House Bill 208 (2011)	Referred to committee	All applicants and ongoing recipients (recipients tested once each year by random month assignment)	Urinalysis or blood test	Schedule I, Schedules II-IV without valid Rx	Results not admissible in criminal proceeding without consent of person tested	Ineligible for benefit		
	House Bill 402 (2011)	Referred to committee	Applicants and ongoing	All complete pencil/paper questionnaire; blood or urine test required if questionnaire responses indicate a possible issue	Schedule I, Schedules II-IV without valid Rx	Results not admissible in criminal proceeding without consent of person tested	60 day grace period for positive test followed by re-test (paid for by person being tested); if this test is positive, benefits are terminated	Child and other family members remain eligible	

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State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
Louisiana	House Bill 611 (2010)	Referred to committee	Expands mandatory drug testing to all adult recipients receiving cash assistance (FITAP)	Whatever is most cost effective	At minimum: marijuana, hashish, cocaine, opiates, methamphetamines, benzodiazepines, amphetamines, and phencyclidine	Follow up tests permitted for those who fail initial screening			
	House Bill 617 (2010)	Passed in House, Referred to committee in Senate	20% of applicants and recipients tested (down from 50% in previous legislation)	Whatever is most cost effective	At minimum: marijuana, hashish, cocaine, opiates, methamphetamines, benzodiazepines, amphetamines, and phencyclidine				
	House Bill 7 (2011)	Passed in House, Referred to committee in Senate	Possible drug testing	Not specified					Nearly identical to HB 617 (2010) added specification on random testing and clarifies funding issues
Massachusetts	House Bill 974 (2011)	Referred to committee	Random testing for those receiving benefits who have prior drug-related conviction	Not specified	Not specified		May be ineligible to receive benefits if not going through treatment	"Remedies" will be provided to those with positive test	
Maryland	House Bill 585 (2011)	Unfavorable report by appropriations; withdrawn by sponsor	Adult recipients receiving benefits	Not specified	Controlled, dangerous substances	Not specified	Ineligible unless treatment is undertaken or after 90 days and negative test if no treatment is available	Benefits can resume when treatment is completed; child and other family members remain eligible	

## Appendix A: 2010 and 2011 Federal and State Legislative Proposals on TANF Drug Testing

State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
Michigan	House Bill 4409	Passed in House, Senate referred to committee	Substance abuse treatment/testing for those failing to meet compliance goals	Not specified					Original bill included language about a pilot program for drug testing for eligibility but was not included in the bill that passed the House
Minnesota	House Bill 3698 (2010)	Referred to committee	Initial eligibility and ongoing extension of benefits	Not specified	Not specified		Ineligible until negative drug test, if more than 2 tests failed there is 30% reduction in benefit for assistance unit, 3rd failure and recipient is permanently disqualified from cash AND food	Agency required to conduct assessment and offer services; Benefit for entire assistance unit paid in vendor form for shelter and utilities	
	House Bill 1120 (2011)	Introduced	Initial eligibility and random screening of ongoing recipients	Not specified	Drugs and alcohol	Not specified	Ineligible for benefits until a pattern of negative test results is established	Not specified	Applicant/recipients must pay for test
Mississippi	House Bill 122 (2010)	Died in committee	Random tests of recipients over 13 to determine ongoing eligibility	Not specified	Controlled substance without valid Rx		Ineligible for benefits, 2 later, clean tests before benefits are reinstated (not less than 3 months apart)		Persons failing test are required to pay the cost of test

## Appendix A: 2010 and 2011 Federal and State Legislative Proposals on TANF Drug Testing

State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
Mississippi (continued)	House Bill 675 (2010) and House Bill 660	Died in committee	Random tests of recipients over 13 to determine ongoing eligibility	Not specified	Controlled substance without valid Rx		Ineligible for benefits for not less than 90 days and requires another drug test		Bills are very similar
	Senate Bill 2853 (2010) and Senate Bills 2759 and 2011 (both in 2011)	Died in Committee	Random testing of recipients	Not specified			Ineligible for benefits for 1 year (for Senate Bill 2011, length of termination determined by number of positive tests)		
	House Bill 1291(2011)	Died in Committee	Any person over 18 receiving benefits	Not specified			First positive test: no benefits for 90 days, 2nd positive test: no benefits for 180 days, 3rd positive test, no benefits for one year (after which time an additional test is administered)		
Missouri	House Bill 73 (2011)	Passed House and Senate, signed by the Governor	Work-eligible applicants and recipients with reasonable cause	Not specified	Controlled substance without valid Rx	Administrative hearing before benefits are denied	Ineligible for benefits for one year	Referral to drug treatment program; Children and other household members otherwise eligible can continue to receive benefits through 3 <sup>rd</sup> party payee	
	Senate Bills 5, 7, 74 and 169 (combined)	Introduced	At time of application or interim change, case workers may file report on	Not specified	Controlled substance without valid Rx		Ineligible for benefits for 2 years unless treatment is completed	Referral to treatment program; child and other family members remain eligible	

## Appendix A: 2010 and 2011 Federal and State Legislative Proposals on TANF Drug Testing

State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
			applicants or recipients of TANF for child abuse that results from substance abuse (leads to subsequent testing)						
Nebraska	HB 221 (2011)	Referred to committee	Applicants and recipients with probable cause	Not specified	Controlled substance without valid Rx	Administrative hearing to determine if positive test is accurate, decision of hearing may be appealed	Ineligible for benefits for one year	Referral to substance abuse treatment program	
New Mexico	House Bill 210 (2011)	Died in committee	Recipients with individualized suspicion and as condition of eligibility	Blood, hair, or urine	Controlled substance without valid Rx	None specified	If treatment is refused, ineligible of benefits for one year and until treatment is completed	Automatic treatment referral; benefits continue if in treatment	
New York	A04474 (2011)	Refer to social services	Adult applicant or recipient over 18	Urinalysis	Alcohol and/or substance abuse		Ineligible for benefits (for first failing to participate in treatment, denial lasts 45 days or until person participates in treatment)	Social service agency refers for treatment; other family members receive public assistance through safety net assistance	
	A 227 and A174 (2011)	Refer to social services	Applicants who are otherwise eligible	To be established by commissioner	To be established by commissioner	None specified	Required to undergo treatment, otherwise ineligible for benefit	Treatment required for positive test (or benefits terminated)	

## Appendix A: 2010 and 2011 Federal and State Legislative Proposals on TANF Drug Testing

State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
North Carolina	Senate Bill 121 (2011)	Refer to committee	Applicants and recipients	Not specified	Substance abuse	None specified	Required to undergo treatment	Treatment required	
Oklahoma	House Bills 1407,1649, 1939, and 2532; Senate Bills 390, 769, 1392, and 2112 (all 2009)	All bills but 390 and 1392 Referred to Committee; 390 passed Senate, sent to house, passed house but unable to agree in committee	Applicant as condition of eligibility				Ineligible for benefits	(Senate bill allows for treatment and receipt of benefit if in treatment)	House Bills have same, very basic, language
	House Bill 1083 (2011)	Referred to committee	Applicants for state benefits (including spouses and dependents) and every 180 days ongoing	Urinalysis	Limited to Schedule I substances	Retest and appeal allowed	Ineligible for benefits (applicants for 90 days, recipients for 1 year)	Children under 12 are tested every 2 years and if positive for drugs are referred to family and child services	Costs deducted from first month benefits
	Senate Bill 538 (2011)	Referred to committee	Random testing of recipients of benefits	Not specified	Not specified	None specified	Ineligible for benefits for failure to comply with substance abuse program	Substance abuse program referral for positive tests and test refusal	State elected officials subject to same testing requirements
	House Bill 1067 (2011)	Referred to committee	Recipients	Not specified	Not specified	Confirmatory test necessary	Ineligible for benefits	None	
Oregon	Senate Bill 538 (2011)	Referred to committee	Required for initial eligibility and every six months thereafter	Not specified	Not specified		Ineligible for benefits for 2 years		

## Appendix A: 2010 and 2011 Federal and State Legislative Proposals on TANF Drug Testing

State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
Pennsylvania	House Bills 860 and 1856 and Senate Bill 832 (all 2009); and House bill 1297 Senate Bill 719 (2011)	All bills but House Bill 1297 referred to committee; House Bill 1297 passed House and referred to committee in Senate	Required for ongoing eligibility (all recipients over 18 and under 75)/random selection of no less than 20% in 6 month period	Urine sample (for H.B. 1297, urinalysis, blood, or other scientific study allowed)	Controlled substance defined by section 2 P.L. 233, no 64	Re-tests allowed, test result not to be shared with law enforcement	Ineligible for benefits	Free treatment available	House bills are very similar, Senate bill is more concise but similar
South Dakota	House Bill 1152 (2011)	Referred to committee, amendment to require suspicion failed in House, no further action	Random screening of any adult recipient	Not specified	Controlled substance without valid Rx	For those who test positive, entitled to administrative hearing to determine test validity and contest suspended benefits	Ineligible for benefits for 1 year	Referred to appropriate professional or agency assistance	
	House Bill 1120 (2011)	Referred to committee	Applicants or recipients with reasonable cause	Blood or bodily substance	Controlled drug or substance	Not specified	Ineligible for benefits for 1 year; those who refuse to take a test are ineligible for 6 months	Not specified	
Rhode Island	House Bill 6249	Referred to committee	All adult cash welfare applicants	To conform with standards from Department of Health	Controlled substance	Additional tests allowed under conditions to be specified	Ineligible for benefits for 1 year for first positive test and 3 years for second positive test; those completing treatment may reapply after 6 months	List of treatment facilities provided but cost of treatment is not covered; Children remain eligible with payment made to protective payee	Applicant must pay for test but benefit will be increased by test amount if test is negative

## Appendix A: 2010 and 2011 Federal and State Legislative Proposals on TANF Drug Testing

State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
South Carolina	House Bill 4358 (2011)	Referred to committee	Adult TANF applicants	Not specified	Controlled substance	Additional tests allowed under conditions to be specified	Ineligible for benefits for 1 year for first positive test and 3 years for second positive test; May reapply after 6 months with documented completion of treatment	List of treatment facilities provided but cost of treatment is not covered; Children remain eligible with payment made to protective payee	Applicant must pay for test but benefit will be increased by test amount if test is negative
Tennessee	Senate Bill 48/House Bill 230 (2011)	Referred to committee	Recipients with reasonable cause	Not specified	Controlled substance without valid Rx	Automatic re-test to rule out false-positive, with opportunity to appeal the re-test	Ineligible for benefits for 1 year		
	House Bill 365 (2011)	Referred to committee	All applicants before benefit is given; recipients at least yearly afterward	Blood or urine	Schedule I, Schedules II-IV without valid Rx	Results not admissible in criminal proceeding without consent of person tested	Ineligible for benefits		Fiscal note mentions that suspicionless testing is unlawful (so there will be no cost)
	House Bill 0957/ Senate Bill 0652 (2011)	Referred to committee	Each adult recipient who is otherwise eligible for public assistance or who the department has reasonable cause to believe engages in the illegal use of controlled substances	Not specified	Controlled substance without valid Rx	Given opportunity for appeal	Ineligible for benefits for 1 year unless seeking treatment	Opportunity for treatment before or after positive test with continued benefits	

## Appendix A: 2010 and 2011 Federal and State Legislative Proposals on TANF Drug Testing

State	Bill Number (and year)	Status (as of 6/15/2011)	Target Population	Testing Method	Substance(s) Included	Procedural Safeguards	Consequences of a Positive Test	Is Substance Abuse Treatment or Child Well-Being Addressed?	Other/Comments
Tennessee (continued)	Senate Bill 983 (2011)	Referred to committee	As condition of eligibility (initial or ongoing not specified)	Not specified	Substance abuse	Automatic re-test to rule out false-positive, with opportunity to appeal the re-test			
Texas	House Bill 139 (2011)	Introduced	Each adult applicant to determine eligibility	Not specified	Controlled substance without valid Rx	Automatic re-test and opportunity for public hearing	Ineligible for benefits for 1 year	Child remains eligible	
Virginia	House Bill 925, Senate Bill 59, Senate Bill 781 and House Bill 2154, House Joint Resolutions 616 and 87 (all 2010)	925, 59, and 2154 left in committee, 781 passed Senate and House left in appropriations	Applicants and recipients screened to determine probable cause	"Standardized screening instrument"	"illegal substances"		Ineligible for benefits for 1 year	Child remains eligible through payments to 3rd party	
West Virginia	House Bill 3079 and House Bill 2965 (All 2011)	Referred to committee	Random test of all applicants and recipients plus probable cause testing	Commissioner of Division of Human Services will determine	Not specified	2 tests required before benefits are denied (tests are 30 days apart and denial cannot happen until 2nd test); test results not shared for other purposes	Ineligible for benefits for 2 years	Benefits remain for those in treatment	As part of bill, legislators must also be tested and they lose pay and benefits (but no job) for positive test, nearly same wording between two bills

## Appendix B: Tribal TANF Drug Testing Policies

Region	Tribe	Target Population	Universal, Random, or for Cause?	Frequency of Testing	Substances Covered	Consequences of a Positive Test
V	Forest County Potawatomi	Applicants and ongoing recipients	Random	For those with initial positive tests, additional tests for monitoring purposes could be required for a year or longer.	Alcohol and other drugs, including prescription drugs	Test refusal results in suspicion (1 <sup>st</sup> refusal) or termination (subsequent refusal). Those who test positive are required to have a substance abuse assessment and must comply with follow-up requirements under an employability plan.
V	Lac du Flambeau	Applicants and ongoing recipients	Universal	At initial application, 90 days after testing positive a second time, and annually for ongoing clients	Benzodiazepines, barbiturates, marijuana, mehaqualone, oxycodones, propoxyphane, amphetamines, cocaine, methadone, opiates, phencyclidine	Refusal to take the test results in failure to open a new case or closure of an existing case. First failure results in mandatory AODA referral; second failure closes case for 90 days; third and subsequent failures close case for one year.
V	Menominee Tribe	Applicants	Universal	Upon application and then at least annually. For cause testing may be conducted at any time.	Cocaine metabolite, marijuana, opiates, amphetamines, phencyclidine, nitrites, and chromium	Refusal to take the test results in ineligibility. Current recipients who either test positive or refuse testing must obtain a substance abuse assessment and may be sanctioned or terminated from benefits for noncompliance with their treatment plan.
V	Oneida Tribe <sup>1</sup>	Applicants and ongoing recipients of cash payment assistance	Universal	When approved for TANF cash payment assistance	Marijuana, amphetamines, benzodiazepines, sedatives, oxycotin, cocaine; tricyclic-antidepressants, opiates, propoxyphene (Darvon, Darvocets), barbiturates, and phencyclidine	Refusal to take the test results in denial of TANF services for 90 days. Those testing positive are referred for a substance abuse assessment and treatment/counseling recommendations become part of the individual's employability plan. Noncompliance results in 90-day closure of TANF cash payment.
V	Sokaogon	Participants who self-report a drug felony conviction	Universal for the specific target population	Not provided	Amphetamines, cannabinoids, cocaine, opiates, and PCP	Requirements to participate in rehabilitation.
V	Stockbridge-Munsee Tribe	Applicants and ongoing recipients	Universal for applicants; ongoing recipients are tested randomly and may be tested for cause	At application and randomly thereafter	Marijuana, opiates, phencyclidine, cocaine, and amphetamines	Refusal results in denial of application or case closure for ongoing recipients. Positive test for ongoing recipients results in vendor voucher payments for a minimum of 3 months, a substance abuse assessment is required.

<sup>1</sup> New program to be implemented pending approval from the Tribe's legal department.

## Appendix B: Tribal TANF Drug Testing Policies

Region	Tribe	Target Population	Universal, Random, or for Cause?	Frequency of Testing	Substances Covered	Consequences of a Positive Test
VI	Muscogee-Creek Nation <sup>2</sup>	Ongoing recipients (family cases only)	Not reported	Not reported	Not yet determined	Substance abuse assessment and treatment compliance.
VII	Winnebago	Ongoing recipients	Random and for cause	The case managers try to test at least five clients a month. If a client is initially positive, the case manager tries to re-test at least every other month.	Opiates, marijuana, methamphetamine, cocaine, and amphetamines	Client is reported to child protective services and vendor payments are made until treatment recommendations have been completed.
VIII	Confederated Salish and Kootenai Tribes	Applicants	Universal	At application and if they are off the program for more than 30 days	Marijuana, cocaine, amphetamines, opiates, methamphetamine, and oxycotin/codone	Referral to child protective services and required substance abuse assessment. Treatment/follow-up recommendations are incorporated into the client's Individual Family Plan.
VIII	Chippewa Cree Tribes of the Rocky Boy Reservation	Applicants and ongoing recipients	Universal at application and random thereafter	At application and then annually	Amphetamines, barbiturates, cocaine, marijuana, opiates, oxycodone, phencyclidine, and alcohol	Required substance abuse assessment and compliance with treatment plan.
IX	Yurok Tribe	All adult members of TANF households, applicants and ongoing recipients	Universal at application, both random and for cause thereafter	At intake and then annually	Amphetamine, methamphetamine, cocaine, opiates, marijuana, phencyclidine, oxycodone	Required substance abuse assessment and required compliance with treatment plan. Refusal is treated as a positive test.
IX	Owens Valley Career Development Center	Applicants and ongoing recipients subject to mandatory work requirements	Universal and for cause	At intake, at the time of job placement; for cause testing may be conducted at any time	Not specified	Referral for behavioral health treatment, hours for which may count toward work participation.
IX	North Fork Rancheria	Applicants and ongoing recipients	Universal and random	At intake, randomly thereafter and annually at recertification	"All drugs including alcohol"	Repeated refusal results in case closure.
IX	Southern California Tribal Chairmen's Association	Applicants and ongoing recipients	Universal, random and for cause testing is conducted	At intake and annually at recertification. Random testing may be conducted at any time	Amphetamines, cocaine metabolites, marijuana metabolites, opiates, phencyclidine	Refusal results in denial/case closure. Positive test results in required assessment; treatment recommendations become part of the Family Success Plan. Noncompliance results in case closure.

<sup>2</sup> Testing program to begin October 2011.

IX	Hoopa Valley Tribe	All adult TANF household members, protective payees and child care providers	Universal, random, and for cause	Universal at intake and recertification; randomly or for cause thereafter	Amphetamine, methamphetamine, cocaine;,opiates, marijuana, PCP, barbiturates, benzodiazepine	Required substance abuse assessment and services; protective payee.
IX	Pasqua Yaqui Tribe	Ongoing recipients and work experience participants	Universal for work experience participants, others for cause	Not reported	Illegal substances	Ongoing random testing; treatment referral
IX	Soboba	Adult applicants	Universal for applicants, randomly for those who have previously tested positive	Not reported	All major drugs	Refusal results in denial of benefits. Positive tests results in treatment assessment and vendor payments. Direct cash assistance may be restored if two random drug tests are clean within 90 days.
IX	Round Valley Tribe	Ongoing recipients	For cause	Upon further cause	"All drugs including alcohol"	Adult is removed from the grant; vendor payment is made for the remainder. Treatment/counseling is required.
IX	Graton Rancheria	Applicants and ongoing recipients	Universal, random and for cause	At intake and every six months thereafter. Occasional random and for cause testing is also conducted.	Opiates, barbiturates, alcohol, methamphetamine, marijuana, amphetamines, PCP, cocaine	Refusal results in progressive sanctions leading to case termination; positive tests result in referral for assessment and treatment.
X	Cook Inlet Tribal Council	Ongoing recipients	For cause	Depends on each case	All alcohol/drugs	Required substance abuse assessment; treatment recommendations become part of the family self sufficiency plan and subject to progressive sanctions.
X	Lower Elwha	Applicants	Universal	At intake	Not reported	Refusal results in denial of benefits. Positive test results in referral for assessment, treatment plan requirements.

Source: Administration for Children and Families, Division of Tribal TANF Management

## Appendix C: Estimated Costs of Drug Testing Proposals

State	Year	Estimated Cost (Source: State fiscal notes and bill summaries, State legislature websites)
Alabama <sup>47</sup>	2011	<b>Cost unknown.</b> Estimate would include cost to administer drug screening, give notice to applicants, and oversee operation and training. Persons being screened pay for the drug screening. If test negative, the department will reimburse the individual for the cost of the screening by increasing the amount of TANF benefits received by the amount paid for the drug screening.
Arizona <sup>48</sup>	2008	<b>\$3.4 million.</b> Estimate includes just the initial test for applicants and recipients of TANF and General Assistance.
Florida <sup>49</sup>	2011	<b>Cost unknown.</b> A pilot run between 1999 and 2001 was reported to cost \$2.7 million. The bill that has now been passed would require applicants to pay the cost of the drug test, which will be reimbursed if the applicant tests negative.
Idaho <sup>50</sup>	2010	<b>\$1,324,725</b> for all, <b>\$263,681</b> for 13% of participants. Estimates include testing, system programming, and treatment by a contractor.
Indiana <sup>51</sup>	2011	<b>\$173,000.</b> Estimate only includes the price of the test itself.
Louisiana <sup>52</sup>	2011	<b>\$92,487.</b> Estimate includes drug testing of 20% of recipients and treatment for 2% of those tested.
Maryland <sup>53</sup>	2011	<b>\$2.2 million.</b> Estimate includes cost for additional TANF staff to monitor applications and eligibility and increased contract costs for staff and supplies to do the testing.
Missouri <sup>54</sup>	2011	Up to <b>\$1,904,632</b> (FY 12); Up to <b>\$2,204,202</b> (FY 13). Estimates include costs of increased staffing needs, including for increased administrative hearings, drug treatment, changes to electronic applications, and hiring contractors to administer the drug tests.
New York <sup>55</sup>	2011	<b>\$20 million.</b> Estimate only includes the price of the test itself for all applicants and recipients.
Oklahoma <sup>56</sup>	2011	<b>\$2,161,179.</b> Estimate assumes that 10% of the TANF adult population would be randomly tested, all applicants would be tested, and the cost to administer a drug test is \$49.
Tennessee <sup>57</sup>	2007	<b>No cost.</b> Estimate assumes that federal law prohibits drug testing as a condition of eligibility for TANF, as it does in Medicaid/Medicare and SNAP.
West Virginia <sup>58</sup>	2011	<b>\$148,580.</b> Estimate assumes that all applicants and 20% of recipients would be tested.

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