

Transportation Initiative

Expanding Transportation Support Services for WorkFirst Clients

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NTRODUCED IN DECEMBER OF 2015, the Transportation Initiative (TI) is a legislatively funded pilot program implemented by the Department of Social and Health Services' Economic Services Administration (DSHS ESA). This pilot program seeks to eliminate transportation barriers that may impede WorkFirst clients' progress toward financial independence by relaxing eligibility requirements for existing transportation support (TS) services, improving the application process for TS services, and providing additional transport supports. As of June 2019, 26 Community Services Offices (CSOs) were participating in the TI pilot. The following document is the first of two legislatively mandated reports that examine the impact of TI services on financial independence and client well-being. This report describes the experiences of 6,275 clients served from January 2016 through June 2019.

Key Findings

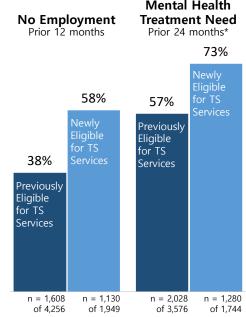
- Under the Transportation Initiative, CSOs issued almost 23,500 vouchers totaling approximately \$2 million to 6,275 clients.
- One-third of TI clients were newly eligible for transportation support services. New clients were more likely to be unemployed, female, white, or pregnant, live in a single adult household, or have a behavioral health treatment need or chronic health condition (Figure 1).
- Car repairs were the most expensive TS services, followed by licensing and fees. While gas cards comprised 82 percent of all vouchers issued, they represented only 46 percent of all program expenditures. This is due to the low average cost of gas vouchers relative to other TS services.
- Relative to rural CSOs, urban CSOs served more clients and spent more funds on TI-related services on average.
 By contrast, rural CSOs issued more vouchers on average per client and spent a higher percentage of total expenditures on gas cards and public transportation services relative to urban CSOs. Two CSOs, Aberdeen and Moses Lake, issued 97 percent of all public transit vouchers provided to rural clients.

FIGURE 1.

Employment Rate and Behavioral Health Conditions

TOTAL = 6,205

NOTE: Excludes 70 clients who were not successfully linked to records in the Integrated Client Database.



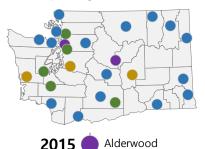
*Of those with medical assistance.



Program Description

Introduced in December 2015, the Transportation Initiative (TI) is a pilot program currently funded by the Washington State Legislature under ESSB 6168¹ which attempts to reduce transportation-associated barriers to financial independence for WorkFirst clients. The TI pilot achieves this goal by making three changes to existing transportation support (TS) services.

FIGURE 2. Participating CSOs



Wenatchee

2016 Aberdeen Moses Lake Renton

2018 Chehalis
Mount Vernon
Shelton
Smokey Point
Sunnyside

2019

Bellingham Clarkston Colfax Colville Ellensburg Kelso King-Eastside Newport Oak Harbor Okanogan Port Angeles Port Townsend Republic Stevenson **Toppenish** Walla Walla

First, the TI pilot allows caseworkers at participating Community Services Offices (CSOs) to provide TS services to a wider range of WorkFirst clients. Previously, caseworkers could only offer TS services to WorkFirst clients participating in countable work activities. Under the pilot, clients are also eligible for TS services if they meet the following requirements: 1) they are participating in a WorkFirst activity, such as attending school, addressing a barrier to employment (e.g., mental health or substance use disorder treatment), or transitioning to federal Supplemental Security Income (SSI); 2) they have an active Individual Responsibility Plan (IRP);² and 3) they are experiencing some type of transportation barrier.

Second, the TI pilot improved the application process for TS services and eased restrictions on the frequency, type, and amount of TS services that a client may receive. Specifically, the TI pilot simplified the voucher application process for TS services, improved the process for enrolling clients in driver's training and licensing programs, and allowed CSOs to issue repair vouchers for any vehicles used for WorkFirst activities regardless of ownership. The TI pilot also made it easier for clients to request and receive an exception-to-rule (ETR) for any additional TS service expenditures that may exceed the annual \$3,000 support service limit.

Third, the TI pilot introduced three new TS service types. Participating CSOs may: 1) fund private contractors to provide doorto-door transportation to WorkFirst clients; and 2) work with clients, courts, and/or collection agencies to address outstanding vehicle-related fines. The latter set of services are not available to individuals with a ticket or fine related to Driving Under the Influence and/or Driving While Intoxicated, or for tickets with existing payment arrangements.³ Third, the pilot also allowed participating CSOs to provide Post-TANF Employment Transportation Support Services (PETSS) in the three months following TANF case closure to WorkFirst clients who exited TANF voluntarily or whose assistance unit (AU) exceeded TANF income limits.

With the exception of the court fines component, which was expanded statewide in September 2016, implementation of the pilot program has been staggered across a five-year period at 26 CSOs across Washington State (Figure 2).

¹ The TI pilot was initially funded in section 207 (1) (i) of SSB 5883.

² A WorkFirst client is no longer eligible for TS services if they stop participating in WorkFirst activities or are not subject to IRP requirements (e.g., individuals receiving infant, toddler, or other WorkFirst activity exemptions).

³ CSOs are instructed to exhaust all other potential avenues for addressing the fines (e.g., helping clients develop payment plans, working with courts to waive the fines, etc.) before issuing a payment.

Methods

Study Design. We identified 6,275 unique TI clients who received transportation support services from January 2016 through June 2019 using management information systems maintained by DSHS-ESA. Total counts of transportation support service recipients were unduplicated by person. The number of TS services provided to WorkFirst clients, as well as total program expenditures, are based on exception-to-rule (ETR), voucher, and gas card information recorded in DSHS-ESA's electronic Jobs Automated System (eJAS) and BarCode. Due to data limitations, this report does not include information on door-to-door services or public transit passes purchased in bulk by CSOs and issued to WorkFirst clients.

Demographic information on TI clients and their associated AUs were compiled using information from the Automated Client Eligibility System (ACES) and the Integrated Client Database (ICDB; Mancuso, 2020). The first month that a client received a transportation support voucher, gas card, or ETR from a pilot CSO was identified as their "index" month, and all other measures were constructed relative to this month.

Unless otherwise noted, indicators of treatment need were measured over a 24-month period prior to the index month, while receipt of treatment services and other social and human services were measured over a 12-month period. Demographic and education data were captured as of the month that the client received their first TI service.

Program Expenditures and Services

Expenditures. Program expenditures on the TI pilot totaled approximately \$2 million during the first three and a half years (*see* Figure 3). Gas cards comprised 46 percent (\$933,339) of total program spending, with the majority of these funds spent on Bank of America cards. Car repairs represented slightly more than one-third of total program expenditures (35 percent; \$710,615), followed by licensing and fees (16 percent; \$332,833).

Public transportation and mileage reimbursement made up the remaining 3 percent (\$45,680) of total program expenditures.⁴ The most costly TS services per voucher were car repairs, followed by licensing and fees services, gasoline and mileage reimbursements, and public transportation vouchers (*see* Table 1).

Annual expenditures increased over time as additional CSOs joined the TI pilot and licensing and fees support was extended to all CSOs in SFY 2017 (*see* Figure 4). Expenditures on TI services stabilized between \$410,000 and \$452,000 during SFY 2017 and 2018, then doubled to roughly \$1.1 million in SFY 2019 when 16 additional sites were added to the program.

FIGURE 3.

Types of Expenditures

TOTAL = \$2,022,467



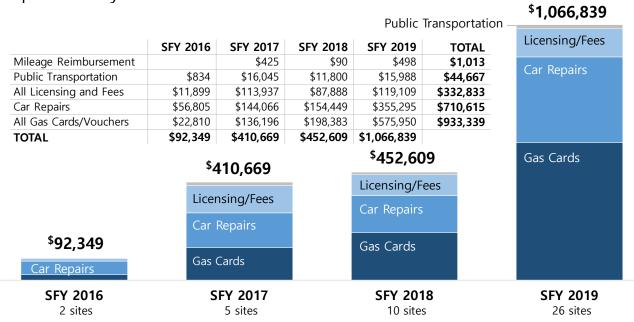
⁴ As noted earlier, these data are restricted to public transportation vouchers issued to individuals by CSO staff and do not include the cost of transit cards or bus passes purchased in bulk at the CSO-level.

TABLE 1. Average Voucher Costs by Service Type

	Total Expenditures	Total Vouchers	Average Voucher
Average Voucher Cost	\$2,022,467	23,462	\$86
Gas Cards	\$933,339	19,269	\$48
Car Repairs	\$710,615	1,189	\$598
Licensing/Fees	\$332,833	1,470	\$226
Public Transportation	\$44,667	1,506	\$30
Mileage Reimbursement	\$1,013	28	\$36

TI service expenditures varied over time in response to changes in policy and the introduction of additional CSOs into the pilot. Yearly expenditure data indicate that car repairs initially made up nearly two-thirds of total program costs in SFY 2016 but declined to a third of total program costs in SFY 2017, 2018, and 2019. Licensing and fees spending spiked following the statewide rollout of these services in SFY 2017, but decreased to 11 percent of total annual program costs during SFY 2019. Conversely, the share of annual TI funds spent on gas cards rose from 25 to 54 percent between SFY 2016 and SFY 2019.

FIGURE 4. Expenditures by State Fiscal Year



Receipt of TI ETR Services. Even with changes to the ETR application process, only a small proportion of TI clients requested and subsequently received a TS service ETR. From December 2015 through June 2019, nine percent (n = 532) of TI clients received at least one TI-related ETR recorded in eJAS, and 5 percent of TI clients (n = 323) were, at some point, a PETSS client. Two percent (n = 106) received a licensing and fees ETR from a non-pilot site following the statewide rollout of the licensing and fees component in SFY 2017. Less than one percent of TI clients had an ETR that approved additional TS service expenditures exceeding the \$3,000 support service cap (n = 17).

Geographic Variations in Service Receipt

We used address information to assign participating CSOs to counties. This information was used to determine if a CSO was located in an urban or rural area based on 2015 population size, population density, proportion and size of urbanized population, and relative proximity to Washington's largest urban center (Sharkova, 2018). Based on these data, ten TI CSOs were located in an urban county; the remaining 16 were located in rural counties (*see* Figure 5 for a detailed breakdown of CSOs by rural/urban status).

Analyses of expenditure and issuance data indicate that CSOs located in urban counties issued fewer vouchers but spent more on TS services than their rural counterparts: 41 percent of all vouchers and 51 percent of all TI-related expenditures are attributable to urban or suburban CSOs. Detailed information in Table 2 indicate that, on average, urban CSOs served slightly more clients per CSO, issued fewer vouchers⁵ per client (3.4 vs. 4.1 vouchers per client), and disbursed vouchers with an average value that was 1.4 times higher than that of rural CSOs.

As shown in Figure 5, urban CSOs issued proportionally fewer public transit vouchers and more gas cards relative to their rural counterparts. Differences in public transportation voucher share are largely due to the inclusion of the Moses Lake and Aberdeen CSOs, which issued 97 percent of all public transit-related vouchers disbursed by rural CSOs between December 2015 and June 2019. These differences likely reflect the limited availability of public transportation in many rural communities.

Comparisons of voucher issuances following the exclusion these two CSOs from these analyses (not shown here) indicate the distributions of vouchers by service type were similar across urban and rural CSOs. However, regardless of whether Aberdeen and Moses Lake were included in the analyses, the data indicate urban CSOs spent a smaller proportion of their total expenditures on gas cards and more on licensing and fees supports relative to rural CSOs (*see* Figure 5).

TABLE 2. Clients Served, Expenditure Information by Urban and Rural CSOs

	Urban (n = 10)	Rural (n = 16)
Total Distinct Clients Served	2,885	3,371
Total Vouchers Issued	9,732	13,730
Total Expenditures	\$1,024,720	\$997,747
Average Number of Clients Served Per CSO	288.5	210.7
Average Number of Vouchers Per Client	3.4	4.1
Average Voucher Value	\$105	\$73

NOTE: Clients could be served by multiple CSOs over the course of pilot program. Consequently, the total number of distinct clients served at urban and rural CSOs does not sum to the total number of TI clients.

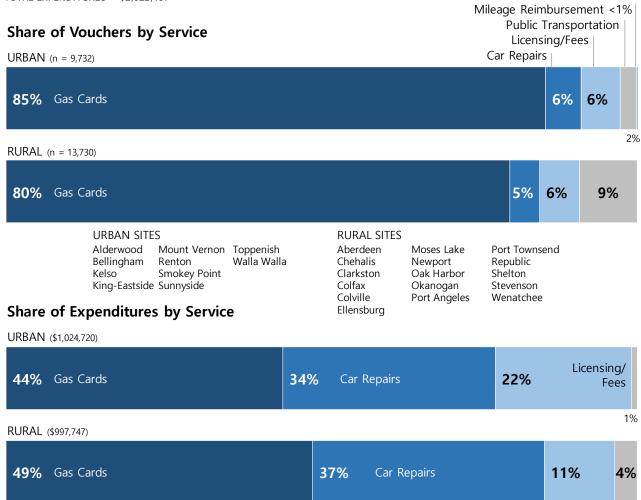
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⁵ Based on the ratio of the total number of vouchers to distinct clients served.

FIGURE 5.

Breakdown of Vouchers and Program Spending by Urban and Rural CSOs

TOTAL VOUCHERS = 23,462 TOTAL EXPENDITURES = \$2,022,467



Characteristics of Transportation Initiative Clients

An estimated 6,275 TI clients received a voucher or service under the TI pilot from December 2015 through June 2019. In this section, we describe the transportation needs, WorkFirst activities, demographics, and TI service receipt of 6,205 (99 percent) TI clients who were 16 years of age or older and were correctly linked to their administrative records in the ICDB.

Transportation Needs. TI clients have pronounced transportation needs when they begin receiving services. Less than half (48 percent; n = 2,973) owned a vehicle as of the first month that they received a TI-related service or ETR; sixty-eight percent of client-owned vehicles were identified as family vehicles, and 8 percent were unlicensed. Many TI clients owned older vehicles: 8 percent of vehicles were manufactured prior to 1990, 11 percent were manufactured between 1991 and 1995, and 26 percent were manufactured between 1996 and 2000. The average estimated fair market value of these vehicles was \$2,110; the average vehicle age was 17 years.⁶

⁶ This includes all fair market values recorded in ACES. Thirteen percent were based on client statements or statements made by contacts. The median estimated fair market value of \$780 was significantly lower than the average estimated fair market value.

Participation in WorkFirst Activities. Almost one-third of TI clients were previously ineligible for TS services because they were not participating in work-related activities as of their index month (*see* Figure 6). Instead, 1,483 of these newly eligible clients (24 percent) were addressing barriers to employment or engaged in other programs or activities, and 375 clients (6 percent) were either referred to a service or referred back to the CSO.⁷ TI clients addressing barriers to employment typically participated in one of the following programs: treatment for behavioral health conditions, participation in the Pregnancy to Employment or family planning programs, resolving issues related to domestic violence, pursuing Supplemental Security Insurance, and temporary incapacity (*see* Table 3).

FIGURE 6.

Transportation Initiative Clients by WorkFirst Participation Type

TOTAL = 6,205

Newly Eligible for TS Services **31%**



TABLE 3.
WorkFirst Clients Addressing Barriers to Employment

3	1 2					
			Newly eligible for transportation support services?			rtation
	All TI Clients No		lo	Yes		
	TOTAL	= 6,205	n = 4,256		n = 1,949	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
Addressing a Barrier to Employment	4,680	75%	3,197	75%	1,483	76%
Pregnancy to Employment or Family Planning	1,657	27%	985	23%	672	34%
Behavioral Health Treatment	1,251	20%	494	12%	757	39%
Domestic Violence	593	10%	280	7%	313	16%
Pursuing Supplemental Security Insurance (SSI)	317	5%	61	1%	256	13%
Homelessness	315	5%	158	4%	157	8%
Temporarily Incapacitated	306	5%	90	2%	216	11%

Demographics and Households. TI clients were 32 years old on average. Two-thirds were between the ages of 18 and 34, and 27 percent were 35 to 44 years old (*see* Figure 7). One-third of TI recipients were members of a racial or ethnic minority. Most minority TI clients were Hispanic (20 percent), followed by black or African American clients (6 percent). Asian/Pacific Islander, American Indian, and multi-racial clients each made up less than 5 percent of the total TI client population. Twenty-five percent of TI recipients were male. One out of four TI clients resided in a household with two or more adults, and 56 percent lived in a household with two or more children. A third of female TI recipients ages 16 to 44 were pregnant when they first received TS services. TI clients were moderately attached to the labor force, with 56 percent having any earnings in the prior year. About three of four TI clients had a high school education or less, 23 percent had a prior felony arrest, and one in four were homeless in the prior year.

No Activity/Other 1% n = 91

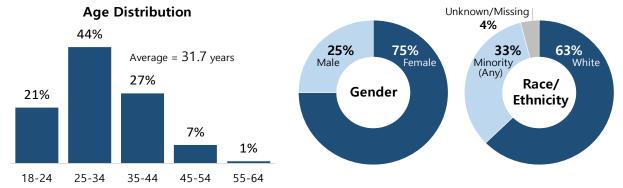
⁷ Less than 2 percent of TI clients who received a TS service under the pilot were ineligible under TI program rules. This included 91 clients who did not have an active component code in the system as of their index month and one client exempt from work activities.

Of the 5,320 TI clients who received state or federal medical assistance: 62 percent had an indication of mental health treatment need; 39 percent had a serious mental illness; 34 percent had some indication of a substance use disorder treatment need; and 23 percent had an indicator of chronic health problems equivalent to or more severe than those of the average disabled Medicaid client. Seventy percent had some indication of either a behavioral health treatment need or chronic health problems that may make work difficult.

FIGURE 7.

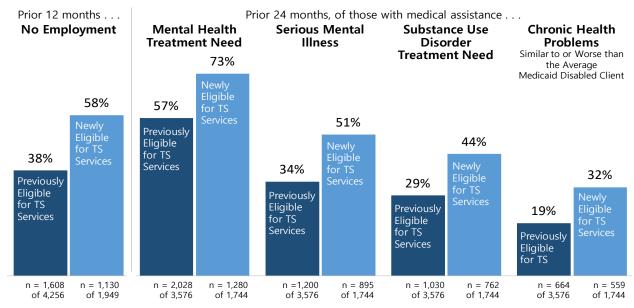
Participant Characteristics at Program Entry

TOTAL = 6,205



Characteristics of Previously and Newly Eligible Clients. Comparisons of newly eligible TI clients (those participating in non-work activities) to TI clients previously eligible for TS services highlight several key differences between these two groups. Relative to WorkFirst clients previously eligible for TS services, newly eligible clients were more likely to be female (83 percent vs. 72 percent), pregnant (35 percent vs. 27 percent), or non-Hispanic white (69 percent vs. 60 percent), or to live in a household without any children (12 percent vs. 7 percent). Newly eligible WorkFirst clients also had higher rates of behavioral health treatment need and serious mental illness and were less likely to be employed in the prior year (*see* Figure 8). For additional comparisons, *see* Appendix Table A1.

Employment Rate and Physical and Behavioral Health Conditions by Eligibility Status TOTAL = 6,205 (5,320 received medical assistance)



Discussion

The legislatively funded TI pilot was implemented in December 2015 to address transportation barriers that may impede WorkFirst clients' progress toward financial independence. Under the TI pilot, participating CSOs: 1) expanded the pool of WorkFirst clients eligible for TS services; 2) simplified the application process for transportation-related services and ETRs; and 3) offered additional services to WorkFirst clients (i.e., door-to-door transportation services and, for WorkFirst clients who exited the TANF caseload, post-employment TS services). Changes in licensing and fees rules were rolled out statewide in September 2016, and, as of February 2019, the number of CSOs participating in the pilot increased to 26 offices across Washington State.

Participating CSOs issued roughly 23,500 transportation service vouchers and gas cards totaling \$2 million from January 2016 through June 2019. Most vouchers issued under the TI pilot were for gas cards, which were, on average, the most inexpensive service. Conversely, vouchers issued for car repairs and licensing and fees accounted for 46 percent of total program costs despite making up only 11 percent of all vouchers issued under the pilot. Spending on public transportation was a small percentage of total program costs, and only \$1,013 was spent on mileage reimbursement. Breakdowns of expenditures and vouchers by county indicate that urban CSOs served more clients, issued fewer vouchers per client, and spent more money on TS services per voucher than their rural counterparts. The distribution of vouchers and program expenditures by service type were largely similar across urban and rural CSO.

Detailed medical and service history data indicate that relaxing eligibility requirements for TS services made these services accessible to more vulnerable subpopulations. Roughly a third of TI clients were newly eligible for transportation support services. These newly eligible clients were more likely to be pregnant, live in a single-adult household, have an unmet behavioral health treatment need, or suffer from some sort of chronic illness. They were also less likely to be employed in the year prior to receiving a TI service, indicating weaker labor force attachment. The majority of these clients were engaged in activities designed to address barriers to employment (e.g., behavioral health problems, temporary incapacity, homelessness, etc.).

This report is subject to several key limitations. First, total expenditures on public transit may be underreported because bulk purchases of transit passes are not captured in eJAS or Barcode. Second, we do not provide information on the cost of door-to-door transportation services, which are another key service provided by TI pilot sites. Third, while this report provides descriptive information regarding the changes in TS service expenditures and the characteristics of clients served under the pilot, it does not evaluate the effectiveness of these services regarding client outcomes. A follow-up report will evaluate the impacts of the TI pilot on WorkFirst caseloads, employment rates for WorkFirst clients, work participation rates, and sanctions at the CSO-level.

REFERENCES

Mancuso, D. (2020). Washington State Health and Human Services Integrated Client Databases. Washington State Department of Social and Health Services, Research and Data Analysis Division, Report 11.205.

Sharkova, I. (2018). *CODB Datamart Geographic Tables and Documentation* (Ver. 04-2018) [Data file]. Washington State Department of Social and Health Services, Research and Data Analysis Division.

TABLE A1
Baseline Characteristics (n = 6,205)

	y Eligible for Tra		n Support S	Services
TI Clients Previously Eligible for Transpo	rtation Support S	Services		
TOTAL CASES	4,256		1,949	
Demographics				
Mean Age at Baseline	31.7		31.9	
Median Age at Baseline	31		31	
Less than 17 Years of Age	8	0%	11	1%
18 - 24 Years of Age	909	21%	399	20%
25 - 34 Years of Age	1,889	44%	850	44%
35 - 44 Years of Age	1,109	26%	544	28%
45 - 54 Years of Age	304	7%	130	7%
55 - 64 Years of Age	37	1%	15	1%
White, Non-Hispanic	2,543	60%	1,349	69%
Minority	1,543	36%	521	27%
African American	315	7%	85	4%
Hispanic/Latino(a)	923	22%	303	16%
Asian or Pacific Islander	123	3%	35	2%
American Indian	116	3%	72	4%
Multiracial	66	2%	26	1%
Unknown/Missing	170	4%	79	4%
Female	3,051	72%	1,608	83%
Pregnant as of Index Month, <i>of women ages 16-44</i>	765	27%	538	35%
Male	1,205	28%	341	17%
High School or Less Education	3,060	72%	1,455	75%
Less than High School	864	20%	504	26%
High School/GED	2,196	52%	951	49%
Some College	1,001	24%	425	22%
College Education or Higher	163	4%	59	3%
Assistance Unit (AU) Characteristics, as of Index Month	105	470	33	370
Average AU Size	3.0		2.8	
Average Number of Adults in AU	1.2		1.2	
			1.6	
Average Number of Dependent Youth in AU Member of a Household Without Children	1.7 305	7%	237	12%
Member of a Two-Adult Household	1,144	27%	391	20%
Receipt of State Services, 12 Months Prior to Index	2.700	000/	4 770	040/
Basic Food	3,780	89%	1,773	91%
Working Connections Child Care	1,046	25%	291	15%
Individual Responsibility Plan Activities, as of Index Month	4.077	4.40/		
Clients Looking for Work	1,877	44%	-	
Clients Participating in Education or Training	1,569	37%	436	22%
Clients Addressing Barriers to Employment	3,197	75%	1,483	76%
Pregnancy to Employment or Family Planning	985	23%	672	34%
Behavioral Health Treatment	494	12%	757	39%
Domestic Violence	280	7%	313	16%
Pursuing Supplemental Security Insurance (SSI)	61	1%	256	13%
Resolving Homelessness	158	4%	157	8%
Temporarily Incapacitated	90	2%	216	11%
Clients Referred to Services or Referred Back to CSO	2,443	57%	1,335	69%
Clients Exempt from WorkFirst Activities	359	8%	312	16%

TI Clients Newly Elig	ible for Tra	nsportatio	n Support S	Services	
TI Clients Previously Eligible for Transportation Support Services					
TOTAL CASES	4,256		1,949		
Vehicle Needs					
Client Individually or Jointly Owns a Vehicle	2,151	51%	822	42%	
Medicaid Coverage, 12 Months Prior to Index					
Any Medical Assistance	3,576	84%	1,744	89%	
Dually Eligible for Medicaid and Medicare	15	0%	22	1%	
Behavioral and Physical Health Needs, of those with medical assists	ance				
Mental Health Service Need Indicator	2,028	57%	1,280	73%	
Serious Mental Illness Indicator	1,200	34%	895	51%	
Substance Use Disorder Treatment Need	1,030	29%	762	44%	
Chronic Disease Burden at or Above Average for SSI Population	664	19%	559	32%	
Criminal Justice Involvement					
Ever Arrested	1,793	42%	901	46%	
Ever Arrested for a Felony	890	21%	515	26%	
Arrested in Prior Year	436	10%	256	13%	
Arrested in Prior Year for a Felony	127	3%	94	5%	
Charged for Vehicle/License Violation	71	2%	50	3%	
Charged for Negligent or Reckless Driving	13	0%	7	0%	
Other History					
Homeless	1,000	24%	529	27%	
Employed	2,648	62%	819	42%	
Average Earnings	\$7,373		\$3,901		
Average Hours Worked	479		255		

TECHNICAL NOTES

OVERVIEW AND STUDY POPULATION

Following de-duplication of client records obtained from the electronic Jobs Automated System (eJAS), Automated Client Eligibility System (ACES), and Barcode, we identified 6,275 unique WorkFirst clients who: 1) were issued a transportation support service voucher or gas card from a Community Service Office (CSO) in the Transportation Initiative (TI) pilot; 2) received a qualifying exceptions-to-rule (ETR) from a participating TI pilot site; or 3) received a licensing and fee-related ETR from any CSO from July 2016 forward. This study describes differences in WorkFirst participation among TI clients, total program expenditures, and differences in the types of services rendered to clients of urban and rural CSOs. Detailed demographic data on TI clients were restricted to 6,205 (99 percent) of the total 6,275 TI clients; 70 clients were excluded from this portion of our analyses because they could not be successfully linked to cross-system administrative records and/or because they were under the legal driving age in Washington. Measures reported here were compiled using information collected in ACES, eJAS, Barcode, and data from DSHS Services Integrated Client Databases (ICDB, Mancuso 2020).

DATA SOURCES AND MEASURES

Demographics and Household Composition

- Demographics such as age, race/ethnicity, gender, and educational attainment were extracted from ACES, which includes information on participants receiving state and federal cash and food assistance.
- Assistance unit (AU) data on a client's Temporary Assistance to Needy Families (TANF) AU were obtained from summary data available in ACES for either the month that a client received a TI-related service or, in the case of clients receiving post-employment transportation support services, the most recent month that their AU received cash assistance from the State of Washington.
- Pregnancy data were obtained from information recorded in ACES and restricted to pregnancies verified by a medical professional or doctor.

Geography

• A measure of CSO "urbanicity" was constructed based on the county-level population density and percent of each county's population residing in an urbanized area.

WorkFirst Participation

• Participation data were extracted from eJAS component information. Different component codes were consolidated into broader activity types (e.g., work activities, addressing barriers to employment, etc.) based on internal documents used by ESA staff. Date spans for participation in a given WorkFirst component were constructed using information on both scheduled and actual activity begin and end dates recorded in eJAS.

Vehicles

• Vehicle information available in ACES was used to determine the number of vehicles registered to a client and the estimated value and age of these vehicles. Because transportation support services are issued to clients and not AUs, all information on vehicles has been aggregated to the client-level.

Vouchers, Gas Card, and Exceptions-to-Rule

- Voucher and gas card records in Barcode were used to calculate total expenditures on transportation support services by participating CSOs under the Transportation Initiative. Types of service were determined using subcategory codes associated with particular vouchers.
- ETR data were obtained from records maintained in Barcode. The data were restricted to ETRs: 1) issued by participating CSOs over the course of the TI pilot; and 2) approved by TI program staff at ESA headquarters. ETRs were assigned to the Post-TANF Employment Transportation Support Services (PETSS), licensing and fees, or support service limit categories based on administrative notes maintained by ESA staff. Service type was also determined using these administrative notes. More detailed information on how we identified and coded TI-related ETRs is available upon request.

Medical Coverage

• Medicaid and other medical coverage data were obtained from eligibility codes recorded in ProviderOne.

Behavioral Health and Chronic Illness

- Data from two information systems—ProviderOne (medical) and the Behavioral Health Data System (mental health and substance use disorders)—were used to identify the presence of substance use disorders and/or mental illness over a 24-month window prior to receiving TI services based on diagnoses, prescriptions, and treatment records.
- Drug- and alcohol-related arrest data maintained by the Washington State Patrol were also used to identify
 probable substance use issues and were included in the definition of treatment need for substance use
 disorders.
- An indicator of chronic illness was developed to identify individuals with significant health problems. A risk score equal to one is the score for the average Medicaid participant in Washington State meeting Supplemental Security Income disability criteria. Chronic illness risk scores were calculated from health service diagnoses and pharmacy claim information, with scoring weights based on a predictive model associating health conditions with future medical costs (Gilmer et al., 2001; Kronick et al., 2000). Clients were identified as having chronic illness if their risk score was greater than or equal to one.

Homelessness and Housing Instability

• Homelessness status is based on living arrangement and address information recorded in ACES and housing service information recorded in the Homelessness Management Information System (HMIS).

Criminal Justice Involvement

Arrest rates were based on offenses reported to the Washington State Patrol (WSP), which include arrests
for felonies, gross misdemeanors, and other offenses. WSP records arrests regardless of conviction status.
Some less serious misdemeanor offenses or non-criminal infractions handled by local law enforcement
agencies are not required to be reported in the WSP database and are not included in the analyses.

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