**Cost shift documented**:

[1990 GAO Report](http://www.gao.gov/assets/220/213543.pdf) - *Refugee Resettlement: Federal Support to the States Has Declined*, <http://www.gao.gov/assets/220/213543.pdf>

“With reductions in federal refugee assistance, costs for cash and medical assistance have shifted to state and local governments. Available data indicate that states resettling most of the refugees incur millions of dollars in transferred costs - the most recent estimate is $85 million for fiscal year 1990. However, these costs represent a very small percentage of total state expenditures for cash assistance.” p.4

[January 31, 1992 ORR Report to Congress](http://www.acf.hhs.gov/sites/default/files/orr/annual_orr_report_to_congress_1991.pdf), <https://www.acf.hhs.gov/sites/default/files/orr/annual_orr_report_to_congress_1991.pdf>

Statement of Dir. ORR Chris Gersten, p.63 details the effect of reduction in Congress appropriation for the program resulting in shifting costs to states and reduction in federal subsidy to refugees not eligible for Medicaid and cash welfare programs, but indicates the reduction was only supposed to be for FY1992.

[Senate Refugee Reauthorization Act of 1992](https://ia801406.us.archive.org/15/items/refugeeresettlem00unit/refugeeresettlem00unit.pdf), <https://ia801406.us.archive.org/15/items/refugeeresettlem00unit/refugeeresettlem00unit.pdf>

“As their admission is a federal decision, U.S. policy long has been that the federal government bears substantial responsibility for initial resettlement costs.” p.2

“In recent years, the federal share of refugee resettlement has declined dramatically. State and local governments, voluntary agencies, mutual assistance associations and the refugees themselves have had to make up the difference. Ten years ago, the federal government reimbursed states for all costs associated with any refugee's participation in so-called "categorical programs," such as AFDC, SSI or Medicaid, during the first three years after a refugee's arrival in the United States. In addition, refugees who did not meet the family structure requirements of these programs, but who qualified under the income guidelines set by a state for its AFDC programs, could receive "refugee cash and medical assistance" at state AFDC and Medical levels. This, too, was reimbursed 100 percent for the first three years.

As the following chart demonstrates, however, this support has declined over the past decade. Today, the federal government reimburses states for only 8 months of refugee cash and medical assist- ance.*[ed note -which is only for refugees ineligible for Medicaid and TANF]* In addition, state costs associated with refugees on AFDC or state general assistance programs no longer are reimbursed.” p.3

“After nearly a decade of cuts in refugee resettlement funding, the President proposed a major reduction in funding—from $410 million to $227 million —for the Office of Refugee Resettlement for next fiscal year. The reimbursement of state costs would drop to approximately five weeks for cash and medical assistance. Some smaller states indicate that they may eliminate their refugee pro- grams entirely with such a cut. And a consequence of such funding cuts is pressure to reduce the number of refugees admitted for resettlement at a time when commitments continue to Vietnamese political prisoners, Amerasian children, Soviet Jews, and others. The prospect of these cuts has jeopardized the current refugee program.”

[1993 ORR Report to Congress](http://www.acf.hhs.gov/sites/default/files/orr/annual_orr_report_to_congress_1993.pdf)**,** <https://www.acf.hhs.gov/sites/default/files/orr/annual_orr_report_to_congress_1993.pdf>

“CMA appropriation levels have curtailed Federal reimbursement of the State costs of refugee recipients of categorical public assistance programs.”p.20

**1996** - U.S. House. Committee on the Judiciary, Subcommittee on Immigration & Claims. *The Refugee Act of 1979 (to Accompany H.R. 2816) Additional, Separate and Minority Views,* p.45(96 H.Rpt. 608):

* U.S. Rep. Harry Condit testifying:

“Despite the fact that the federal government has, in the past, made commitments to fully support refugee resettlement, this commitment has not been met for many years. It is unconscionable for the federal government to place refugees in communities without providing resources for their resettlement. After all, the local communities had no role in the high-level foreign policy decisions which resulted in the refugee admissions.” p.4

* Lavinia Limon, Dir. ORR testifying:

“One of our problems is that the refugee program no longer reimburses the States for the AFDC portion so we cannot require that they report to us on the timeframe of how long refugees are staying on aid and how much they’re spending on that aid.” p.11

* Dr. Edwin Silverman, State refugee coordinator, Ilinois Dept. of Public Aid testified:

“The Refugee Education Assistance Act has not been funded since 1987. The Refugee Program has been sustained through major cost transfer to state and local governments.” p.20

“RCA has been reduced from 36 to 8 months; and the state costs for AFDC and General Assistance are no longer reimbursed.” p.21

“I think it must be recognized that the refugee program, in fact, has survived for the past 10 years on cost-transfer to the State and local Government. The privatization - if we take just for argument’s sake Mr. Obey’s proposition - we’re talking about adding 12 months of AFDC, half of which the State is paying for.” p.38

“I think the States have a prerogative in this. I mean, we have been absorbing costs of the last 10 years - substantial costs that have sustained the program. I think States should have the prerogative in either committing to private distribution of cash assistance or not. Thank you.” p.44

* Rep. David Obey testifying:

“…I have two very simple points. No.1 it is a Federal Government foreign policy decision that allows them to come into this country. If the Federal Government thinks it’s important enough to make the decision to allow them to come into this country, then they damn well ought to pay for it - just that simple. When you bring them into the local community and then dump them on the local community with very little by way of financial support, you make them the target of resentment for a lot of local taxpayers who may or may not like the fact that the refugees are there, but certainly don’t like the fact that they’re left holding the financial bag for the decision that some other level of government made.” p.23

[2010 - U.S. Senate Committee on Foreign Relations](http://www.gpo.gov/fdsys/pkg/CPRT-111SPRT57483/pdf/CPRT-111SPRT57483.pdf) **Report -** *Abandoned Upon Arrival: Implications for Refugees and Local Communities Burdened by a U.S. Resettlement System That is Not Working”* <https://www.gpo.gov/fdsys/pkg/CPRT-111SPRT57483/pdf/CPRT-111SPRT57483.pdf>

“The administration must demonstrate clearly to Congress and re- settlement communities how federal resources will be better matched with refugee admissions. In order to supplement this report and the administration’s inquiry, I have also asked the Government Accountability Office to undertake a comprehensive review of the U.S. refugee resettlement system. In the future, the administration may determine that an increase in Federal funding or decrease in refugee admissions is warranted. But the practice of passing the costs of resettling refugees on to local communities should not continue.” p.vi

**2009 SCORR letter to Scott Busby**

first recommendation by SCORR:

“Ensure adequate funding levels for a minimum of 18 months…and that reimburse states for their share of TANF and Medicaid for the benefit period.”