

### Introduction

New Families First applicants who are otherwise eligible and who will be included in the Families First grant must be screened for possible drug use or misuse.

### Scope

The purpose of this policy is to provide the opportunity for Families First applicants to receive treatment for any identified drug misuse.

### Policy

#### Drug Screening

1. New applicants applying for Families First will be screened using [HS-3074 TANF/Families First Drug Screening](#) to determine if there is reasonable cause to believe that the applicant is using or has used one (1) or more of the following controlled substances in the past three (3) months:
  - a. marijuana,
  - b. cocaine,
  - c. methamphetamine,
  - d. amphetamine, and/or
  - e. opiates.
2. The applicant's responses must be accepted without prejudice.
3. In two (2) parent AUs, only the applicant parent must agree to the screening. The other parent will not be subjected to the drug questionnaire and testing requirements.

Failure or refusal to complete [HS-3074 TANF/Families First Drug Screening](#) will result in the denial of the Families First application.

### Drug Testing

1. If the completed [HS-3074 TANF/Families First Drug Screening](#) indicates there is reasonable cause to believe that the applicant is using one (1) or more of the listed controlled substances, the applicant must submit to a drug test.
  - a. If the applicant is currently taking a prescription medication(s) containing any of the listed controlled substances, the applicant is still required to complete a drug test.
  - b. The applicant must be advised that they may provide verification of the valid prescription(s) to the Medical Review Officer (MRO) in the event of a positive test result. The applicant may also advise the MRO of any over-the-counter medication they are taking.
  - c. No drug or which an applicant has a current valid prescription will be a basis for denial of Families First benefits.
2. The Eligibility Counselor will refer the customer to a licensed drug testing agency using [HS-3076 Drug Test Referral](#).
  - a. The customer must complete and sign HS-2557 HIPAA Authorization for Release of Medical/Health Information to Tennessee Department of Human Services and return to TDHS.
  - b. The customer must be provided with a chain of custody (COC) form.
3. The applicant must submit to a urine-based five (5) panel drug test at a licensed drug testing agency. The drug test consists of an initial screening to detect the presence of a controlled substance. If detected, the agency will complete a confirmation test using the same urine sample to determine the type and quantity of drug(s) present in the sample.

4. The drug testing agency will report all test results to TDHS State Office via electronic communication.
  - a. Positive test results will also be submitted to the MRO for review. The MRO will submit the final result to TDHS State Office via secure email.
5. TDHS State Office staff will notify the referring Eligibility Counselor of the drug test results.
  - a. No additional action is needed for a negative result.
  - b. When the test result is positive, the applicant must be referred for a substance abuse evaluation using [HS-3078 Substance Abuse Evaluation & Drug Treatment Referral](#) to determine if substance abuse treatment is needed.
6. Failure or refusal to undergo drug testing will result in the denial of the Families First application.

### Substance Abuse Evaluation

1. The customer must complete a substance abuse evaluation at a facility licensed by the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) within ten (10) calendar days of the referral.
  - a. If the customer is unable to complete the evaluation due to scheduling, proof of a scheduled evaluation must be presented within the ten (10) calendar day period.
2. The evaluation results will be returned to TDHS using [HS-3078 Substance Abuse Evaluation & Drug Treatment Referral](#).
  - a. If the evaluation determines treatment is not necessary, no further action is needed.
  - b. If the evaluation determines that treatment is needed, TDHS, in conjunction with the facility performing the substance abuse evaluation, will refer the customer to a substance abuse treatment program licensed by TDMHSAS.
    - i. If the evaluating agency offers the treatment needed, no additional referral is needed.
    - ii. If the evaluating agency does not offer the appropriate treatment, an additional referral must be made using [HS-3078](#)

### [Substance Abuse Evaluation & Drug Treatment Referral](#).

### Substance Abuse Treatment

1. The customer must provide verification of placement on a waiting list or enrollment in a substance abuse treatment program licensed by TDMHSAS within ten (10) business days.
  - a. If the customer refused to enroll, participate in, and/or complete treatment, or fails to provide verification, the customer must be removed from the AU for six (6) months from the date of non-compliance.
    - i. The dependent child(ren) will continue to be eligible for Families First.
    - ii. A protective payee will be assigned to receive the Families First benefit on behalf of the dependent children less than sixteen (16) years of age.
2. The customer will be eligible for Families First while on a waiting list and/or for the first six (6) months of the substance abuse treatment period. The treatment period begins with the first treatment session.
3. The customer must provide documentation of ongoing participation in a substance abuse treatment program weekly.
  - a. The treatment facility may provide this documentation on the customer's behalf either by phone or in writing.
  - b. If the treatment occurs at an interval other than weekly, documentation must be provided based on the customer's treatment plan.
4. If the customer is determined not to need treatment at any time during the process, the customer has satisfied the requirements of the drug testing policy and will be eligible for Families First, if otherwise eligible.

### Actions after Participation in a Substance Abuse Treatment Program

1. The customer must submit to another five (5) panel drug test at the end of the substance abuse treatment period or at the six (6) month mark, if treatment will exceed six (6) months.

2. If the subsequent test is negative, the customer will remain eligible for Families First, if all other requirements continue to be met.
3. If the subsequent test is positive, the customer will be ineligible for six (6) months from the date of the positive test.
  - a. The dependent child(ren) will continue to be eligible for Families First.
  - b. A protective payee will be assigned to receive the Families First benefit on behalf of the dependent children less than sixteen (16) years of age.
  - c. The customer must continue to comply with policy [23.13 Families First Work and/or Educational Activity](#).

**Subsequent Test after a Six (6) Month Disqualification**

1. The customer must submit to another five (5) panel drug test at the end of a six (6) month disqualification period.
2. If the subsequent test is negative, the customer will be eligible for Families First, if all other requirements continue to be met.
3. If the subsequent test is positive, the customer will be ineligible for Families First one (1) year from the date of the of the positive test.

**Exceptions**

Families First Drug Testing does not apply to the following individuals:

1. Applicants seeking a diversion payment;
2. Minor parents who are dependents in an AU;
3. Minor parent caretakers who live with a parent, legal guardian, or adult caretaker;
4. Individuals excluded from the AU as outlined in policy [23.02 Families First Assistance Units](#).

**Good Cause**

Good cause may be evaluated for failure to complete drug testing requirements within the allotted

timeframes. See [Families First Good Cause for Non-Compliance](#) for potential good cause reasons.

**Supporting Documents**

- [HS-3074 FF/TANF Drug Screening-English](#)
- [HS-3074 FF/TANF Drug Screening-Spanish](#)
- [HS-3076 Drug Testing Referral-English](#)
- [HS-3076sp Drug Test Referral-Spanish](#)
- [HS-3078 Substance Abuse Evaluation & Drug Treatment Referral-English](#)
- [HS-3078sp Substance Abuse Evaluation and Drug Treatment Referral-Spanish](#)
- [HS-2557 HIPAA Authorization for Release of Medical/Health Information to TDHS-English](#)
- [HS-2557sp HIPAA Authorization for Release of Medical/Health Information to TDHS-Spanish](#)
- [HS-2557a HIPAA Authorization for Release of Medical/Health Information to TDHS-Arabic](#)
- [HS-2557s HIPAA Authorization for Release of Medical/Health Information to TDHS-Somali](#)
- [HS-2557LP HIPAA Authorization for Release of Medical/Health Information to TDHS-Large Print](#)
- [HS-2938 General Authorization for Release of Information by the Tennessee Department of Human Services to a 3rd Party-English](#)
- [HS-2938 General Authorization for Release of Information by the Tennessee Department of Human Services to a 3rd Party-Spanish](#)
- [HS-2938 General Authorization for Release of Information by the Tennessee Department of Human Services to a 3rd Party-Arabic](#)
- [HS-2938 General Authorization for Release of Information by the Tennessee Department of Human Services to a 3rd Party-Somali](#)
- [Families First Good Cause for Non-Compliance](#)
- [SAPT block grant providers and services](#)
- [Signs of Abuse and/or Neglect](#)

**Definitions/Acronyms**

Term	Definition
<b>Applicant</b>	An individual who makes application for Families First/TANF cash assistance.

<b>Confirmation Test</b>	A second analytical procedure used to identify the presence of a specific drug in a specimen that is different in scientific principle from that of the initial test procedure.
<b>MRO</b>	Medical Review Officer is a licensed physician who has knowledge of substance abuse disorders, laboratory testing procedures, and chain of custody collections procedures; who verifies positive, confirmed test results; and who has the necessary medical training to interpret and evaluate a Families First/TANF recipient's positive test result in relation to the recipient's medical history and current, valid prescription(s), or any other relevant biomedical information.
<b>New Applicant</b>	An applicant that meets one (1) of the following criteria: <ul style="list-style-type: none"> <li>• Never has received prior Families First cash assistance;</li> <li>• Has not received Families First cash assistance for at least one (1) month.</li> </ul>
<b>Protective Payee</b>	The person other than the caretaker or grantee relative to whom a Families First grant is payable. A protective payee has responsibility for administering the benefits of the assistance unit grant payment for the benefit of the assistance unit. The Department should secure the name of the protective payee from the caretaker and verify ID of the named individual before assigning.
<b>Subsequent test</b>	A subsequent test refers to the additional required drug test(s) following the requirement to complete a substance abuse treatment program as prescribed after a positive result from the initial drug test administered to determine Families First eligibility at application. A subsequent test is required at the completion of a substance abuse treatment program in order to continue eligibility in the Families First grant and/or at the end of the six (6) month disqualification period for customers who: <ol style="list-style-type: none"> <li>a) refuse to enter a substance abuse program,</li> <li>b) fail to begin or complete a substance abuse program, or</li> <li>c) test positive following the completion of a substance abuse treatment program in order to re-join the Families First assistance unit.</li> </ol>
<b>Substance abuse treatment program</b>	Includes residential/in-patient drug treatment, outpatient drug treatment, and self-help and support groups, such as, but not limited to, Narcotics Anonymous.
<b>Two-parent assistance unit</b>	The assistance unit either contains a common child or the stepparent is eligible for inclusion in the assistance unit because one of the following is true: <ul style="list-style-type: none"> <li>• The stepparent in the home is the only relative who meets the requirements as a caretaker; or</li> <li>• The stepparent lives in the home and the natural/adoptive parent in the home is incapacitated.</li> </ul>
<b>Acronym</b>	<b>Expansion</b>
<b>HIPAA</b>	Health Insurance Portability and Accountability Act
<b>MRO</b>	Medical Review Officer
<b>TANF</b>	Temporary Assistance for Needy Families

<b>TDHS</b>	Tennessee Department of Human Services
<b>TDMHSAS</b>	Tennessee Department of Mental Health and Substance Abuse Services

**Supersedes**

23.02 Families First Drug Testing Policy eff. date 12/15/2016

**Approval History**

Approved By	Approver Title	Approved Date	Effective Date
Clarence Carter	Commissioner	02/23/2024	03/01/2024
Tracy Bell	Chief Officer of Workforce Development	12/08/2016	12/15/2016
Charles Bryson	Interim Assistant Commissioner	10/21/2016	10/31/2016
Charles Bryson	Interim Assistant Commissioner	12/04/2015	12/15/2015

**Revision History**

Date	Version	Location of Change	Description/Reason for Change
02/23/2024	03/01/2024	Title, Introduction, Scope, Policy Section, Acronyms, and Authority.	Renumbered policy to 23.06, Update to all sections in the policy for clarity.
12/08/2016	12/15/2016	Policy Section	Removed item 8; Clarified section; Updated drug screening language to drug questionnaire and provided clarifications.
10/21/2016	10/31/2016	Policy Number	Renumbered policy from 23.01 to 23.02
12/04/2015	12/15/2015	New Document	New Document

<b>Approved By</b>	<i>Clarence H. Carter</i>	<b>Approval Date</b>	02/23/2024
<b>Authority</b>	T. C. A. §§ 71-3-1201–1206; Tenn. Comp. R. & Regs. 1240-01-57		<b>Effective Date</b> 03/01/2024
<b>Application</b>	All TDHS Family Assistance Staff and Contractors		