

GAO

Report to the Honorable
Daniel Patrick Moynihan, U.S. Senate

May 1993

WELFARE TO WORK

JOBS Participation Rate Data Unreliable for Assessing States' Performance



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United States
General Accounting Office
Washington, D.C. 20548

Human Resources Division

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May 5, 1993

The Honorable Daniel Patrick Moynihan
United States Senate

Dear Senator Moynihan:

In December 1991, you requested that we review two issues related to the participation rate requirements of the Job Opportunities and Basic Skills Training (JOBS) component of the Family Support Act of 1988. We issued a report in November 1992 that addressed your concern that these requirements may be inadvertently discouraging states from serving those most at risk of welfare dependency by not providing them education and training services.¹ This report addresses your concern that participation rates may not be comparably derived across states or provide a fair basis for assessing states' performance.

To encourage state JOBS programs to serve increasing numbers of Aid to Families With Dependent Children (AFDC) recipients, the Congress legislated minimum rates of participation that states must meet or exceed each year. The Department of Health and Human Services (HHS) calculates these participation rates on the basis of state-provided data. States failing to meet or exceed the annual rates can lose millions of dollars in federal JOBS funds.

As agreed with your office, the objectives of our review were to determine whether (1) the participation rate data provided HHS are comparably derived across states and (2) HHS-determined participation rates provide a fair basis for assessing states' performance in serving AFDC clients and making decisions related to federal JOBS funding. To accomplish our objectives, we interviewed HHS headquarters' officials on the rate development process and reviewed JOBS regulations and HHS' instructions on participation rates. We also reviewed the practices that four states—Colorado, Louisiana, Michigan, and New Jersey—used to develop participation rate data reported for fiscal year 1991. We judgmentally selected these states on the basis of their differences in geographic location, AFDC population size, county or state administration of JOBS, and extent of statewide JOBS coverage. Within each state, we visited the state and three local JOBS offices to determine how they applied the participation rate regulations and instructions. We also visited and interviewed representatives in four HHS regional offices to determine how

¹Welfare to Work: States Serve Least Job-Ready While Meeting JOBS Participation Rates (GAO/HRD-93-2, Nov. 12, 1992).

they assisted the four states with the participation rate requirements. In addition, we examined reports on states' implementation of JOBS conducted by HHS and various evaluation organizations. We did our work between November 1991 and December 1992 in accordance with generally accepted government auditing standards. We did not, however, verify the data that the four states reported to HHS.

Background

The Congress intended JOBS to serve as a principal pathway from welfare to work for AFDC recipients by providing them education, training, and employment services. Although the federal government and states share in the costs of JOBS, primary responsibility for implementing the program rests with each state's welfare agency. During fiscal year 1991, states used about \$600 million of the \$1 billion in federal JOBS funds authorized for that year.² To obtain the highest level of federal JOBS funds allocated to them, states must serve a certain percentage of their AFDC recipients who are required to participate in JOBS.³ This percentage was 7 percent for fiscal years 1990 and 1991, 11 percent in 1992, and will grow to 20 percent by 1995.⁴

While the Congress specified the minimum annual participation rates, it assigned HHS responsibility for defining participation and establishing reporting standards for the states. Concluding that the Congress intended that participation be meaningful and that it reflect actual participation rather than mere assignment to an activity, HHS requires that participants be scheduled in JOBS activities for an average of 20 hours each week and that participation be monitored. To determine states' participation rate, HHS requires states to submit, on a quarterly basis, monthly data on the number of (1) individuals required to participate in JOBS and (2) JOBS participants meeting JOBS participation requirements, as described in the paragraphs that follow. Using these data, HHS calculates individual state participation rates for each fiscal year.

In compiling their participation rate data, states cannot count all AFDC recipients as individuals required to participate in JOBS. For example,

²Each state's allocation of federal JOBS funds is determined by its proportional share of the national AFDC adult recipient population.

³Unless states meet this participation rate and spend at least 55 percent of their total federal and state JOBS funds on individuals whom the Family Support Act targeted as those most in need of assistance, the federal share of their JOBS program costs is reduced.

⁴States were not subject to having their federal share of JOBS program costs reduced for failure to meet the participation rate for fiscal year 1990.

individuals meeting certain exemption criteria, such as age or illness, are not to be counted. Also, states are to exclude from their count individuals they have determined have good cause for not participating, such as not having child care available, or whom they have sanctioned because of failure to participate in the program or refusal to accept employment without good cause, among other reasons.

As with determining the number of required participants, states cannot count as participants all individuals who are enrolled in JOBS activities. To count toward a state's participation rate, individuals must have satisfactorily participated by attending at least 75 percent of their scheduled hours of activity for the month. States then are to combine and average these participants' scheduled hours to determine the largest number of individuals for whom, as a group, average hours of scheduled participation equal or exceed 20 hours per week for the month.⁶ It is this number of individuals that states are to report to HHS as the number of participants.⁶

Results in Brief

JOBS participation rate data are not accurate nor comparably derived across states; thus, HHS' calculated participation rates do not provide a fair basis for assessing states' performance or making decisions related to federal JOBS funding. For fiscal year 1991, HHS determined that all but one state met the 7 percent participation rate, and it waived the financial penalties for the one state. Our review of four states' practices for developing participation rate data, however, showed the data to be neither comparably derived nor accurate. These states deviated from JOBS regulations and HHS instructions in (1) whom they counted as required to participate, (2) what activities they counted toward hours of participation, (3) whom they determined had met the attendance requirement, and (4) whom they counted as participants. HHS had found, through its own reviews in 1991, similar discrepancies in at least 20 of 34 states it visited.

In our view, complex and burdensome participation rate reporting requirements were a primary contributing factor for states reporting

⁶This number is determined by listing, in rank order, the number of scheduled hours for each individual that satisfactorily participated, starting with the individual having the highest number of scheduled hours to the individual with the lowest number of scheduled hours, and then calculating a running average of weekly hours until average scheduled hours for those included falls below 20.

⁷The definition of participation in this report is different from that used in our previous report, *Welfare to Work: States Serve Least Job-Ready While Meeting JOBS Participation Rates*, in which we reported on the numbers of least job-ready AFDC recipients who participated in JOBS activities. Participation in that report was defined broadly as any level of activity or involvement in JOBS.

inaccurate and noncomparable participation data. None of the four states had programmed their automated systems to collect or process all the required participation rate data because of the amount and detail of data required to be collected. States said they had little incentive to improve their data collection or processing because of the costs involved or because their existing data indicated minimum participation rates were being met. State and local offices also encountered problems collecting attendance data on all participants, particularly for postsecondary educational activities. As a result, states sometimes used substitute data or short-cuts to determine satisfactory participation. In addition, several state or local officials cited complex JOBS regulations or HHS instructions as the reason they had incorrectly applied certain program standards and procedures.

HHS has been aware of the states' difficulties in compiling participation rate data since 1990. However, it has taken little action to assure itself of the accuracy or completeness of the data upon which it calculates states' participation rates. HHS officials said that, given its existing resources, it has been difficult to effectively oversee what states are doing. Simplification of the rate development process, such as not requiring attendance data from postsecondary schools, could help alleviate the states' difficulties in collecting participation rate data, minimize data inaccuracies, and enhance HHS' ability to ensure the accuracy and completeness of the participation rate data reported to it.

Participation Rate Data Not Accurate Nor Comparably Derived

None of the four states included in our review met all the participation rate reporting requirements. Each state deviated in varying ways from the JOBS regulations and HHS instructions in determining the number of individuals required to participate in the JOBS program and the number of JOBS participants. As a result, each of the four states under- or overstated different data that HHS uses to calculate participation rates. Table 1 summarizes how the four states deviated from JOBS regulations and HHS instructions and the effect of the deviations on the accuracy of state participation rates. Because data were unavailable, we were unable to determine the net effect that incomplete or inaccurate data had on states' participation rates.

Table 1: Summary of Four States' Deviation From Data Collection Requirements and Their Effect on Participation Rates

Participation rate data element	Condition	Reason for inaccuracy	Effect on participation rate
Number of AFDC recipients required to participate	Number required to participate not determined accurately	Counting AFDC recipients who are statutorily exempt, not participating for good cause, or sanctioned for not participating as required	Understate
		Counting non-AFDC recipients as required participants	Understate
		Using nonempirical data to estimate AFDC recipients exempt from participation	Under- or overstate
Number of satisfactory participants	Deviations in determining activities counted toward hours of participation	Counting hours of nonapproved activities as part of scheduled hours	Overstate
		Not counting scheduled high school summer breaks	Understate
	Deviations from attendance requirement	Counting excused absences as hours of attendance	Overstate
		Using nonempirical data to estimate the number of participants attending approved activities for 75 percent of the scheduled hours	Under- or overstate
	Deviations from HHS instructions in who is counted as a participant	Not combining and averaging participant hours	Understate
		Incorrectly determining average scheduled weekly hours for the month	Overstate

Actual Number Required to Participate Not Determined Accurately

None of the four states visited had accurately determined the actual number of AFDC recipients required to participate, as required by JOBS regulations. These states included individuals who should not have been counted or estimated the number of individuals required to participate.

Three states overstated the number of individuals required to participate, thereby understating their participation rate by counting individuals who JOBS regulations specify should not be counted. For example, while JOBS regulations require states to exclude from their counts individuals who are determined to have good cause for not participating, none of the three states had mechanisms in place to centrally aggregate such cases reported to them by their local offices. One of these states also counted JOBS participants who had been sanctioned for nonparticipation and volunteers who had been exempted from participation, even though HHS or JOBS regulations specify they be excluded.

One of these three states also included in its count of required participants at least 15,000 AFDC recipients whose initial eligibility determinations for JOBS, and therefore their exemption status, had not yet been made. State officials believed that about 30 percent of these individuals might have been exempted if the incidence of exemptions followed statewide trends. This state also had included several thousand individuals receiving state general assistance, non-AFDC recipients, thus overstating its count of individuals required to participate.

A fourth state did not identify or collect data on all exemptions but estimated a number for those it could not identify. Included in its estimate were exemptions for illness, care of incapacitated, and several other reasons, as well as exclusions for not participating for good cause. The state's estimate of these exemptions, however, was not based on empirical data, so its accuracy could not be determined.

Deviations in Determining Activities Counted Toward Hours of Participation

All four states deviated from JOBS regulations that specify the activities that can be used in determining hours of participation. For example, a local office in one state counted the total hours a client was at a postsecondary school, even though HHS instructions specify that only class time be counted. In this case, a participant scheduled for 1-hour classes at 10:00 a.m. and 1:00 p.m. on the same day was credited with 4, rather than 2, hours of participation. Further, although JOBS regulations provide that only breaks in educational activities can be counted toward scheduled hours, local offices in two other states credited participants in all activities with hours that would have been scheduled had it not been for a holiday. Similarly, one state instructed its local offices to include holiday hours as scheduled hours, regardless of the type of activity, if the participant would normally have been assigned on the holiday.

In contrast to using activities that should not have been used, local offices in one state did not count scheduled high school summer breaks when they could have. JOBS regulations specify that participants who are enrolled in and attending high school for the last semester of a school year can count as participants during the break between school years, if they are expected to return for the next school year. A state official said he was unaware that this was permissible.

Deviations From Attendance Requirement

Three states deviated from JOBS regulations when determining who met the 75-percent attendance requirement. JOBS regulations provide that

excused absences are already factored into the 75 percent attendance requirement. However, local offices in two states counted hours of excused absences as attended hours, which enabled participants to more easily meet the requirement. Another state estimated its total number of satisfactory participants rather than determine satisfactory participation for each individual, as required by the regulations. In this case, the state estimated that 80 percent of all participants had satisfactorily participated. This estimate was not based on any empirical data.

Deviations From HHS Instructions in Who Is Counted as a Participant

Two states deviated from HHS instructions in who they counted as participants by failing to count all participants that could be counted or incorrectly determining average weekly hours for the month. For example, one state combined and averaged participants' scheduled hours of participation on a county rather than a statewide basis because of limitations in its automated information system. As a result, state officials estimated they understated the number of countable participants by several hundred each month.

Another state misinterpreted HHS' instructions on how to determine average weekly hours of participation for the month and, as a result, incorrectly determined its number of countable participants. The state divided the number of scheduled hours for the month by the number of weeks of activity, rather than by the number of weeks in the month, when determining average weekly hours for each participant.⁷ This enabled the state to compute higher weekly averages of scheduled hours for participants that participated less than 4 weeks during the month, thus overstating the number of participants.

Complex and Burdensome Reporting Requirements Contribute to Noncomparable and Inaccurate Data

Complex and burdensome participation rate reporting requirements contributed to states reporting noncomparable and inaccurate participation data. None of the four states' automated systems were capable of collecting and processing all the required participation rate data. Also problematic for the states was collecting and processing attendance data to determine satisfactory participation. The states also cited complex regulations or HHS instructions as reasons for database errors and for states misapplying or overlooking certain participation requirements.

⁷While this method is permissible during the first 2 months of an individual's participation in JOBS, it is not to be used during intervening periods of participation as this state had done.

States' Automated Systems Not Capable of Collecting and Processing All Participation Rate Data

None of the four states' automated systems were programmed to collect or process all the required participation rate data. Several state officials said the detail and amount of data that had to be tracked made it difficult to incorporate into their systems all of the requirements that can affect participation rates. This affected the accuracy of both the reported number of individuals required to participate and the number of satisfactory participants. Because of limited resources, several states said they had little incentive to enhance their systems to collect data not now collected.

The participation data that could not be collected or processed by states varied. None of the four states' systems were able to exclude individuals not participating for good cause from their count of those required to participate, because none of the states' systems were programmed to aggregate this information centrally. One state's count of participants was inaccurate because its system could not combine and average participants' scheduled hours across the state. Another state's system prevented it from counting all the scheduled hours that could be counted for certain participants.

One state, in modifying its system to meet participation rate reporting requirements, created a condition that made its count of satisfactory participants susceptible to inaccuracy. In this case, the state's system automatically defaulted to reporting individuals as satisfactorily participating unless a case worker manually intervened to change a designated data field to denote the contrary. However, we observed that case workers did not always change this data field when warranted. According to case workers, the system did not prompt them to make these changes. As a result, the number of satisfactory participants might be overstated.

Officials in three of the four states indicated they had little incentive to improve their automated systems' ability to collect or process participation data either because of the costs involved or because such improvements were not needed to meet the minimum annual participation rate. As a result, they did not believe there was a need to collect data that was not now being collected or to process data that would provide a greater number of reportable participants. Officials in two of these states added that, since HHS had been accepting what was reported, there was no need to make any changes.

Collecting Attendance Data Is Burdensome for States

State and local offices we visited encountered some problems collecting attendance data for JOBS participants. For example, all of the offices reported difficulty obtaining attendance data on postsecondary education activities. State and local officials in several states explained that this problem stems from the fact that attendance is not normally taken in college classes, adding that JOBS participants sometimes do not let instructors know they are welfare recipients because they are embarrassed. Other officials indicated that the attendance data, even when received, may be quarterly rather than monthly.

State and local offices sometimes relied on information other than attendance data to determine satisfactory participation or used short-cut methods to collect the data. When attendance data are not available, some state and local officials said that other data, such as grade point averages or travel reimbursement documentation, are used to certify attendance. One state believed that tracking individual attendance placed too much of an administrative burden on local offices and doubted that all service providers would take attendance. As a result, the state simply estimated that 80 percent of all individuals participating in JOBS activities had satisfactorily participated.

Complex Regulations and Instructions Caused Other Errors

Several state and local officials cited complex JOBS regulations or HHS instructions as the reason they misapplied prescribed methodologies or overlooked exemptions to which states are entitled. One state said its confusion about the process for determining average scheduled weekly hours of JOBS participants led to its reporting inaccurate data. Although the state had consulted with the responsible HHS regional office about the process it used, it proceeded with a method that nevertheless we found to be incorrect. Complex JOBS regulations were also cited by another state as the reason it overlooked collecting data on individuals not participating for good cause and by a third state for its unclear instructions to local offices on how to treat holidays when determining scheduled hours. Local offices in several states also cited their confusion over JOBS regulations as the reason for not understanding what could be counted toward scheduled hours.

The complexities associated with having to track participants was also cited by some state and local officials as a reason why case workers were sometimes unable to keep up with their data entries or sometimes entered the wrong data. At some of the local offices we visited, supervisory

comparisons of case files with automated records revealed discrepancies in individuals' exemption status, scheduled hours, and assigned activity.

HHS Aware of States' Problems in Developing Participation Rate Data

HHS has been aware of problems in other states, similar to those we identified in the four states, since 1990; yet it has taken little action to ensure the completeness and accuracy of the data states report. States and public interest groups have been critical of HHS' participation rate standards and reporting requirements from the outset. In addition, HHS identified, through its own and others' reviews of states' JOBS programs, the difficulties states face. However, HHS officials said that limited resources have precluded them from taking the necessary steps, such as validating the processes states use, to ensure the accuracy and completeness of the states' data.

States Testified on Problems Meeting Participation Rate Reporting Requirements

States' and public interest groups' testimony before the Congress in 1991 concerning states' implementation of JOBS programs amply document states' concerns about complex and burdensome participation rate reporting requirements. These entities have testified often on the administrative burden of tracking attendance, the complexity of the calculation methodology, and the need to create or extensively modify existing automated systems to perform the functions necessary to satisfy participation rate requirements. In addition, we reported states' concerns to HHS in our September 1991 report on states' implementation of JOBS.⁸

HHS Knows That Many States Encounter Similar Difficulties

HHS had previously identified in other states many of the factors contributing to noncomparable data in the four states we reviewed. On the basis of its reviews of 34 states' JOBS programs during 1991, HHS identified conditions in 20 states that we found could impact the accuracy of participation rates.⁹ HHS found that states had difficulty (1) determining satisfactory participation, (2) acquiring complete and accurate attendance information, (3) calculating scheduled hours of participation, and (4) determining the number of individuals required to participate and participants to report. HHS attributed these difficulties mainly to states' limited computer capability, difficulty getting attendance data from service providers, and misapplication of JOBS regulations or HHS instructions. In

⁸Welfare to Work: States Begin JOBS, but Fiscal and Other Problems May Impede Their Progress (GAO/HRD-91-106, Sept. 27, 1991).

⁹The number of states includes the District of Columbia.

July 1991, HHS testified before the Congress that states were experiencing difficulty collecting and reporting JOBS information.

In 1992, HHS' findings were corroborated by an academic institution's study, which was partially funded by HHS.¹⁰ This study examined 10 states' implementation of during 1990, one of which was a state we visited. The study reported that none of the 10 states had information systems capable of adequately responding to the new reporting requirements of JOBS at that time. It further reported that many of the states had problems collecting participation rate data and designing and developing JOBS automated systems. In addition, the study cited issues questioning the validity of the participation rate data collected and entered into states' information systems.

HHS Has Taken Little Action to Ensure Complete and Accurate Data

Despite its awareness of participation rate data problems, HHS has taken little action to ensure the accuracy and completeness of the data states report. HHS officials said that they routinely review the reasonableness of states' participation rate data when they receive it. Generally, data falling outside acceptable parameters for the size of a state's program is considered suspect and will result in contacts with the state to resolve perceived discrepancies. Aside from these actions, however, HHS has made little effort to validate the processes states use to develop their data or verify the accuracy of the data reported. Although agency officials acknowledged the benefits of closer scrutiny of states' rate information, they asserted they do not have the resources, particularly travel funds, to make on-site state visits for this purpose. They said that, unless resources are made available for this purpose, it is unlikely that HHS can do more to improve the quality of participation rate data.

One action HHS did take to ease the burden on states in fiscal year 1991 was to provide them the option of sampling to estimate the number of AFDC recipients required to participate or the number of JOBS participants. One of the four states we visited used this option to estimate the number of JOBS participants because the state did not have an automated system that could collect all the required participation data on each individual participating in JOBS. The sampling option reduced the number of cases the state had to report on to HHS from about 40,000 to a little more than 1,300. However, because the sample had to be randomly selected from the 40,000

¹⁰Implementing JOBS: Initial State Choices, The Nelson A. Rockefeller Institute of Government, State University of New York (Mar. 1992).

active JOBS participants, the state still had to collect monthly data on all JOBS participants' scheduled and attended hours.

Conclusions

HHS is making decisions related to providing states millions of dollars in federal JOBS funds that are based upon inaccurate state-reported participation rate data. These data are not comparably derived across states and should not be relied upon by policymakers as a basis for comparing states' performance. Much of the inaccuracy in these data is attributed to states' difficulties in collecting and processing all the required data and misinterpretation of JOBS regulations and HHS instructions. As minimum annual participation rates rise, it will become even more important that these issues are resolved.

We believe that, unless HHS simplifies its participation rate reporting requirements and increases its oversight of states' processes, states will continue to report noncomparable and inaccurate data. Any simplification of the requirements should be aimed at minimizing data collection requirements while accomplishing the goals of JOBS and facilitating HHS' oversight of participation rate requirements. Such simplification could include easing the requirement that daily attendance data be gathered for all activities from all institutions, especially those such as postsecondary schools that do not normally track attendance, to determine individuals' satisfactory participation in JOBS. In addition, to ease the burden on states and potentially improve the comparability of states' counts of the number of AFDC recipients required to participate in JOBS, HHS could permit states to take a representative and statistically valid sample to determine the percentage of individuals that are exempted or may be excluded from their counts and apply that percentage throughout the year.

Recommendations

Because states are experiencing difficulties in compiling participation rate data and are reporting inaccurate data to HHS, we recommend that the Secretary of Health and Human Services review HHS' participation rate reporting requirements toward the goals of making them less complex and burdensome while preserving the concept of meaningful participation. Because participation rate data are used to adjust the rate at which the federal government shares in the costs of a state's JOBS program, we also recommend that the Secretary increase HHS' oversight of states' development of participation rate data to provide sufficient assurance that the processes states use to compile the data are reasonable and produce a fair measure of states' performance.

Agency Comments

HHS comments on a draft of this report were received too late to include in the final report. Essentially, HHS agreed with our findings but stated that our recommendations alone would not improve data quality—that the states' commitment to improve their data was needed as well. HHS also questioned our ideas for simplifying the reporting requirements. We offer these, however, mostly as thought-provoking examples, believing that HHS and the states should determine the most appropriate courses of action.

Copies of this report are being sent to the Secretary of Health and Human Services, the Assistant Secretary for Children and Families, the Chairmen of the Senate Committee on Finance and the House Committee on Ways and Means, state JOBS directors, and other interested parties. Copies also will be made available to others on request.

If you have any questions concerning this report or need additional information, please call me on (202) 512-7215. Other major contributors are listed in appendix I.

Sincerely yours,



Jane L. Ross
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Table 1: Summary of Four States' Deviation From Data Collection Requirements and Their Effect on Participation Rates

Abbreviations

AFDC	Aid to Families With Dependent Children
HHS	Department of Health and Human Services
JOBS	Job Opportunities and Basic Skills Training Program

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Related GAO Products

Welfare to Work: States Serve Least Job-Ready While Meeting JOBS Participation Rates (GAO/HRD-93-2, Nov. 12, 1992).

Welfare to Work: Implementation and Evaluation of Transitional Benefits Need HHS Action (GAO/HRD-92-118, Sept. 29, 1992).

Unemployed Parents: An Evaluation of the Effects of Welfare Benefits on Family Stability (GAO/PEMD-92-19BR, Apr. 29, 1992).

Welfare to Work: Effectiveness of Tribal JOBS Programs Unknown (GAO/HRD-92-67BR, Mar. 19, 1992).

Unemployed Parents: Initial Efforts to Expand State Assistance (GAO/PEMD-92-11, Jan. 14, 1992).

Welfare to Work: States Begin JOBS, but Fiscal and Other Problems May Impede Their Progress (GAO/HRD-91-106, Sept. 27, 1991).

Mother-Only Families: Low Earnings Will Keep Many Children in Poverty (GAO/HRD-91-62, Apr. 2, 1991).

Welfare: Expert Panels' Insights on Major Reform Proposals (GAO/HRD-88-59, Feb. 3, 1988).

Work and Welfare: Current AFDC Work Programs and Implications for Federal Policy (GAO/HRD-87-34, Jan. 29, 1987).

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