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Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Funding Subaccounts*

DESCRIPTION:

This premise reflects funding shifts for CalWORKs grant costs from GF to revenues deposited into the CalWORKs MOE Subaccount, Realignment Family Support Subaccount and Child Poverty and Family Supplemental Support Subaccount. Funds deposited into the Child Poverty and Family Supplemental Support subaccounts consist of county indigent health savings transferred from the Health Subaccount. These funds will be redistributed to counties in lieu of GF for CalWORKs expenditures.

IMPLEMENTATION DATE:

The CalWORKs MOE Subaccount funds implemented on September 1, 2011. The Realignment Family Support Subaccount and the Child Poverty and Family Supplemental Support Subaccount implemented on July 1, 2013.

KEY DATA/ASSUMPTIONS:

CalWORKs MOE Subaccount Funds

- Authorizing statute: W&IC section 17601.2.
- Funds previously deposited into the Mental Health Subaccount are deposited in the CalWORKs MOE Subaccount.
- Counties are required to pay an increased share of CalWORKs assistance costs up to the amount of funds available in the CalWORKs MOE Subaccount.
- The CalWORKs MOE Subaccount is expected to contain revenues of $1.1 billion in both FY 2015-16 and FY 2016-17.

Realignment Family Support Subaccount

- Authorizing statute: W&IC section 17600.50.
- Sixty percent of the sum of the 1991 health realignment funds from the indigent and public health program and the county medical services program will shift to the Realignment Family Support Subaccount to offset CalWORKs grant costs.
- In the Realignment Family Support Subaccount, $741.9 million will be available in FY 2015-16 and $412.8 million will be available in FY 2016-17.

Child Poverty and Family Supplemental Support Subaccount

- Authorizing statute: W&IC section 11450.025.
- The Child Poverty and Family Supplemental Support Subaccount provides funding for the grant impact of both the March 1, 2014 and April 1, 2015 five percent CalWORKs MAP increases and any subsequent grant increases when sufficient revenues are available.
- Prior year "base" funding is available to the counties immediately. The FY 2015-16 and FY 2016-17 funding, identified as "growth" in the budget tables, requires adequate upfront GF authority in the CDSS budget until subaccount funds are available directly to the counties.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Funding Subaccounts*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The Child Poverty and Family Supplemental Support Subaccount consists of base and growth funding:
  - In the Child Poverty and Family Supplemental Support Subaccount - Growth, $48.9 million will be available in FY 2015-16 and $60.9 million will be available in FY 2016-17.
  - In the Child Poverty and Family Supplemental Support Subaccount - Base, $262.1 million will be available in FY 2015-16 and $241.5 million will be available in FY 2016-17.

METHODOLOGY:

Counties are required to pay an increased share of CalWORKs assistance costs based on the most recent projections of funds available in the CalWORKs MOE Subaccount, Realignment Family Support Subaccount and Child Poverty and Family Supplemental Support Subaccount.

FUNDING:

The increased county share is funded by revenues from the CalWORKs MOE Subaccount, Realignment Family Support Subaccount and the Child Poverty and Family Supplemental Support Subaccount and offsets an equivalent amount of GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

CalWORKs MOE Subaccount

There is no change.

Realignment Family Support Subaccount

There is no change.

Child Poverty and Family Supplemental - Growth

There is no change to the total funds; however, the funding shift has decreased county cost due to the updated revenue projections and available funding.

Child Poverty and Family Supplemental - Base

There is no change to the total funds; however, the funding shift has increased county cost due to the updated revenue projections and available funding.

REASON FOR YEAR-TO-YEAR CHANGE:

CalWORKs MOE Subaccount

There is no change.

Realignment Family Support Subaccount

There is no change to the total funds; however, the funding shift has decreased county cost due to the updated funding estimates.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Funding Subaccounts*

REASON FOR YEAR-TO-YEAR CHANGE (CONTINUED):

Child Poverty and Family Supplemental - Growth

There is no change to the total fund; however, the funding shift has increased county cost due to the updated revenue projections and available funding.

Child Poverty and Family Supplemental – Base

There is no change to the total funds; however, the funding shift has decreased county cost due to the updated revenue projections and available funding.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 –CalWORKs Assistance	Total	Federal	State	County	Reimb.
CalWORKs MOE Subaccount	$0	$0	-$1,120,551	$1,120,551	$0
Realignment Family Support Subaccount	0	0	-741,916	741,916	0
Child Poverty and Family Supplemental Support Subaccount – Growth**	0	0	-48,922	48,922	0
Child Poverty and Family Supplemental Support Subaccount - Base	0	0	-262,088	262,088	0

FY 2016-17

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
CalWORKs MOE Subaccount	$0	$0	-$1,120,551	$1,120,551	$0
Realignment Family Support Subaccount	0	0	-412,784	412,784	0
Child Poverty and Family Supplemental Support Subaccount – Growth**	0	0	-60,862	60,862	0
Child Poverty and Family Supplemental Support Subaccount - Base	0	0	-241,531	241,531	0

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**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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TANF/MOE Adjustments*

DESCRIPTION:

This premise reflects the adjustments and funding shifts necessary to meet the MOE funding requirements of the TANF program, as well as additional state funding requirements for the CalWORKs program. This premise consolidates the following items: CalWORKs Administrative Cap Adjustment, Tribal TANF MOE Adjustment, GF MOE WPR Adjustment, GF MOE Adjustment, TANF Carry Forward and Total TANF Reserve.

In addition to the TANF requirements for the state, this premise also reflects the 15 percent federal cap on administrative expenditures.

For other premise items pertaining to TANF and MOE, please refer to the TANF/MOE in Other State Agencies, CalWORKs Non-MOE and CalWORKs Funding Subaccounts premises.

IMPLEMENTATION DATE:

The TANF program and MOE requirements implemented on October 1, 1996.

KEY DATA/ASSUMPTIONS:

Administrative Cap Adjustment

- Authorizing statute: CFR sections 263.0 and 263.13.
- The TANF program rules prohibit states from spending more than 15 percent of federal TANF funds on administrative costs.
- The administrative cap is applied statewide rather than to each county individually. Administrative activities include, but are not limited to, eligibility determinations, automation costs, fraud and administrative costs incurred by contractors.
- The total Administrative Cap Adjustment is $258.95 million for both FY 2015-16 and FY 2016-17.

State MOE Requirement

- The CalWORKs TANF Block Grant is $3.7 billion for both FY 2015-16 and FY 2016-17.
- Federal legislation established the amount of MOE GF that states must contribute as a condition for receipt of the block grant. The ongoing state MOE requirement is approximately $2.9 billion.
- The state MOE requirement may be adjusted by both Tribal TANF and the WPR adjustment.

Tribal TANF/MOE Adjustment

- Adjustments are made to the TANF block grant and the MOE requirement to account for Tribal TANF expenditures.
- The total federal TANF funds for Tribal TANF programs are $82.5 million for FY 2015-16 and $90.0 million for FY 2016-17.
- It is projected that $76.8 million in GF for FY 2015-16 and $83.8 million in FY 2016-17 will be spent in Tribal TANF programs.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

TANF/MOE Adjustments*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Of these additional GF expenditures, approximately $64.3 million for FY 2015-16 and $70.1 million for FY 2016-17 may be used to reduce the state's TANF MOE requirement.

GF MOE WPR Adjustment

- In any year in which the state meets the federal WPR for the CalWORKs program, the MOE requirement is reduced from 80 percent to 75 percent of the historical FFY 1994 expenditures. As of FFY 2014, the state has not met the WPR since FFY 2007.
- The MOE requirement is held at 80 percent until such time that California receives notice from ACF that the WPR has been met.

TANF Carry Forward and Total TANF Reserve

- Unspent TANF funds from one FY may be carried forward to be spent in the future FYs. The estimated carry forward available to be spent is $378.0 million in FY 2015-16 and $403.2 million in FY 2016-17.
- The total TANF Reserve was established to fund unforeseen program needs in the CalWORKs Program. There are currently no funds in the TANF Reserve.

Excess GF (MOE or Non-MOE) Needed to Fund Programs

- If projected expenditures exceed the combined total of the available TANF Block Grant, MOE requirement and/or GF available, the additional projected GF is considered excess GF needed to fund programs and may be claimed as excess MOE if appropriate.
- In FY 2015-16, excess MOE provides the authority needed to fund the five percent MAP increases. Once Child Poverty Family Supplemental Support Subaccount funds are available to the counties directly, reimbursement of county expenditures will be held back to replace the GF.
- In addition, excess MOE is used to fully fund additional GF needed to replace GF that is shifted to non-MOE. The additional GF required is offset by available TANF funding transferred to the California Student Aid Commission which will make GF available for other uses.
- The estimated excess MOE required is $260.0 million in FY 2015-16. There is no excess MOE in FY 2016-17.

METHODOLOGY:

Administrative Cap Adjustment

- Actual state and federal administrative expenditures from the first three quarters of FFY 2015 are added to the projected final quarter of FFY 2015 expenditures. The total is compared to the sum of the TANF block grant and the MOE requirement for FFY 2015.
- The amount in excess of the 15 percent administrative cap is shifted from TANF to MOE.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

TANF/MOE Adjustments*

METHODOLOGY (CONTINUED):

State MOE Requirement

- The State MOE Requirement is reduced by funds expended in the Tribal TANF program to determine the adjusted MOE requirement.
- The projected MOE eligible state and county expenditures (including those in other state departments) are compared to the state's adjusted MOE requirement to determine the expenditures below the MOE requirement.
- The sum of the expenditures below the MOE requirement and the excess MOE is the GF MOE Adjustment.
- The GF MOE Adjustment is shifted from Federal TANF funds to GF. The GF MOE Adjustment does not change the total funds available.

FUNDING:

Funding for the items in this premise consists of TANF, GF MOE and county funds.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase in the GF MOE Adjustment reflects an increase in Excess MOE Needed to Fund Programs and a decrease in the state share of costs countable towards the MOE requirement due to the lower CalWORKs caseload projection.

The is no change in the total Administrative Cap Adjustment, but the increase in the federal to GF shift reflects an increase in the total projected administrative expenditures.

The increase in Excess MOE Needed to Fund Programs primarily reflects an increase in the Child Poverty and Family Supplemental Support Subaccount base funds and a decrease in CalWORKs assistance costs.

The increase in the TANF Carry Forward primarily reflects a decrease in CalWORKs program funding due to a lower CalWORKs caseload than projected in the 2015-16 Appropriation.

There is no change for the GF MOE WPR Adjustment or the Total TANF Reserve.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease to the GF MOE Adjustment reflects a decrease in the projected Excess MOE Needed to Fund Programs and a decrease in the projected non-MOE eligible expenditures in CalWORKs.

There is no change in the Administrative Cap Adjustment.

The decrease in Excess MOE Needed to Fund Programs primarily reflects a decrease in the projected Realignment Family Support Subaccount funds.

The increase in TANF Carry Forward reflects the funds available to carry forward to FY 2016-17 after accounting for TANF expenditures in FY 2015-16.

There is no change for the GF MOE WPR Adjustment or the Total TANF Reserve.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

TANF/MOE Adjustments*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
GF MOE Adjustment	$0	-$1,197,498	$1,197,498	0	0
Item 101 – CalWORKs Administration					
Administrative Cap Adjustment	0	-258,950	258,950	0	0
TANF Page					
GF MOE WPR Adjustment	0	0	0	0	0
TANF Block Grant Transfer/Carry Forward	378,019	378,019	0	0	0
Excess MOE Needed to Fund Programs	260,045	0	260,045	0	0
Total TANF Reserve	0	0	0	0	0

FY 2016-17

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
GF MOE Adjustment	$0	-$927,301	$927,301	$0	$0
Item 101 – CalWORKs Administration					
Administrative Cap Adjustment	0	-258,950	258,950	0	0
TANF Page					
GF MOE WPR Adjustment	0	0	0	0	0
TANF Block Grant Transfer/Carry Forward	403,237	403,237	0	0	0
Excess MOE Needed to Fund Programs	0	0	0	0	0
Total TANF Reserve	0	0	0	0	0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Grants*

DESCRIPTION:

This premise reflects the costs of providing cash assistance to eligible CalWORKs families. These costs include expenditures to the Diversion Program and costs for CalWORKs eligible populations including non-MOE and RNE families. Adjustments are made for policy changes that have an impact on receipients' grant amounts.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11450.
- For FY 2015-16, a total of 10,288,097 all family person-months and 1,888,772 two-parent person-months are anticipated. For FY 2016-17, a total of 10,133,950 all family person-months and 1,865,411 two-parent person-months are anticipated.
- All family cases consist of 2.29 persons in FY 2015-16 and 2.28 persons in FY 2016-17. Two-parent cases consist of 3.62 persons in FY 2015-16 and FY 2016-17.
- Adjustments are made to the total grants for the estimated costs of current premises which are already reflected in the caseload and expenditure trends to avoid budgeting the fiscal and caseload impacts twice. These premises include: Cal-Learn Bonuses, Cal-Learn Sanctioned Grants, AB 98 Subsidized Employment, and populations funded with CalWORKs Non-MOE. Adjustments are also made for costs associated with new tribes establishing Tribal TANF Programs.
- Diversion program costs are based on the most recent CalWORKs Cash Grant Caseload Movement Reports (CA 237) and CalWORKs expenditures report (CA 800). The average monthly diversion caseload is estimated at five cases for FY 2015-16 and FY 2016-17, with an average monthly cost per case of $2,278.
- The estimated CalWORKs grant cost per person is based on an average of the actual cost per person from April 2015 through June 2015. The last quarter of FY 2015-16 costs are used because by April 2015 the non-MOE caseload and the latest MAP increase have implemented.
- The all family cost per person is anticipated to be $199.17 for FY 2015-16 and FY 2016-17. The two-parent cost per person is anticipated to be $153.34 for FY 2015-16 and FY 2016-17.
- The all family and two-parent basic costs are adjusted for the projected Old Age, Survivors and Disability Insurance COLA. The COLA change for the 2015 calendar year is 1.7 percent. For the 2016 calendar year, there is no change. The change for the 2017 calendar year is 1.7 percent. These adjustments result in a reduction in cash grants of $416,070 in FY 2015-16 and $244,275 in FY 2016-17.
- The FY 2015-16 and FY 2016-17 total costs reflect a shift of funds from the RNE program for persons in mixed cases that are TANF-eligible.
    - The projected average monthly RNE caseload is 39,993 (including 21,316 state-only cases) in FY 2015-16 and 39,331 (including 20,963 state-only cases) in FY 2016-17.
    - The projected average monthly RNE cost per case is $152.11 in FY 2015-16 and FY 2016-17.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Grants*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The projected CalWORKs base grant cost of the non-MOE cases is $424,789,911 in FY 2015-16 and $405,916,629 in FY 2016-17.
  - The projected monthly caseload is reduced by 2,966 cases to reflect an adjustment to the non-MOE caseload premise in FY 2015-16 and FY 2016-17. This adjustment accounts for long-term sanction cases that are not reflected in the actual caseload.
- As of January 1, 2015, the Approved Relative Caregiver Program eligible individuals residing in existing AUs are moved to their own AU of one, which results in an increased CalWORKs grant cost per person for approximately 5,200 individuals.
  - Approximately 760 new individuals (AUs of one) are eligible for Approved Relative Caregiver Program effective January 1, 2015.
  - The projected CalWORKs grant cost of Approved Relative Caregiver AUs is $5,608,369 in both FY 2015-16 and FY 2016-17.
- The Pregnant Women premise has been consolidated into CalWORKs Grants. The projected CalWORKs grant cost of providing benefits three months earlier to pregnant women over the age of 19 is $2,434,391 in FY 2015-16 and $2,656,699 in FY 2016-17.
- The Truancy premise has been consolidated into CalWORKs Grants. The projected CalWORKs grant cost of eliminating grant penalties for truancy is $2,385,526 in FY 2015-16 and $2,345,418 in FY 2016-17.
- The projected CalWORKs grant cost of AB 98 Subsidized Employment is $4,479,958 in FY 2015-16 and FY 2016-17.
- The projected CalWORKs grant costs reflected separately as Cal-Learn Bonuses are $599,811 in FY 2015-16 and $366,942 in FY 2016-17.
- The projected CalWORKs grants savings reflected separately as Cal-Learn Sanctioned Grants are $129,600 in FY 2015-16 and $85,200 in FY 2016-17.
- The projected CalWORKs grants costs reflected separately as Tribal TANF are $5,897,561 in FY 2015-16 and $17,442,349 in FY 2016-17.
- The grant costs for the MAP increases are displayed in the Five Percent MAP Increase - March 1, 2014 and Five Percent MAP Increase - April 1, 2015 premises.

METHODOLOGY:

- The person-months are multiplied by the cost per person to determine all family and two-parent basic costs. Person-months are the number of times a person is budgeted in a given timeframe and provides a more simple method for calculating the annual cost when there is not a monthly average person count.
- The all family and two-parent basic costs are reduced for the Old Age, Survivors and Disability Insurance COLA adjustment.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Grants*

METHODOLOGY (CONTINUED):

- Diversion costs are calculated by multiplying the average monthly caseload by the cost per case by 12 months. The annual Diversion costs are added to the basic grant costs.
- The total all family and two-parent basic costs are reduced by the costs for Cal-Learn Bonuses, Cal-Learn Sanctioned Grants and new tribes establishing Tribal TANF programs.
- The total costs for Approved Relative Caregiver, Pregnant Women, Truancy and non-MOE are added to total all family and two-parent basic costs.
- The costs in this premise are also adjusted for AB 98 Subsidized Employment grants so they may be displayed separately.

CASELOAD:

	FY 2015-16	FY 2016-17
Average Monthly Caseload	417,246	412,799
Average Monthly Persons	1,014,739	999,947
All Family		
Projected Person-months	10,288,097	10,133,950
Projected Case-months	4,485,179	4,437,918
Person Per Case	2.29	2.28
Two-Parent		
Projected Person-months	1,888,772	1,865,411
Projected Case-months	521,777	515,672
Person Per Case	3.62	3.62

FUNDING:

Basic grant costs are funded with 88.6 percent TANF, 8.9 percent GF and 2.5 percent county funds. In addition, GF MOE is used to fund the RNE program with persons in mixed cases that are TANF eligible with 95 percent MOE GF and five percent county funds. Non-MOE grant costs are funded with 97.5 percent GF and 2.5 percent county funds. Due to a federal audit exception, TANF hardship cases are funded with GF MOE, effective September 1, 2009.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects a lower average cost per person and a lower projected caseload.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects a decline in the projected caseload.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

CalWORKs Grants*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
CalWORKs Grants	$2,771,837	$2,043,927	$655,103	$72,807	$0

FY 2016-17

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
CalWORKs Grants	$2,707,633	$2,004,260	$632,232	$71,141	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Subsidized Employment (AB 98)*

DESCRIPTION:

This premise provides funding to counties outside of the CalWORKs Single Allocation for the subsidized employment program established by AB 98 (Chapter 589, Statutes of 2007). Under AB 98 subsidized employment, the state contributes up to 50 percent of the total wage costs less $113 to account for the EID. The AB 98 subsidized employment program is intended to be cost neutral. Therefore, the state's contribution toward a participant's monthly wage cost is not to exceed 100 percent of the computed grant for the participant's AU in the month prior to entering AB 98 subsidized employment.

Participation in AB 98 subsidized employment is limited to individuals who are not otherwise employed at the time of entry into the subsidized employment program. Participants may include those who become ineligible for CalWORKs due to subsidized employment income, individuals in WTW sanction status and individuals who have exceeded CalWORKs time limits and are receiving Safety Net benefits for eligible children. AB 98 subsidized employment is generally limited to a maximum of six months for each participant, although not all cases participate for the full six months. Some cases may be available for a total of 12 months if the county determines that a longer subsidy is necessary in order to mutually benefit the employer and the participant.

The Budget Act of 2013 provided funding for an Expanded Subsidized Employment program which is intended to supplement rather than supplant existing subsidized employment programs, including AB 98 subsidized employment. To access the expanded funding, counties must first maintain a minimum level of subsidized employment expenditures through a combination of AB 98 or CalWORKs Single Allocation subsidized employment. See the Expanded Subsidized Employment premise for additional information regarding the expanded funding.

IMPLEMENTATION DATE:

This premise originally implemented on January 1, 2008, but was suspended pursuant to the American Recovery and Reinvestment Act. AB 98 subsidized employment was reinstated with the completion of American Recovery and Reinvestment Act as of September 30, 2010, and additional flexibility for participants and expenditures that qualify for AB 98 subsidized employment was provided on March 24, 2011. The phased-in implementation of the more flexible AB 98 subsidized employment began in July 2011.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11322.63.
- Counties are projected to serve 2,339 participants in FY 2015-16 and FY 2016-17, based on the average caseload for FY 2014-15 in counties which will continue implementing the program. This premise assumes that participation in the AB 98 subsidized employment program lasts six months per participant.
- Based on caseload data submitted by counties and actual expenditures from FY 2014-15, the adjusted average monthly AB 98 subsidized employment work subsidy is approximately $319 per participant per month.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Subsidized Employment (AB 98)*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The average monthly work subsidy is calculated using a weighted average of the actual expenditures from July 2014 through March 2015, adjusted for the April 1, 2015 MAP increase, and the unadjusted actuals from April through June 2015.
- A participant's grant will be reduced due to the receipt of subsidized employment earnings, resulting in grant savings. The cost for CalWORKs services is offset by the grant savings, resulting in the cost neutrality of the AB 98 subsidized employment program.
- Due to the continued tracking of cases for subsidized employment program purposes, there will be no administrative savings for the cases that "income off" of CalWORKs.

METHODOLOGY:

Services costs are calculated by multiplying the projected monthly work subsidy by the projected number of cases by six months for the applicable FY. The subsidized employment program is considered cost neutral with service costs (the wage subsidy) resulting in corresponding grant savings.

FUNDING:

The funding for the CalWORKs grant savings is 92.8 percent TANF, 4.7 percent GF and 2.5 percent county. The funding for services is 95.2 percent TANF and 4.8 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects a higher projected subsidy per case, increasing from $280.57 per month to $319.26. This is slightly offset by a lower projected monthly caseload.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Subsidized Employment (AB 98)*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Subsidized Employment (AB 98)	-$4,480	-$4,158	-$210	-$112	$0
Item 101 – CalWORKs Services					
Subsidized Employment (AB 98)	4,480	4,265	215	0	0

FY 2016-17

Item 101 – CalWORKs Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Subsidized Employment (AB 98)	-$4,480	-$4,158	-$210	-$112	$0
Item 101 – CalWORKs Services					
Subsidized Employment (AB 98)	4,480	4,265	215	0	0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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Expanded Subsidized Employment*

DESCRIPTION:

This premise reflects the funding for expanding subsidized employment opportunities to CalWORKs WTW participants. The Expanded Subsidized Employment Program allows counties to form partnerships with private, non-profit and public agencies. These agencies provide WTW participants with job opportunities, a connection to the labor force and the job experience needed to obtain unsubsidized work and self-sufficiency.

Expanded Subsidized Employment is generally limited to a maximum of six months for each participant, but may be available for a total of 12 months if the county determines that a longer subsidy will increase the likelihood of the participant obtaining unsubsidized employment with the participating employer or the specific skills and experiences relevant for unsubsidized employment for a particular field.

Counties that choose to participate in the Expanded Subsidized Employment Program must submit an Expanded Subsidized Employment Plan no later than 30 days after the implementation of their programs. The Expanded Subsidized Employment Plans are available on the CDSS website at: http://www.cdss.ca.gov/calworks/PG3412.htm.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2013.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 11322.63 and 11322.64.
- The projected monthly average number of slots in FY 2015-16 and FY 2016-17 is 8,250.
- Based on data reported by counties during the two-year TANF Emergency Contingency Fund subsidized employment program and feedback from the Early Engagement stakeholder workgroup, the monthly cost per slot is $1,355.
- The cost per slot includes subsidized wages and benefits, non-wage employer costs (such as worker's compensation), supervision, training and ongoing job development.
- Grant savings will result from employment earnings and those savings will be reinvested in the Expanded Subsidized Employment Program to offset a portion of the costs.
- The projected average earnings for each slot is $1,000 per month.
- The EID used in the grant calculation for CalWORKs cases is up to the first $225 of earned income and 50 percent of remaining income.

METHODOLOGY:

- The Expanded Subsidized Employment services cost is the average monthly cost per slot multiplied by the average monthly number of slots and 12 months.
- The monthly grant savings per slot is calculated by applying the EID to the average projected Expanded Subsidized Employment earnings per month.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Expanded Subsidized Employment*

METHODOLOGY (CONTINUED):

- The Expanded Subsidized Employment total grant savings is the average monthly grant savings per slot multiplied by the average monthly number of slots in the applicable FY and 12 months.

FUNDING:

The grant savings are approximately 88.57 percent TANF and 11.43 percent GF/MOE in FY 2015-16 and FY 2016-17. The employment services costs are 97.74 percent TANF in 2.26 percent GF/MOE in FY 2015-16 and 97.75 TANF and 2.25 percent GF/MOE in FY 2016-17.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change in total funding. The changes in federal and state shares reflect updated CalWORKs grants and employment services funding ratios.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change in total funding. The increase in federal funds and decrease in GF reflects a decrease in the projected percentage of services that will be provided to non-federally eligible families.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
Expanded Subsidized Employment	-$38,363	-$33,978	-$4,385	$0	$0
Item 101 – CalWORKs Services					
Expanded Subsidized Employment	134,145	131,115	3,030	0	0

FY 2016-17

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
Expanded Subsidized Employment	-$38,363	-$33,976	-$4,387	$0	$0
Item 101 – CalWORKs Services					
Expanded Subsidized Employment	134,145	131,132	3,013	0	0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Cal-Learn*

DESCRIPTION:

This premise reflects the cost of providing intensive case management, supportive services and financial incentives and disincentives to eligible teen recipients who are pregnant or parenting and participating in the Cal-Learn program. The Cal-Learn program was authorized in 1993, and in 1998 the status of the program was changed from a five-year federal demonstration project to a permanent program.

The Cal-Learn program provides services to encourage pregnant or parenting teens to stay in high school or an equivalent program and earn a diploma. Case management services must meet the standards and scope of the Adolescent Family Life Program, which is administered by the CDPH to provide comprehensive case management services to pregnant and parenting teens and their children. Those standards include case management activities such as arrangement and management of supportive services, development and review of the report card schedule, exemption and deferral recommendations and recommendations for bonuses and sanctions.

This premise includes the identification of cases, initial informing notices and referrals to orientation. It also includes the administrative time to process supportive services payments and county mandated activities which can be performed by CWDs or by other service providers contracted for the Adolescent Family Life Program. Those required activities include the final determination of deferrals, exemptions, bonuses and sanctions, good cause determinations and activities associated with fair hearings.

Effective March 31, 1999, the federal waivers for the Cal-Learn program expired. Without waiver authority, sanctioned Cal-Learn teen parents are not TANF-eligible. The grant cost for the sanctioned caseload is funded with GF.

The Cal-Learn program was suspended for FY 2011-12, except for bonuses paid for satisfactory progress and high school graduation. The Cal-Learn program was restored beginning July 1, 2012.

IMPLEMENTATION DATE:

This premise implemented on April 1, 1994.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11331.7.
- The projected caseload is based on FY 2014-15 data.
- The projected average monthly caseload is 4,694 cases in FY 2015-16 and 3,077 cases in FY 2016-17.

Cal-Learn Bonuses

- Cal-Learn incentives include a $100 bonus per report card period for satisfactory progress and a $500 bonus upon graduation.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Cal-Learn*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Based on the FY 2014-15 actual caseload, as reported on the monthly STAT 45 Reports, 4.1 percent of the Cal-Learn participants will receive the $100 bonus and 1.2 percent will receive the $500 bonus.

Cal-Learn Sanctioned Grants

- A $100 penalty is imposed per report card period for failure to either 1) submit a report card or 2) make adequate progress.
- The sanctioned caseload (108 cases in FY 2015-16 and 71 cases in FY 2016-17) represents 2.3 percent of the projected Cal-Learn caseload. This is based on the actual sanctioned caseload compared to the total Cal-Learn caseload as reported on the monthly STAT 45 Reports from FY 2014-15.

Cal-Learn Intensive Case Management

- The average hourly eligibility worker cost is $57.57.
- The eligibility worker requires one hour of administrative time per month for each case.
- The case management costs are $3,742 per case per year for all activities performed by the case manager. The rate is based on FY 2014-15 total case management expenditures divided by the total Cal-Learn caseload.
- Of the total Cal-Learn caseload, 13.9 percent is projected to utilize transportation services at a cost of $84.72 per month per participant. The utilization rate is based on the FY 2014-15 caseload as reported on the monthly STAT 45 Reports. The costs are based on the FY 2014-15 county transportation expenditure claims.
- Of the total Cal-Learn caseload, 3.5 percent is projected to utilize ancillary services at a cost of $279.68 per month per participant. The utilization rate is based on the FY 2014-15 caseload as reported on the monthly STAT 45 Reports. The costs are based on the FY 2014-15 county ancillary expenditure claims.
- Subsidized child care is available for Cal-Learn participants attending high school. Please refer to the CalWORKs Child Care - Stage One Services and Administration premise for the assumptions and methodology used to develop the estimate.
- The automation costs for Cal-Learn tracking are approximately $20 per participant per year, and each county may contract a third party vendor for the case management.
- The RNE caseload (75 cases in FY 2015-16 and 49 cases in FY 2016-17) represents 1.6 percent of the projected Cal-Learn caseload and is funded with GF. This estimate includes case management, administration, ancillary and transportation costs for the RNE caseload, which was previously included in the employment services premise.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Cal-Learn*

METHODOLOGY:

Cal-Learn Bonuses

- The Cal-Learn bonus costs are determined by multiplying the bonus amount by the total caseload, multiplied by their respective utilization rates and then multiplied by 12 months.

Cal-Learn Sanctioned Grants

- The sanctioned grant savings are determined by multiplying the total caseload by the sanctioned cases utilization rate multiplied by the $100 savings per case and then multiplied by 12 months.

Cal-Learn Intensive Case Management

- The case management costs are determined by multiplying the projected Cal-Learn caseload by the cost per case.
- The annual county administration costs are determined by multiplying the eligibility worker cost per hour by the Cal-Learn caseload and then multiplied by 12 months.
- The annual transportation costs are determined by multiplying the Cal-Learn caseload by the transportation utilization rate, multiplied by the transportation cost per case and then multiplied by 12 months.
- The annual ancillary service costs are determined by multiplying the Cal-Learn caseload by the ancillary utilization rate, multiplied by the ancillary cost per case and then multiplied by 12 months.
- The total Cal-Learn intensive case management costs are the sum of the case management cost, county administration, transportation, ancillary and automation.

FUNDING:

Cal-Learn costs are 100 percent TANF, except for grants and services for the sanctioned caseload and the costs associated with the RNE caseload, which are 100 percent GF and are countable toward the TANF MOE requirement.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in Bonuses and Sanctioned Grants reflect a lower share of the Cal-Learn caseload receiving Bonuses and Sanctions as well as a decrease in the projected caseload.

The increase in Intensive Case Management costs reflect increased cost per case, offsetting the decrease in projected caseload.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Cal-Learn*

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects a decrease in the projected caseload.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Cal-Learn Bonuses	$560	$546	$0	$14	$0
Cal-Learn Sanctioned Grants	-130	0	-127	-3	0
Item 101 – CalWORKs Services					
Cal-Learn Intensive Case Management	22,119	21,426	693	0	0

FY 2016-17

Item 101 – CalWORKs Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Cal-Learn Bonuses	$367	$358	$0	$9	$0
Cal-Learn Sanctioned Grants	-85	0	-83	-2	0
Item 101 – CalWORKs Services					
Cal-Learn Intensive Case Management	14,498	14,043	455	0	0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Five Percent MAP Increase – March 1, 2014*

DESCRIPTION:

This premise reflects the cost to the CalWORKs program as a result of a five percent increase to the MAP for all AUs effective March 1, 2014. The cost of the March 2014 five percent MAP increase is funded with the Child Poverty and Family Supplemental Support Subaccount of the LRF, which includes funds that are carried over from prior FYs. The Child Poverty and Family Supplemental Support Subaccount of the LRF is monitored by the DOF to calculate all increases to future CalWORKs MAP levels. For more information regarding the Child Poverty and Family Supplemental Support Subaccount of the LRF, see the CalWORKs Funding Subaccounts premise.

IMPLEMENTATION DATE:

This premise implemented on March 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11450.025.
- Based on the reported income for CalWORKs cases in FFY 2013 RADEP sample data, approximately 0.31 percent of the projected average monthly CalWORKs caseload will continue to remain eligible under a higher income eligibility threshold as a result of the MAP increase.
- The projected average monthly CalWORKs caseload is 505,504 in FY 2015-16 and 497,135 in FY 2016-17.
- There are 1,579 cases in FY 2015-16 and 1,553 cases in FY 2016-17 that will no longer be discontinued due to the MAP increase.
- Based on the CalWORKs CA 800 report from FY 2014-15, the average CalWORKs monthly grant is $462.23. The cost per case does not include the expenditures of the March 1, 2014 MAP increase to avoid budgeting the impact twice.
- Based on a grant calculation simulation using income from FFY 2013 RADEP sample data, this policy results in an increase to the average monthly grant of approximately $24.55 per case for all CalWORKs cases.
- For cases that will no longer be ineligible or discontinued, the $24.55 increase is added to the average monthly grant of $462.23. This results in an average monthly grant of $486.78 after the five percent MAP increase.
- The estimated cost of the five percent MAP increase in other premises is $627,299 in FY 2015-16 and $238,757 in FY 2016-17.
- Ongoing administrative and employment services costs are assumed to be reflected in the actual trend expenditures.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Five Percent MAP Increase – March 1, 2014*

METHODOLOGY:

Total CalWORKs grant costs are the sum of the cases no longer ineligible or discontinued multiplied by the monthly grant multiplied by 12 months, and the projected average monthly CalWORKs caseload multiplied by the average grant increase and then multiplied by 12 months. The value of the five percent MAP increase from other premises is added to the total grant costs.

FUNDING:

The funding for CalWORKs grant costs is 100 percent GF, which is offset by the Child Poverty and Family Supplemental Support Subaccount.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects a decrease in the projected caseload and a decreased average grant.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects a decline in the projected caseload.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 101 – CalWORKs Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Five Percent MAP Increase – March 1, 2014	$158,775	$0	$158,775	$0	$0

	FY 2016-17				
Item 101 – CalWORKs Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Five Percent MAP Increase – March 1, 2014	$155,768	$0	$155,768	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Five Percent MAP Increase – April 1, 2015*

DESCRIPTION:

This premise reflects the cost to the CalWORKs program as a result of increasing the MAP for all AUs by five percent effective April 1, 2015. The cost of the March 2014 and April 2015 five percent MAP increases is funded with the Child Poverty and Family Supplemental Support Subaccount of the LRF, including the amount in this subaccount that is carried over from prior FYs. The growth revenues deposited into the Child Poverty and Family Supplemental Support Subaccount of the LRF are monitored by the DOF to calculate the percent increase to the CalWORKs MAP. If sufficient funding is available through the Child Poverty and Family Supplemental Support Subaccount of the LRF, a subsequent MAP increase will be provided beginning October 1, 2015. For more information regarding the Child Poverty and Family Supplemental Support Subaccount of the LRF, see the CalWORKs Funding Subaccounts premise.

IMPLEMENTATION DATE:

This premise implemented on April 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11450.025.
- The projected average monthly CalWORKs caseload is 505,504 in FY 2015-16 and 497,135 in FY 2016-17.
- Based on the reported incomes for CalWORKs cases in FFY 2013 RADEP sample data, approximately 0.67 percent of the projected average monthly CalWORKs caseload will continue to remain eligible under a higher income eligibility threshold as a result of the MAP increase. There are 3,407 cases in FY 2015-16 and 3,351 cases in FY 2016-17 that will continue to remain eligible due to the MAP increase.
- The average CalWORKs monthly grant is $486.78. This cost per case includes the March 2014 five percent MAP increase.
- Based on a grant calculation simulation using incomes from FFY 2013 RADEP sample data, this policy will result in an increase to the average monthly grant of $24.00 for all CalWORKs cases.
- For cases that will continue to remain eligible, the $24.00 increase is added to the average monthly grant of $486.78. This results in an average monthly grant of $510.78 after the five percent MAP increase.
- Ongoing administrative costs are assumed for cases that will continue to remain eligible. The administrative cost per case is $29.68 in FY 2015-16 and $29.73 FY 2016-17 based on the weighted average of SAR and AR/CO cases and the respective administrative cost per case.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Five Percent MAP Increase – April 1, 2015*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Approximately 42.37 percent of cases that will continue to remain eligible (1,444 cases in FY 2015-16 and 1,420 cases in FY 2016-17) are assumed to receive CalWORKs employment services based on the FY 2014-15 actual caseload. The CalWORKs employment services cost per case is $382.37.
- The costs to employment services and administration due to the April 1, 2015 MAP Increase are reduced by 25 percent to account for them being partially reflected in trend.
- The estimated cost of the five percent MAP increase in other premises is $735,098 in FY 2015-16 and $289,331 in FY 2016-17.

METHODOLOGY:

- Total CalWORKs grant costs are the sum of the cases no longer ineligible or discontinued multiplied by the monthly grant multiplied by 12 months, and the projected average monthly CalWORKs caseload multiplied by the average grant increase and then multiplied by 12 months. The value of the five percent MAP increase from other premises is added to the total grant costs.
- For CalWORKs administration costs, the number of cases no longer discontinued is multiplied by the cost per case, and then multiplied by 12 months.
- For CalWORKs employment services costs, the number of cases no longer discontinued is multiplied by the percentage receiving employment services, multiplied by the cost per case and then multiplied by 12.

FUNDING:

The funding for CalWORKs grant costs is 100 percent GF, which is offset by the Child Poverty and Family Supplemental Support Subaccount. The funding for administration costs is 92.8 percent TANF and 7.2 percent GF. The funding for employment services is 97.7 percent TANF and 2.3 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in grants reflects a decreased caseload projection and a slightly lower average grant for cases staying on aid longer. The decrease to administration and employment services costs is due to a decreased caseload projection and reflects 25 percent of costs included in trend.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 decreases reflect the projected caseload decrease.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Five Percent MAP Increase – April 1, 2015*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
Five Percent MAP Increase – April 1, 2015	$167,203	$0	$167,203	$0	$0
Item 101 – CalWORKs Employment Services					
Five Percent MAP Increase – April 1, 2015	9,928	9,709	219	0	0
Item 101 – CalWORKs Administration					
Five Percent MAP Increase – April 1, 2015	910	845	65	0	0
Total	$178,041	$10,554	$167,487	$0	$0

FY 2016-17

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb
Five Percent MAP Increase – April 1, 2015	$164,002	$0	$164,002	$0	$0
Item 101 – CalWORKs Employment Services					
Five Percent MAP Increase – April 1, 2015	4,886	4,778	108	0	0
Item 101 – CalWORKs Administration					
Five Percent MAP Increase – April 1, 2015	897	832	65	0	0
Total	$169,785	$5,610	$164,175	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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Minimum Wage Increase*

DESCRIPTION:

This premise reflects savings to the CalWORKs program as a result of increasing the minimum wage. The increased wages will result in decreased CalWORKs grants for cases with earnings, as well as administrative and employment service savings for cases that are discontinued from the CalWORKs program due to exceeding the income eligibility threshold. The minimum wage increased from $8.00 per hour to $9.00 per hour on July 1, 2014. A second increase (to $10.00 per hour) went into effect on January 1, 2016. Cost impacts to IHSS programs are included in the IHSS Basic Services premise.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Labor Code section 1182.12.

CalWORKs

- The impact of the July 1, 2014 increase to $9.00 per hour is fully reflected in the basic CalWORKs caseload trend.
- The cases impacted by the January 1, 2016, increase to $10.00 per hour will experience a reduction in their monthly grant amount at the reporting period following the minimum wage increase on or after February 1, 2016. Cases working enough hours to exceed the CalWORKs income threshold will no longer be eligible for the CalWORKs program. These cases are impacted immediately due to the income reporting threshold under SAR and AR/CO.
- The projected average monthly CalWORKs caseload is 503,856 in the second half of FY 2015-16, after the increase to $10.00 per hour. The projected average monthly CalWORKs caseload is 497,135 in FY 2016-17.
- Based on FFY 2013 RADEP sample data, 20.74 percent of CalWORKs cases include a working adult.
- Of the cases that include a working adult, 16.60 percent have earnings of $9.99 or less. These cases are assumed to be directly affected by the minimum wage increase.
- Based on FFY 2013 RADEP sample data, approximately 2,033 cases are assumed to be working enough hours to exceed the CalWORKs income eligibility threshold due to the increased earnings when the minimum wage rises to $10.00 per hour and will no longer be eligible for the CalWORKs program.
- Cases affected by the minimum wage increase, but not discontinued, are assumed to be impacted at their next reporting period.
- Of the cases that include a working adult, the average hours worked per month were 92.3 hours, based on FFY 2013 RADEP sample data.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Minimum Wage Increase*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Based on FFY 2013 RADEP sample data, cases impacted by the wage increase to $10.00 per hour will experience an average increase in earnings of approximately $0.84 per hour. Since cases impacted by the minimum wage are already working, it is assumed that their grants have already been adjusted for the impact of the initial $225 EID.
- The average earnings increase results in a monthly grant reduction of approximately $0.42 per hour for the increase to $10.00 per hour due to the 50 percent disregard of remaining earned income.
- Grant savings due to the increased wages are assumed to be $77.89 per case after the minimum wage increase to $10.00 per hour, per month (approximately $0.84 grant reduction per hour multiplied by 92.3 work hours per month).
- Administration savings due to cases that exceed the income threshold and are no longer eligible for the CalWORKs program are assumed to be $26.85 per case, per month, which is the weighted average of administrative costs for impacted SAR cases and AR/CO cases.
- Employment services savings due to cases that exceed the income threshold, and are no longer eligible for the CalWORKs program, are assumed to be $382.37 per case per month.

CalFresh

- For the impact of the minimum wage increase on CFAP benefits, CalFresh benefit savings were calculated and, consistent with other premises, a one percent multiplier is used to estimate the impact on CFAP.
- Based on 2013 RADEP sample data, 21.70 percent of cases have a working adult. Of that working population, 66.71 percent will be affected by the increase to $10.00 per hour.
- Based on 2013 RADEP sample data, 80.24 percent of the CalFresh cases with a working adult are non-assistance cases and 19.76 are public assistance cases.
- Using benefit calculations for a household of two and 2013 RADEP sample data on CalFresh wages, it is estimated that due to the increase to $10.00 an hour, the average monthly benefit savings will be $68.00 for non-assistance households and $38.00 for public assistance households.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Minimum Wage Increase*

METHODOLOGY:

- Grant savings for cases impacted by the minimum wage increase but not discontinued are determined by multiplying the caseload by the average grant savings and the number of months impacted.
- Grant savings for cases that exceed the CalWORKs income eligibility threshold and are discontinued are determined by multiplying the discontinued cases by the average grant savings and months impacted.
- Administrative savings for cases that exceed the CalWORKs income eligibility threshold and are discontinued are determined by multiplying the discontinued cases by the average administrative savings and months impacted.
- Employment services savings for cases that exceed the CalWORKs income eligibility threshold and are discontinued are determined by multiplying the discontinued cases by the average employment services savings and months impacted. The FY 2015-16 funding is adjusted to maintain the overall funding levels that have already been allocated to CWDs.
- Savings to CFAP benefits are calculated using the total of the benefit savings for non-assistance cases and for public assistance cases for each wage increase. No administration cost was calculated because there was not a significant impact on CalFresh or CFAP enrollment.

FUNDING:

The funding for CalWORKs grants is 88.6 percent TANF, 8.9 percent GF and 2.5 percent county funds. The funding for CalWORKs administration is 92.8 percent TANF and 7.2 percent GF. The funding for CalWORKs employment services is 97.7 percent TANF and 2.3 percent GF. The funding for CFAP is 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in savings for CalWORKs grants, employment services and administration reflects that the increase in minimum wage to $9.00 per hour is now fully reflected in trend. The increase in savings to CFAP benefits reflects a technical adjustment to remove a fifty percent discount on savings which was intended to reflect a partial implementation of the increase in minimum wage to $9.00 per hour.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase to CalWORKs grants, employment services, and administration and to CFAP benefit savings reflects a full 12 months of savings in FY 2016-17 due to the January 1, 2016 increase in minimum wage, compared to six months in FY 2015-16.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Minimum Wage Increase*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
Minimum Wage Increase	-$3,149	-$2,789	-$281	-$79	$0
Item 101 – CalWORKs Employment Services					
Minimum Wage Increase	-3,887	-3,799	-88	0	0
Item 101 – CalWORKs Administration					
Minimum Wage Increase	-273	-253	-20	0	0
Item 101 – CFAP Assistance					
CFAP Benefits	-968	0	-968	0	0
Total	-$8,277	-$6,841	-$1,357	-$79	$0

FY 2016-17

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
Minimum Wage Increase	-$9,898	-$8,767	-$882	-$249	$0
Item 101 – CalWORKs Employment Services					
Minimum Wage Increase	-9,328	-9,118	-210	0	0
Item 101 – CalWORKs Administration					
Minimum Wage Increase	-655	-608	-47	0	0
Item 101 – CFAP Assistance					
CFAP Benefits	-3,401	0	-3,401	0	0
Total	-$23,282	-$18,493	-$4,540	-$249	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

WTW 24-Month Clock*

DESCRIPTION:

This premise reflects the impact to CalWORKs grants for aided adult recipients who exceed 24 months of flexible WTW services and do not meet the CalWORKs participation requirements. The WTW 24-Month Clock provides 24 months of flexibility in meeting the CalWORKs federal requirements. This flexibility allows CalWORKs clients to receive a wider array of services and supports to enter and remain in the workforce, including education and barrier-removal services. After utilizing 24 months on this clock, recipients are required to focus on the employment-related activities that satisfy participation requirements consistent with CalWORKs federal standards.

Under the CalWORKs federal standards, aided adults, unless exempt, are required to engage in work activities. To comply with participation requirements, aided adults must participate in WTW activities for a specific number of hours per week, based on AU demographics, of which a minimum of 20 hours must be spent in core activities. Individuals who do not comply with WTW program requirements are subject to a financial reduction equal to the adult's portion of the grant amount.

IMPLEMENTATION DATE:

The WTW 24-Month Clock implemented on January 1, 2013. Due to the timing of the release of implementation guidance and the duration of the noticing and noncompliance process, this premise first impacted CalWORKs Grants funding beginning July 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 11322.85 through 11322.87.
- Based on July 2015 data from WDTIP, a monthly average of 2,204 and 22,885 cases have months used on their WTW 24-Month Clock and may reach the limit on their WTW 24-Month Clock in FY 2015-16 and FY 2016-17, respectively. These cases are anticipated to exhaust the flexible 24-months unless they have a clock stopper, have months removed from their WTW 24-Month Clock, begin meeting CalWORKs federal standards or receive an extension.
- Based on July 2015 data from WDTIP, approximately 9.9 percent of cases with months used on their WTW 24-Month Clock are meeting the federal work participation requirements; therefore, their WTW 24-Month Clock is stopped.
- Based on July 2015 data from WDTIP, approximately 12.3 percent of cases with months used on their WTW 24-Month Clock have an exemption; therefore, their WTW 24-Month Clock is stopped.
- Therefore, a monthly average of 488 and 5,063 cases have a clock stopper (since they are meeting federal work participation requirements or have an exemption) in FY 2015-16 and FY 2016-17, respectively. These cases are removed from the impact of this premise since they are not expected to utilize their entire WTW 24-Month Clock.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

WTW 24-Month Clock*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Based on FFY 2014 RADEP sample data and April 2013 through March 2015 MEDS, EDD and WDTIP data, approximately four percent of cases with months used on their WTW 24-Month Clock without a clock stopper are expected to receive good cause for lack of engagement and have months removed from their WTW 24-Month Clock. It is anticipated that these recipients will have an average of six months removed from the time on their WTW 24-Month Clock. In FY 2015-16 and FY 2016-17, approximately 68 and 711 cases, respectively, will have time removed from their WTW 24-Month Clock for good cause. These cases are expected to continue to use their WTW 24-Month Clock in the same manner as other cases after receiving the additional time on their clocks.
- Based on FFY 2014 WPR data from RADEP, approximately 29.8 percent of cases that utilize their entire WTW 24-Month Clock in the applicable year are expected to meet CalWORKs federal participation standards once they utilize all 24-months; there will be a monthly average of approximately 494 and 5,179 cases in FY 2015-16 and FY 2016-17, respectively.
- The CWDs are permitted to extend the WTW 24-Month Clock for approximately 20 percent of the AUs in which all adult members have reached the end of their 24-month period and have time remaining on their CalWORKs 48-month time limit on aid. A monthly average of approximately 429 and 4,489 cases are projected to receive an extension in FY 2015-16 and FY 2016-17, respectively. This FY monthly average is distinct from the biannual CDSS ACL on WTW 24-Month Clock extensions which represents the total number of extensions counties may grant in a specific six month period.
- Cases that utilize their entire WTW 24-Month Clock and do not receive an extension or begin meeting CalWORKs federal standards will enter the noncompliance process. In FY 2015-16 and FY 2016-17, 734 and 7,712 average monthly cases, respectively, will enter the noncompliance process.
- It is assumed that 15 percent of cases will begin meeting CalWORKs federal standards or receive an exemption during the noncompliance process; there will be a monthly average of 110 and 1,157 cases in FY 2015-16 and FY 2016-17, respectively.
- Of the cases that receive a grant reduction, it is assumed that within four months 10 percent will change their participation to begin meeting the CalWORKs federal standards and have their grant restored; a monthly average of approximately 26 and 337 cases in FY 2015-16 and FY 2016-17, respectively.
- In FY 2015-16 and FY 2016-17 the monthly average grant reduction caseload is 606 and 6,218 cases, respectively.
- The number of cases that will receive a grant reduction is converted to adults to determine the grant savings. Based on July 2015 data from WDTIP, there are approximately 1.3 adults per case that have months used on their WTW 24-Month Clock.
- The average monthly grant savings due to removing a member from an AU of three, absent the five percent MAP increases, is $122.00.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

WTW 24-Month Clock*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Including the five percent MAP increase effective March 1, 2014, the average monthly grant savings for removing a member from an AU of three is $128.00. The WTW 24-Month Clock grant savings from this MAP increase is $54,757 and $561,390 for FY 2015-16 and FY 2016-17, respectively.
- Including the five percent MAP increase effective April 1, 2015, the average monthly grant savings for removing a member from an AU of three is $135.00. The WTW 24-Month Clock grant savings from this MAP increase is $63,883 and $654,955 for FY 2015-16 and FY 2016-17, respectively.
- The WTW 24-Month Clock grant savings associated with the MAP increases are reflected in the Five Percent MAP Increase premises.
- The WTW 24-Month Clock grant reductions are not anticipated to result in employment services or child care savings as these services would continue to remain available if the recipient needs them.

METHODOLOGY:

- The grant reduction caseload is the cases that may reach the end of their 24-month period in the applicable FY, less the following: cases with a clock stopper; cases that receive good cause for lack of engagement; cases that receive an extension; cases that begin meeting CalWORKs federal standards once they utilize all 24-months; cases that begin to meet participation requirements or receive an exemption during the non-compliance process; and cases that will meet participation requirements four months after having the adult portion of the grant removed.
- The grant reduction caseload is multiplied by the adult per case ratio to determine the number of adults that will receive a grant reduction.
- The grant reduction savings is the average number of adults with a grant reduction multiplied by the grant savings from removing one member from an AU of three by 12 months.

FUNDING:

The funding for this premise is consistent with the funding ratios for the CalWORKs Grants premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The slight increase in grant savings reflects additional cases anticipated to receive a grant reduction in FY 2015-16 due to a lower proportion of cases with a clock stopper during their 24-month period. This is partially offset by fewer cases with the applicable number of months used on their WTW 24-Month Clock, based on actual WDTIP data and the change in methodology which now incorporates the impact of cases meeting CalWORKs federal standards after exhausting their WTW 24-Month Clock.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

WTW 24-Month Clock*

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects additional cases projected to utilize their WTW 24-Month Clock in FY 2016-17.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
WTW 24-Month Clock	-$1,113	-$986	-$99	-$28	$0

FY 2016-17

Item 101 – CalWORKs Assistance	Total	Federal	State	County	Reimb.
WTW 24-Month Clock	-$11,415	-$10,110	-$1,018	-$287	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Federal Immigration Reform Impact*

DESCRIPTION:

This premise reflects increased costs to the CalWORKs, CalFresh, SSI/SSP and IHSS programs as the result of the President's Immigration Accountability Executive Action on November 20, 2014, which expanded DACA and created DAPA. New deferred action is an administrative relief from deportation which authorizes a non-legal immigrant to remain in the United States temporarily without fear of deportation, in an effort to reduce illegal immigration at the border and prioritize deportation of felons. The Immigration Executive Action extends the removal action period and employment authorization from two years to three years for DACA eligible, and allows DAPA eligible to request deferred action and employment authorization for the same period of three years. The federal deferred action application process may take six months or longer and requires certain undocumented immigrants to pass a criminal background check and pay taxes.

To be eligible for the expanded DACA program, an individual must meet the following requirements: entered the United States before age sixteen; has lived in the United States continuously since January 1, 2010; must be in school or have graduated or completed high school or a general education development certificate on the date of the deferred action application; and has not been convicted of certain criminal offenses. To be eligible for DAPA, a parent must meet the following requirements: has lived in the United States continuously since January 1, 2010; was physically present in the United States on November 20, 2014, and had a son or daughter who is a United States citizen or a lawful permanent resident; and is not an enforcement priority for removal.

IMPLEMENTATION DATE:

The impact of federal immigration on CDSS programs is anticipated in FY 2017-18.

KEY DATA/ASSUMPTIONS:

- On February 16th, 2015, a federal court put a temporary injunction on president Obama's executive order on immigration. The impact of this premise on CDSS programs is pending federal court outcomes.
- While funding was included in the 2015-16 Appropriation, the federal immigration reform is not anticipated to have any impact on CDSS programs in FY 2015-16 and FY 2016-17. Therefore, no funding is included for CalWORKs, CalFresh, SSI/SSP and IHSS programs in FY 2015-16 or FY 2016-17.

FUNDING:

The funding will be provided based on the standard sharing ratios of impacted programs.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in CDSS programs reflects deferring the federal immigration impact from FY 2015-16 to out years due to a federal court suspension.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Federal Immigration Reform Impact*

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

FY 2015-16

Federal Immigration Reform Impact	Total	Federal	State	County	Reimb.
Item 101 – CalWORKs Assistance	$0	$0	$0	$0	$0
Item 101 – CalWORKs Administration	0	0	0	0	0
Item 111 – SSI/SSP	0	0	0	0	0
Item 111 – IHSS Services	0	0	0	0	0
Item 111 – IHSS Administration	0	0	0	0	0
Item 141 – CalFresh Administration	0	0	0	0	0
Total	$0	$0	$0	$0	$0

FY 2016-17

Federal Immigration Reform Impact	Total	Federal	State	County	Reimb.
Item 101 – CalWORKs Assistance	$0	$0	$0	$0	$0
Item 101 – CalWORKs Administration	0	0	0	0	0
Item 111 – SSI/SSP	0	0	0	0	0
Item 111 – IHSS Services	0	0	0	0	0
Item 111 – IHSS Administration	0	0	0	0	0
Item 141 – CalFresh Administration	0	0	0	0	0
Total	$0	$0	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Employment Services*

DESCRIPTION:

This premise reflects the cost of providing services to individuals in the CalWORKs WTW program. Employment services provided to WTW participants include a wide variety of work, educational and training activities designed to assist individuals in obtaining and retaining employment. The CalWORKs Employment Services premise includes funding previously identified for CalWORKs Basic Services, Safety Net and RNE cases. This premise is also consolidated to include updated assumptions for the County Performance Incentives premise.

IMPLEMENTATION DATE:

This premise implemented on January 1, 1998.

KEY DATA/ASSUMPTIONS:

CalWORKs Employment Services

- Authorizing statute: W&IC section 15204.3(a).
- The FY 2015-16 funding is maintained at $1,080,018 total funds.
- The Employment Services caseload is comprised of all adults required to participate in WTW as well as those with a WTW exemption who are voluntarily participating.
- Based on actual caseload trend data of the Unduplicated, Noncompliance, Good Cause and WTW Sanction counts from the CalWORKs WTW Monthly Activity Reports (WTW 25 and WTW 25A) for the past 17 months, the CalWORKs Employment Services caseload is projected to be 221,068 in FY 2016-17.
- The CalWORKs Employment Services monthly cost per case is approximately $382.37 based on a three-year average of the funding and caseload from FY 2006-07 through FY 2008-09. Detailed information on how the methodology for CalWORKs Employment Services was developed can be referenced in the 2013-14 Governor's Budget, Estimate Methodologies section.
- Hardship cases are estimated to be 0.40 percent of the total projected CalWORKs Employment Services expenditures (less contract costs) based on county expenditure claims for FY 2014-15. This amount is shifted from TANF to GF/MOE, as these cases are not federally eligible.
- Based on county expenditure claims for FY 2014-15, RNE cases are estimated to be 1.47 percent of the total Employment Services expenditures (less contract costs). This amount is shifted from TANF to GF/MOE.
- Based on caseload information from the CA 800 expenditure reports, the state-only RNE recipients who are ineligible for TANF benefits make up approximately 53.09 percent of the RNE population and the remaining 46.91 percent are federally eligible recipients in mixed households.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Employment Services*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The Long-Term Sanction services funding is projected to be $66,761,259 in FY 2016-17. The TANF portion of the total cost is $65,780,825, and is shifted from TANF to GF. See the CalWORKs Non-MOE premise for additional details.
- Based on actual Safety Net services expenditure and caseload data for FY 2014-15, the services funding for Safety Net cases is projected to be $3,831,958 for FY 2016-17. The funding reflects approximately 2,760 Safety Net cases in FY 2016-17, based on the CalWORKs WTW Monthly Activity Reports (WTW 25 and WTW 25A) for the past 17 months.
- The employment services cost of providing early eligibility to pregnant women as the result of AB 1579 (Chapeter 632, Statutes of 2014) is $2,396,000 in FY 2016-17.
- Contract costs are projected to be $3,888,308 for FY 2016-17.

County Performance Incentives

- Authorizing Statute: W&IC sections 10544.1 and 10544.2.
- Incentive funds shall be available for encumbrance and expenditure by counties until all funds are expended.
- Based on FY 2014-15 expenditure information reported by counties, the unexpended performance incentive balance in FY 2015-16 is $4,766,698.
- All available funds are displayed in FY 2015-16 since counties may spend the performance incentive balance in the current FY.

METHODOLOGY:

The CalWORKs Employment Services base funding is determined by multiplying the projected caseload by the monthly cost per case by 12 months. The total CalWORKs Employment Services funding is determined by adding the contract costs and the cost to provide employment services to pregnant women.

For County Performance Incentives, any funds from the remaining balance that are unspent in the prior FY are reappropriated to the current FY. The full amount of available performance funds are shown in FY 2015-16 since counties may claim all of these fund in the current FY.

FUNDING:

The services costs for RNE, Safety Net, Long-Term Sanction and Hardship cases are 100 percent GF. The Safety Net and Long-Term Sanction costs are shifted from MOE GF to non-MOE GF in the CalWORKs Non-MOE premise. All other costs are 100 percent TANF.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Employment Services*

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change in Employment Services.

The increase in County Performance Incentives reflects the remaining balance of these funds. The Appropriation included all remaining incentive funds in the FY 2014-15 budget. However, counties did not expend the balance; therefore, the remaining funds are now displayed in FY 2015-16.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease in Employment Services reflects a projected Employment Services caseload decline in FY 2016-17.

The decrease in County Performance Incentives reflects the assumption that all remaining incentive funds will be expended in the current FY.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Services	Total	Federal	State	County	Reimb.
CalWORKs Employment Services	$1,080,018	$990,432	$89,586	$0	$0
County Performance Incentives – Reappropriation**	4,767	4,767	0	0	0

FY 2016-17

Item 101 – CalWORKs Services	Total	Federal	State	County	Reimb.
CalWORKs Employment Services	$1,020,633	$932,019	$88,614	$0	$0
County Performance Incentives – Reappropriation**	0	0	0	0	0

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**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Mental Health and Substance Abuse Services*

DESCRIPTION:

This premise reflects the cost to provide mental health and substance abuse services to CalWORKs WTW participants in need of these services to obtain or retain employment. The CWDs must provide a plan for the treatment of mental health difficulties and substance abuse that may limit or impair a participant's ability to make the transition from WTW or retain long-term employment. The CWDs and county alcohol and drug departments are required to collaborate to ensure an effective system is available to provide evaluations and substance abuse treatment.

IMPLEMENTATION DATE:

This premise implemented on January 1, 1998.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 11322.6, 11325.7 and 11325.8.
- ABX4 4 (Chapter 4, Fourth Extraordinary Session, Statutes of 2009) provided county flexibility to redirect funding allotted for mental health and substance abuse services to and from CalWORKs Employment Services funding.
- The flexibility to redirect mental health and substance abuse funding to and from CalWORKs Employment Services ended on June 30, 2014.
- A trend of actual expenditures after the implementation of early engagement strategies is not yet available; therefore, the projected FY 2015-16 and FY 2016-17 mental health and substance abuse expenditures are based on the historical budget funding amounts of $76.3 million and $50.3 million, respectively.

METHODOLOGY:

The projected mental health expenditures and substance abuse services expenditures are summed to obtain the total funding.

FUNDING:

The funding for this premise is 100 percent GF/MOE.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Mental Health and Substance Abuse Services*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Services	Total	Federal	State	County	Reimb.
Mental Health & Substance Abuse Services	$126,606	$0	$126,606	$0	$0

FY 2016-17

Item 101 – CalWORKs Services	Total	Federal	State	County	Reimb.
Mental Health & Substance Abuse Services	$126,606	$0	$126,606	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Mental Health and Substance Abuse – Indian Health Clinics*

DESCRIPTION:

This premise reflects the cost to provide mental health and/or substance abuse services to Native Americans by providing a clinician in each Indian health clinic. Services provided are necessary to obtain or retain employment or to participate in county or TANF WTW activities.

The services may include: (a) outreach and identification of individuals who are receiving, or may be eligible for CalWORKs program assistance; (b) screening of individuals for mental health and/or substance abuse issues; (c) ensuring individuals have transportation to the CWD to apply for CalWORKs or to participate in WTW activities; (d) accompanying individuals to the evaluation for mental health and/or substance abuse services; (e) providing individual or group services, or making referrals to more intensive treatment services offered by CWDs; and (f) facilitating the integration of individuals into the CalWORKs WTW program.

IMPLEMENTATION DATE:

This premise implemented in FY 2001-02.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 10553.15 and 11322.6.
- The Legislature appropriated $1,943,000 for mental health and substance abuse services in 36 Indian health clinics.
- There are 35 clinics currently operating in FY 2015-16, but an additional clinic may enter the program at any time during the year.
- There are 36 clinics anticipated to operate in FY 2016-17.

METHODOLOGY:

The total cost is based on the amount appropriated for the 36 clinics.

FUNDING:

These costs are funded with 100 percent GF and are TANF/MOE eligible.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Mental Health and Substance Abuse – Indian Health Clinics*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 101 – CalWORKs Services	Total	Federal	State	County	Reimb.
Mental Health & Sub Abuse - Indian Health Clinics	$1,943	$0	$1,943	$0	$0

FY 2016-17

Item 101 – CalWORKs Services	Total	Federal	State	County	Reimb.
Mental Health & Sub Abuse - Indian Health Clinics	$1,943	$0	$1,943	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Family Stabilization*

DESCRIPTION:

This premise reflects the funding for family stabilization services to remove barriers to self-sufficiency and improve child well-being. As a component of the CalWORKs program, Family Stabilization provides intensive case management and services to clients who are experiencing an identified situation or crisis that is destabilizing the family and would interfere with adult clients' ability to participate in WTW activities and services.

IMPLEMENTATION DATE:

This premise implemented January 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11325.24.
- A trend of actual family stabilization expenditures after the implementation of OCAT is not yet available; therefore, the projected FY 2015-16 and FY 2016-17 family stabilization expenditures are maintained at $29.8 million total funds.

METHODOLOGY:

The projected family stabilization expenditures are maintained at the 2015-16 Appropriation funding levels.

FUNDING:

The federal and state share of costs mirror the CalWORKs Employment Services base funding ratios for TANF and GF/MOE.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Family Stabilization*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Services	Total	Federal	State	County	Reimb.
Family Stabilization	$29,840	$29,168	$672	$0	$0

FY 2016-17

Item 101 – CalWORKs Services	Total	Federal	State	County	Reimb.
Family Stabilization	$29,840	$29,168	$672	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Online CalWORKs Appraisal Tool (OCAT)*

DESCRIPTION:

This premise reflects the funding for the development and implementation of a statewide standardized appraisal tool, known as the OCAT. This appraisal tool will lead to more expedient and effective placement in WTW activities and referral to supportive services. This premise includes contracted vendor costs to customize and deploy the OCAT. For statewide implementation, the contractor's responsibilities include continued hosting, in-depth statewide training of county caseworkers and additional support of the appraisal tool. The funding for this premise also includes SAWS automation and case management costs.

IMPLEMENTATION DATE:

This premise implemented January 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11325.2.
- The FY 2015-16 funding for employment services is maintained at $13,656,000 total funds.
- Based on actual caseload trend data from the CalWORKs WTW Monthly Activity Reports (WTW 25 and WTW 25A), the projected CalWORKs Employment Services caseload is 221,068 in FY 2016-17.
- Based on FFY 2014 RADEP sample data and the WTW 25 and WTW 25A, it is assumed that 8.58 percent of the CalWORKs Employment Services caseload will be new work-eligible entrants.
- One additional hour of caseworker time is provided for each new work-eligible entrant to utilize the appraisal tool at the average caseworker cost of $57.57 per hour.
- To ensure funding is available as needed, employment services caseworker costs are included for all CWDs; however, the timing for utilization of a standardized appraisal tool may vary across the state.
- There are projected automation costs of $0.5 million and $3.5 million in FY 2015-16 and FY 2016-17, respectively, for integration of the tool into the SAWS Constortia systems.

METHODOLOGY:

- The monthly appraisal caseload is calculated by multiplying the projected CalWORKs Employment Services caseload by the percent that are new work-eligible entrants.
- The employment services cost is calculated by multiplying the monthly appraisal caseload by the additional cost for one hour of caseworker time and then by 12 months.

FUNDING:

The services costs utilize the CalWORKs Employment Services base funding ratios for TANF and GF/MOE. The automation costs are 100 percent TANF.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Online CalWORKs Appraisal Tool (OCAT)*

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change in services or automation costs.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease in services costs reflects a projected Employment Services caseload decline. The increase in automation cost reflects OCAT hosting and integration into SAWS beginning in FY 2016-17.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
OCAT	$13,656	$13,348	$308	0	0
Item 141 – Automation M&O and Updates					
OCAT M&O	500	500	0	0	0
Total	$14,156	$13,848	$308	$0	$0

FY 2016-17

Item 101 – CalWORKs Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
OCAT	$13,104	$12,810	$294	0	0
Item 141 – Automation M&O and Updates					
OCAT M&O	3,500	3,500	0	0	0
Total	$16,604	$16,310	$294	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Housing Support Program*

DESCRIPTION:

This premise reflects funding for the CalWORKs Housing Support Program. The intent of the Housing Support Program is to provide evidence-based interventions to CalWORKs families that are homeless or at risk of homelessness. Recognizing stable housing as a critical need for self-sufficiency and child well-being, this funding allows CWDs to assist homeless families to quickly obtain permanent housing and to provide wrap-around supports. Rapid re-housing and targeted homelessness prevention programs have been implemented nationwide as cost effective strategies to help families exit or avoid homelessness and retain permanent housing.

The duration of housing subsidies varies depending on the individual needs of the family. The core components of a successful Housing Support Program include comprehensive and coordinated entry with community partners along a continuum of care, housing identification, rent and moving assistance, focused case management and services based on individual participant needs. Services could include, but are not limited to, landlord outreach and engagement, housing search and placement, housing barrier assessment, legal services and credit repair.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 11330 through 11330.5.
- The Budget Act of 2015 appropriated $35 million for Homeless and Housing Support services for FY 2015-16.
- For FY 2016-17, $35 million is budgeted for Homeless and Housing Support services.
- Statute allows all CalWORKs families to be eligible for Housing Support Program services, regardless of their asset or income levels, when the county finds that the family is experiencing homelessness or housing instability that is a barrier to self-sufficiency or child well-being.
- Counties have the flexibility to design their own county specific Housing Support Program plan to serve the needs of their community, but are required to use evidenced-based models, including those established in the federal Department of Housing and Urban Development's Homeless Prevention and Rapid Re-Housing Program.
- It is anticipated that 44 counties will implement or expand an existing Housing Support Program in both FY 2015-16 and FY 2016-17.
- Individual county program plans may differ in terms of eligibility requirements, services offered and duration of a family's eligibility.
- Housing Support Program expenditures for non-federally eligible families (such as RNEs) are funded with GF and can be counted as MOE. Expenditures for non-MOE families (such as child-only populations in which all of the adults are federally ineligible) are funded with GF and cannot be counted as MOE.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Housing Support Program*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Based on the FY 2014-15 expenditures, it is anticipated that 74.3 percent of expenditures for FY 2015-16 and FY 2016-17 will be TANF/MOE and 25.7 percent will be non-MOE GF due to the broad population of CalWORKs families that are anticipated to utilize Housing Support services.

METHODOLOGY:

The funding is based on the 2015-16 Appropriation for both FY 2015-16 and FY 2016-17.

FUNDING:

The Housing Support Program costs for RNE cases and TANF Timed-Out cases are 100 percent MOE GF. The costs for Safety Net, Long-Term Sanction, Fleeing Felon, Zero Parent, TCVAP and CalWORKs non-minor dependents are 100 percent non-MOE GF. All other costs are 100 percent TANF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change in total funding. The increase in federal funds and decrease in GF reflects a decrease in the projected percentage of services that will be provided to non-federally eligible families.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Housing Support Program	$35,000	$22,702	$12,298	$0	$0
TANF Page – Non-TANF/MOE Eligible Expenditures					
Housing Support Program	-9,010	0	-9,010	0	0

FY 2016-17

Item 101 – CalWORKs Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Housing Support Program	$35,000	$22,702	$12,298	$0	$0
TANF Page – Non-TANF/MOE Eligible Expenditures					
Housing Support Program	-9,010	0	-9,010	0	0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Drug Felon Eligibility*

DESCRIPTION:

This premise reflects the costs of providing CalWORKs employment services and child care to adults previously ineligible for benefits due to their drug felony conviction. As a condition of eligibility to receive CalWORKs benefits, the recipient or applicant must comply with the terms of the supervised release, probation or parole as appropriate.

IMPLEMENTATION DATE:

This premise implemented on April 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11251.3.
- The caseload impacts to CalWORKs grants and CalFresh are assumed to be in trend and are not reflected in this premise.
- Automation associated with this with policy change was completed in FY 2014-15.
- Based on RADEP sample data from FFY 2012 and FFY 2013, the CalWORKs Cash Grant Caseload Movement Report (CA 237) and FY 2013-14 Fraud Investigation Activity Report (DPA 266) for approximately 3,890 drug felon child-only AUs are in the CalWORKs caseload when adjusted for recidivism.
- Approximately 79.80 percent of the newly eligible cases with a drug felon adult will receive employment services based on the total aided adult CalWORKs caseload compared to the employment services caseload.
- The employment services monthly cost per case is $382.37.
- Based on FFY 2013 RADEP sample data, the CalWORKs felon cases have an average of 1.30 children per AU.
- Approximately 22.96 percent of the employment services cases will utilize Stage One Child Care.
- The base child care monthly cost per child is $669.93.
- The impact of the RMR Increases effective January 1, 2015 and October 1, 2015 is reflected in the applicable premise write-up. Refer to the RMR Increase and RMR Increase-License Exempt premises for further information.

METHODOLOGY:

- The total CalWORKs drug felon caseload is multiplied by the percentage of cases that will receive employment services to determine the CalWORKs drug felon employment services caseload. This caseload is multiplied by the employment services cost per case and then by 12 months to determine the total employment services cost.
- The CalWORKs drug felon employment services caseload is multiplied by the child care utilization rate then by the average number of children per AU to determine the child care caseload. The child care caseload is multiplied by the Stage One Child Care cost per child and then by 12 months to determine the total Stage One Child Care cost.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Drug Felon Eligibility*

FUNDING:

The funding for CalWORKs employment services is 97.8 percent TANF and 2.2 percent GF. The funding for CalWORKs Stage One Child Care is 90.9 percent TANF and 9.1 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in Stage One Child Care reflects a decrease in the average child care cost per child. The increase in GF and decrease in federal funds reflect an increase in the projected percentage of child care provided to non-federally eligible families. There is no change in the CalWORKs program.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Program	**Total**	**Federal**	**State**	**County**	**Reimb.**
Drug Felon Eligibility	$14,220	$13,907	$313	$0	$0
Item 101 – Stage One Child Care					
Drug Felon Eligibility	7,378	6,707	671	0	0
Total	$21,598	$20,614	$984	$0	$0

FY 2016-17

Item 101 – CalWORKs Program	**Total**	**Federal**	**State**	**County**	**Reimb.**
Drug Felon Eligibility	$14,220	$13,907	$313	$0	$0
Item 101 – Stage One Child Care					
Drug Felon Eligibility	7,378	6,707	671	0	0
Total	$21,598	$20,614	$984	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

CalWORKs Administrative Costs*

DESCRIPTION:

This premise reflects administrative costs for the CalWORKs program. The basic costs include costs for general administration, coordination and overhead such as the salaries and benefits of the staff performing activities related to eligibility determination. The basic costs also include costs for preparing budgets, monitoring programs, fraud units, services related to accounting, litigation, payroll, personnel and costs for goods and services. Other related costs required for the administration of the program include supplies, equipment, utilities and rental and maintenance of office space.

Historically, the budget for county administration was based on counties' administrative budget requests made through a PCAB process, modified by a cost containment system, consistent with W&IC section 14154. Beginning with FY 2001-02, the PCAB process was suspended and the last PCAB process, FY 2000-01, established the base from which future costs are determined. Adjustments for caseload changes and other factors are made to the base during each Governor's Budget and May Revision process.

In addition to the basic CalWORKs Administrative Costs, this premise also includes administrative funding for Work Verification. A detailed description of this premise can be referenced in Estimate Methodologies section of the 2012 May Revision.

IMPLEMENTATION DATE:

The CalWORKs administration premise implemented on January 1, 1998. The Work Verification premise implemented on July 1, 2008.

KEY DATA/ASSUMPTIONS:

CalWORKs Administrative Costs

- Authorizing statute: W&IC section 14154.
- The CalWORKs caseload is projected to decrease by 5.61 percent in FY 2015-16 and 1.66 percent in FY 2016-17, resulting in a decrease of approximately $41.9 million in FY 2015-16 and $11.7 million total funds in FY 2016-17.
- The CalWORKs Administrative Costs base funding is projected to be approximately $747.7 million in FY 2015-16 and $708.8 million in FY 2016-17.
- The total EBT savings are approximately $10.6 million in both FY 2015-16 and FY 2016-17.
- For FY 2015-16 and FY 2016-17, staff development costs are projected to be $17.2 million, based on actual expenditures in FY 2014-15.
- The SAWS development and testing interface costs are approximately $129,000 in FY 2015-16 and FY 2016-17.
- Administrative costs related to the Merced Automated Global Information Control system are approximately $272,000 in FY 2015-16 and FY 2016-17.
- Time limit savings are approximately $51.8 million in FY 2015-16 and $49.5 million in FY 2016-17.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Administrative Costs*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The homeless assistance expenditures did not increase over the base year. Therefore, no adjustment to administration funding is provided in FY 2015-16 and FY 2016-17.
- Legacy Systems savings are approximately $12.1 million in FY 2015-16 and FY 2016-17.
- Contract costs are approximately $4.1 million in FY 2015-16 and FY 2016-17.
- *Be Vu v. Mitchell* base funding is $65,786 in FY 2015-16 and $65,298 in FY 2016-17.
- Based on caseload information from the CA 800 report, the state-only RNE recipients who are ineligible for TANF benefits make up 53.09 percent of RNE recipients and the remaining 46.91 percent are federally eligible recipients in mixed households.
- Funding for CalWORKs Non-MOE administrative costs is $51.8 million in FY 2015-16 and $49.5 million in FY 2016-17.
- Savings from restoring CalWORKs administrative funding to the actual FY 2005-06 spending level are $140.0 million for FY 2015-16 and FY 2016-17.
- Beginning April 2015, Los Angeles County will process their county's closed cases for the RADEP sample data. An additional $48,000 annually will be provided for this purpose in FY 2015-16 and FY 2016-17.
- The administrative cost of providing early eligibility to pregnant women as the result of AB 1579 (Chapter 632, Statutes of 2014) is $205,000 in FY 2015-16 and $224,000 in FY 2016-17.

Work Verification

- Authorizing statute: Federal Deficit Reduction Act of 2005.
- The FY 2015-16 funding is maintained at $14,155,000 total funds.
- Funding may be used by counties to hire additional staff, retrain existing staff and/or pay for additional workload to document and verify work participation required by federal law. Clearly documenting and verifying an individual's participation will enhance California's ability to meet the federal WPR and avoid penalties associated with inadequate documentation and verification of the data used in calculating the rates.
- The average monthly CalWORKs caseload is 497,135 in FY 2016-17.
- Per FFY 2013 RADEP sample data, 20.2 percent of the total cases are participating at some level.
- Of the cases that participate at some level, 35.4 percent participate either partially or fully through work activities and 64.6 percent fully participate through non-work activities.
- Based on information from CWDA, of the cases that participated in work activities in FY 2009-10, 80 percent had pay stubs that fulfill work verification requirements (documented hours for which the individual was paid). Twenty percent of cases required additional documentation by the county.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Administrative Costs*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Of the cases that participate through non-work activities, 100 percent will require additional documentation by the county.
- Of the cases that participate through work activities, 20 percent will require work verification for ten minutes per case.
- Of the cases that participate in non-work activities, 100 percent will require work verification for 15 minutes per case.
- The average eligibility worker cost is $57.57 per hour.
- Ten minutes of administrative time per month at a cost of $9.60 per case is needed to verify participation for cases that participate through work.
- Fifteen minutes of administrative time per month at a cost of $14.39 per case is needed for cases that participate through non-work activities.

METHODOLOGY:

The administrative costs for non-MOE cases and the $140 million restoration in CalWORKs administrative funding are added to the base funding. The total CalWORKs administrative costs are calculated by summing the base funding, the administrative costs for non-MOE cases and the $140 million restoration.

The work verification costs are calculated by multiplying the cases that require work verification by the eligibility worker cost for the specific number of minutes.

FUNDING:

Costs for non-MOE and RNE families are 100 percent GF. Contract costs are 100 percent TANF. All other costs are 92.5 percent TANF and 7.5 percent state MOE. Due to a federal audit exception, TANF hardship cases are funded with MOE instead of TANF funds effective September 1, 2009.

Costs for work verification activities are 100 percent TANF funded.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in CalWORKs administration reflects a decreased caseload projection.

There is no change in work verification costs.

REASON FOR YEAR-TO-YEAR CHANGE:

The decreases in CalWORKs administrative costs and work verification reflect a projected caseload decline.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Administrative Costs*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Administration	Total	Federal	State	County	Reimb.
CalWORKs Admin	$845,626	$748,387	$97,239	$0	$0
Work Verification	14,155	14,155	0	0	0

FY 2016-17

Item 101 – CalWORKs Administration	Total	Federal	State	County	Reimb.
CalWORKs Admin	$833,539	$739,286	$94,253	$0	$0
Work Verification	12,036	12,036	0	0	0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Fraud Recovery Incentives*

DESCRIPTION:

This premise reflects the incentive payments made annually to counties for the detection of fraud. Beginning in 2002, each county receives 12.5 percent of the actual amount of aid repaid or recovered by a county resulting from the detection of fraud. These savings/recoveries have been defined as the amounts collected on client-caused (non-administrative error) overpayments. County incentives paid with TANF monies must be used for purposes prescribed under the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PL 104-193).

IMPLEMENTATION DATE:

This premise implemented on January 1, 1998.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11486(j).
- The FY 2015-16 funding is maintained at $4.7 million total funds.
- The total estimated CalWORKs overpayment collections for FY 2016-17 are $58.5 million based on a trend of the most recent three years of collections.
- Based on the FNS 209 Status of Claims Against Households Report for FY 2014-15, client-caused overpayments represent a weighted average of 63.6 percent of all collections.
- Based on the amount of overpayment collections, incentive payments are made annually to the counties in arrears.
- Counties receive 12.5 percent of the overpayment collections due to client-caused overpayments.
- Overpayments are assumed to be funded 97.5 percent TANF/MOE and 2.5 percent county.

METHODOLOGY:

The county incentive payment is the product of the total estimated overpayment collections multiplied by the TANF share of collections (97.5 percent), multiplied by the percentage of client-caused errors (63.6 percent) and multiplied by the county incentive (12.5 percent).

FUNDING:

The fraud recovery incentive funds are 100 percent TANF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Fraud Recovery Incentives*

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects a decrease in the Client Caused Error Rate, which is slightly offset by higher projected overpayment collections.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 101 – CalWORKs Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Fraud Recovery Incentives	$4,719	$4,719	$0	$0	$0

	FY 2016-17				
Item 101 – CalWORKs Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Fraud Recovery Incentives	$4,532	$4,532	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Shared Eligibility*

DESCRIPTION:

This premise reflects the shift of common eligibility costs that are shared across the CalWORKs, CalFresh and Medi-Cal programs, as well as the allocation of administrative costs associated with recipients of dual benefits (CalWORKs and CalFresh), to the CalFresh budget. This premise consolidates premises previously referred to as Medi-Cal Services Eligibility/Common Costs and the Public Assistance to Non-Assistance Fund Shift.

The Medi-Cal Services Eligibility program mandates CDSS to instruct counties to modify the eligibility determination process so that eligibility for Medi-Cal is determined prior to eligibility for the CalWORKs program. Some eligibility determination costs for clients in common are shared equally across the three benefiting programs (CalWORKs, CalFresh, and Medi-Cal). The common intake eligibility costs are claimed through the County Expense Claim to the CalWORKs budget and distributed to Medi-Cal and CalFresh accordingly. The Medi-Cal portion of costs is reflected as a savings in the CalWORKs budget and then budgeted as costs at DHCS. The CalFresh portion of common eligibility costs is also reflected as a savings in the CalWORKs budget and is then shifted to the CalFresh budget through the Public Assistance to Non-Assistance Fund Shift.

The dual benefits eligibility costs for CalFresh and CalWORKs are charged as CalWORKs administrative costs through the County Expense Claim process. The federal DHHS, Division of Cost Allocation directed CDSS to distribute costs for eligibility determination activities among the benefiting programs. A methodology based on the ratio of CalWORKs and Public Assistance CalFresh caseload and administrative expenditure data is used to determine the portion of the eligibility, case management and program integrity activity costs in CalWORKs that also benefit CalFresh. These eligibility costs are shown as savings in the CalWORKs budget and shifted as costs to CalFresh in the Public Assistance to Non-Assistance Fund Shift.

IMPLEMENTATION DATE:

The Medi-Cal Services Eligibility Common Costs implemented on July 1, 1998.
The Public Assistance to Non-Assistance Fund Shift implemented in March 1984.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 14154.

<u>Medi-Cal Services Eligibility Common Costs</u>

- The FY 2015-16 funding is maintained at $71.94 million total funds.
- The Medi-Cal common cost expenditures are anticipated to decline by approximately 9.34 percent in FY 2016-17.

<u>Public Assistance to Non-Assistance Fund Shift</u>

- The FY 2015-16 funding is maintained at $208.64 million total funds.
- The Public Assistance to Non-Assistance Fund Shift for dual benefits administrative expenditures are anticipated to increase by 2.65 percent in FY 2016-17.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Shared Eligibility*

METHODOLOGY:

Medi-Cal Services Eligibility Common Costs

- The Medi-Cal common cost expenditures are calculated by multiplying the percent change of the expenditures by the prior year expenditures.

Public Assistance to Non-Assistance Fund Shift

- The Public Assistance to Non-Assistance Fund Shift for administrative costs is calculated by multiplying the percent change of fund shifts by the prior year fund shift.

FUNDING:

The CalWORKs savings are 100 percent TANF. The non-assistance CalFresh costs are shared 50 percent SNAP, 35 percent GF and 15 percent county funds.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease in the Medi-Cal Services Eligibility Common Cost reflects updated actual expenditures. The increase in the Public Assistance to Non-Assistance Fund Shift reflects updated actual expenditure data for dual benefits eligibility costs.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
PA to NA Fund Shift	-$208,641	-$208,641	$0	$0	$0
Medi-Cal Svcs. Elig./Common Costs	-71,944	-71,944	0	0	0
Item 141 – CalFresh Administration					
PA to NA Fund Shift	208,641	104,322	73,024	31,295	0

FY 2016-17

Item 101 – CalWORKs Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
PA to NA Fund Shift	-$214,179	-$214,179	$0	$0	$0
Medi-Cal Svcs. Elig./Common Costs	-65,223	-65,223	0	0	0
Item 141 – CalFresh Administration					
PA to NA Fund Shift	214,179	107,089	74,963	32,127	0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Court Cases*

DESCRIPTION:

This premise reflects projected settlement costs and attorney fees associated with CalWORKs, IHSS, SSI/SSP, APS, FC, CalFresh, AAP, CWS, CCL and Special Programs.

IMPLEMENTATION DATE:

Attorney fees and settlement costs are anticipated to be paid in FY 2015-16 and FY 2016-17.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Control Section 5.25 of the 1998 Budget Act.
- Item 101 CalWORKs Administration – A total of $836,777 is budgeted in FY 2015-16 and $500,000 is budgeted in FY 2016-17.
- Item 111 IHSS, SSI/SSP, APS and Special Programs – A total of $1.2 million is budgeted in FY 2015-16. No costs are currently anticipated in FY 2016-17.
- Item 141 FC, AAP and CalFresh Administration – The FC and AAP programs portion of this estimate is included in 2011 Realignment. For CalFresh, no costs are anticipated in FY 2015-16 or FY 2016-17.
- Item 151 CWS and CCL Administration – The CWS program portion of this estimate is included in 2011 Realignment. For CCL, a total of $3.3 million is budgeted in FY 2015-16 and FY 2016-17.
- For more information on the FC, AAP and CWS programs portion, refer to the 2011 Realignment tab.

METHODOLOGY:

Cost estimates are based on actual and projected attorney fees, settlement costs and miscellaneous writs to be paid in FY 2015-16 and FY 2016-17.

FUNDING:

The CalWORKs administration funding is 100 percent TANF. The IHSS, CAPI, SSI/SSP, APS, CCL and Special Programs funding is 100 percent GF. The CalFresh funding is 50 percent SNAP and 50 percent GF. The funding for the FC, AAP and CWS programs portion are included in 2011 Realignment.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase in CalWORKs, IHSS and SSI/SSP court case costs reflect updated attorney fees and settlement projections. There is no change in CalFresh and CCL costs.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Court Cases*

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 decrease in CalWORKs, IHSS and SSI/SSP court case costs reflects lower attorney fees and settlement projections. There is no change in CalFresh and CCL costs.

EXPENDITURES:

(in 000s)

FY 2015-16

	Total	Federal	State	County	Reimb.
Item 101 – CalWORKs Administration					
Court Cases	$837	$837	$0	$0	$0
Item 111 – IHSS Administration					
Court Cases	1,203	0	1,203	0	0
Item 141 – CalFresh Administration					
Court Cases	0	0	0	0	0
Item 151 – CCL Administration					
Court Cases	3,300	0	3,300	0	0
Total	$5,340	$837	$4,503	$0	$0

FY 2016-17

	Total	Federal	State	County	Reimb.
Item 101 – CalWORKs Administration					
Court Cases	$500	$500	$0	$0	$0
Item 111 – IHSS Administration					
Court Cases	0	0	0	0	0
Item 141 – CalFresh Administration					
Court Cases	0	0	0	0	0
Item 151 – CCL Administration					
Court Cases	3,300	0	3,300	0	0
Total	$3,800	$500	$3,300	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

State/County Peer Review*

DESCRIPTION:

This premise reflects the costs for counties to participate in the state and county peer review process for the CalWORKs program. The WTW County Peer Review process was developed in collaboration with counties and CWDA through a County Peer Review Advisory Team. The primary purpose of the County Peer Review process is for counties and CDSS to perform on-site peer reviews of CWD WTW programs to identify and share best practices, promising practices, opportunities for improvement and strategies that could positively impact the WPR.

Under the County Peer Review process, CDSS staff and peer county staff from two CWDs visit other CWDs to review their CalWORKs policies, procedures and data to improve performance outcomes. Since the peer reviews are mandatory under current law, it is necessary to provide CWDs with appropriate funding to participate in these county peer review visits. This premise reflects the costs associated with reimbursement for county staff to fill in for the staff participating in the county review ("backfilling") as well as travel and per diem costs.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2007.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 10533.
- The FY 2015-16 funding is maintained at $151,000 total funds.
- There are 12 projected county peer reviews in FY 2016-17.
- Each county peer review requires one day of travel for preparation and training followed by a separate five day visit to complete the peer review.
- One manager and one staff person from each of the two visiting counties will travel to the host county to conduct the county peer review visit. Two staff persons from the host county will participate in the peer review.
- The travel and per diem costs for each person from the visiting counties is $1,628 for each peer review.
- This estimate includes the costs to backfill four county staff: one staff person from each of the two visiting counties and two staff persons from the host county. No backfill is assumed for managers.
- Based on a county survey completed during the development of the County Peer Review process, the average daily salary and benefits for a county frontline employment services caseworker for an eight hour day is $286.40.
- The travel and per diem cost for each county peer review is determined by multiplying the travel and per diem costs for each person by the number of managers and staff participating in the peer review from visiting counties.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

State/County Peer Review*

METHODOLOGY:

- The total backfill cost for each county peer review is determined by multiplying the average daily salary by the number of staff participating in the review and by the number of days required for each peer review.
- The full cost for each peer review is the travel and per diem cost plus the backfill cost.
- The total funding for peer reviews is the full cost for each peer review multiplied by the number of reviews to be completed in the FY.

FUNDING:

This premise is funded with 100 percent TANF funds.

CURRENT CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects updated travel costs.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 101 – CalWORKs Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
State/County Peer Review	$151	$151	$0	$0	$0

	FY 2016-17				
Item 101 – CalWORKs Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
State/County Peer Review	$161	$161	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Research and Evaluation*

DESCRIPTION:

This premise reflects the costs for the research and evaluation of the direct and indirect effects of the CalWORKs program. Studies are also conducted to ensure that county demonstration projects and other innovative county approaches to CalWORKs program implementation are rigorously evaluated. Findings of the studies are reported to the legislature. The evaluation of county-specific programs is to be developed in conjunction with the county and other appropriate agencies responsible for the local program. This premise includes research projects such as the Child Care Snapshot Study and the SB 1041 CalWORKs Evaluation.

IMPLEMENTATION DATE:

This premise implemented on July 1, 1997.

KEY DATA/ASSUMPTIONS:

Authorizing statute: W&IC sections 11520 through 11522.

METHODOLOGY:

The total funds in FY 2015-16 and FY 2016-17 are held to historical funding levels.

FUNDING:

In FY 2015-16, the costs are funded with TANF. In FY 2016-17 the costs are funded with both TANF and GF. The GF is used to fund the non-TANF/MOE eligible portion of the Child Care Snapshot Study.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change to total funds. The decrease in the GF and increase in the federal share reflects an update to the Child Care Snapshot Study funding schedule.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change to total funds. The increase in the GF share reflects the funds needed for the non-TANF/MOE eligible portion of the Child Care Snapshot Study.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Research and Evaluation*

EXPENDITURES:
(in 000s)

			FY 2015-16		
Item 101 – CalWORKs Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Research and Evaluation	$4,000	$4,000	$0	$0	$0

			FY 2016-17		
Item 101 – CalWORKs Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Research and Evaluation	$4,000	$3,616	$384	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs and CalFresh Reporting*

DESCRIPTION:

This premise reflects the administrative savings associated with QR/PB, SAR and AR/CO system for CalWORKs, CalFresh and CFAP. CDSS was required to replace the QR/PB system with SAR and AR/CO systems to the extent permitted by federal law, regulations, waiver and directives.

Under SAR,the eligibility and benefits of recipients are determined prospectively for a six-month period. The determination is based on information reported by recipients on the semiannual report form. In addition, all CalWORKs recipients are required to report mid-period any changes in household income or any changes in income that exceed the income reporting threshold. The reporting threshold is established at 55 percent of FPL based on an AU of three, plus the amount of income last used to determine the AU's benefits; the level that would render the AU ineligible or the amount that would render the recipient ineligible for federal SNAP benefits, whichever is less. CalFresh recipients must report mid-period if their income exceeds 130 percent of the FPL.

The SAR is required for all CalWORKs and CalFresh cases, except certain child-only CalWORKs AUs who are required to report annually and certain CalFresh households who are subject to change reporting. Effective June 1, 2016, for CalWIN counties and July 1, 2016, for LEADER and C-IV counties, CalFresh households subject to change reporting will be converted to SAR and the savings associated with these cases are displayed in the Eliminate Change Reporting premise. Per statute, the administrative savings that may be reflected in this premise pertaining to SAR are limited to the net GF costs of SAR. Additional savings in excess of these net GF costs may be reflected to the extent that they are based on actual savings related to the SAR change and are calculated based on data developed in consultation with CWDA.

For AR/CO, the annual eligibility and benefits of recipients are determined prospectively based on information reported by recipients on the annual redetermination form. In addition, all CalWORKs recipients are required to report mid-period any changes in household composition or any changes in income that exceed the same income reporting threshold as established for SAR.

This premise consolidates the QR/PB, SAR and AR/CO premises. Additional details regarding these three premise items are located in the 2014 May Revision binder.

IMPLEMENTATION DATE:

The QR/PB reporting requirement implementation dates varied by county and occurred between November 1, 2003, and June 30, 2004.

The AR/CO reporting requirements implemented in October 2012.

The SAR reporting requirements implemented in October 2013.

KEY DATA/ASSUMPTIONS:

- The total caseload is the sum of SAR and AR/CO caseloads.
- The estimated benefit costs and administrative savings of both AR/CO and SAR are based on statistical information comparing the QR/PB system to the AR/CO and SAR system.
- The cost for mailing a report form to a recipient is $0.78.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs and CalFresh Reporting*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The CalWORKs eligibility worker cost is $57.57 per hour.
- The CalFresh eligibility worker cost is $58.27 per hour.
- Based on the 2005 county time study data, the amount of time needed for CalWORKs continuing case activities under QR is 26 minutes ($24.95) per month per case and 13 minutes ($13.11) per month per case for non-assistance CalFresh and CFAP.
- Based on county time study data collected during October and November 2005, the funding needed to process mid-quarter activities (voluntary and mandatory mid-period reporting and county-initiated contact) is $8.63 per case for CalWORKs and $28.23 per case for non-assistance CalFresh and CFAP. Mid-period activity cost per case is assumed to remain the same under SAR.
- The CalWORKs, non-assistance CalFresh and CFAP cases will require an additional five minutes to perform income assessments at redetermination under SAR and AR/CO. The income assessments will now be combined with the annual redetermination.
- It is projected that some cases will stay on aid longer due to the change in reporting requirements (i.e., cases that become ineligible for not submitting a report will stay on aid additional months), partially offset by those cases reaching the CalWORKs income reporting threshold. The CalWORKs assistance and CFAP benefit impacts are reflected in trend and are not identified separately in this premise.

AR/CO

- Authorizing statute: W&IC sections 11265.45, 11265.46, 11265.47 and 11265.48.
- AR/CO Caseloads: The AR/CO costs are based on approximately 228,000 average monthly CalWORKs cases in FY 2015-16 and approximately 222,000 average monthly CalWORKs cases in FY 2016-17.
- The number of required CalWORKs reports was reduced from four quarterly reports and one annual redetermination to only one annual redetermination.
- Due to the reduced reporting required under AR/CO, the amount of time needed for CalWORKs continuing case activities is reduced to approximately 16 minutes per month at a cost of $15.35 per case.
- The AR/CO policy also requires cases to report changes in household composition. It is assumed that approximately 6,500 CalWORKs cases per month in FY 2015-16 and 6,300 CalWORKs cases per month in FY 2016-17 will report a change in household composition. These cases will be required to report mid-period for their CalWORKs benefits. Household composition changes will result in mid-period administrative costs.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs and CalFresh Reporting*

KEY DATA/ASSUMPTIONS (CONTINUED):

SAR

- Authorizing statute: W&IC sections 11265.1, 11265.2, 11265.3, 11450, 11450.12, 11450.13, 11451.5 and 18910.
- SAR Caseloads: The FY 2015-16 SAR costs are based on approximately 277,000 average monthly CalWORKs cases, approximately 1,886,900 average monthly non-assistance CalFresh cases and approximately 20,850 average monthly CFAP cases. The FY 2016-17 SAR costs are based on approximately 275,000 average monthly CalWORKs cases, approximately 1,989,400 average monthly non-assistance CalFresh cases and approximately 22,100 average monthly CFAP cases.
- The SAR for non-assistance CalFresh and CFAP cases require one additional report as compared to the AR/CO reporting requirements.
- Based on FFY 2014 RADEP sample data, non-assistance CalFresh and CFAP caseloads are reduced by 17.03 percent to remove cases that are change reporters (generally elderly or disabled households with no earned income or seasonal workers with infrequent changes in household income status).
- Under SAR, the number of required CalWORKs reports was reduced from four quarterly reports and one annual redetermination to one SAR report and one annual redetermination.
- Due to the reduced reporting under SAR, the time needed for CalWORKs continuing case activities is reduced to 19 minutes per month at a cost of $18.50 per case. The non-assistance CalFresh and CFAP continuing case activities are nine minutes per month at a cost of $9.73 per case.
- The CalWORKs, non-assistance CalFresh and CFAP household composition change reporting requirements remain the same as required under QR/PB; however, under SAR, counties are required to act on any voluntary report of a change in household composition resulting in decreased benefits for CalFresh and CFAP. It is assumed that the number of voluntary household composition change reports received under SAR will remain the same as those received under QR/PB, resulting in no fiscal impact due to SAR implementation.
- The total SAR impact on CalWORKs grants due to cases staying on aid longer is $13.2 million in FY 2015-16 and $13.1 million in FY 2016-17.
- The additional SAR 7 Eligibility Statuts Report cost for non-assistance CalFresh and CFAP cases with an associated CalWORKs child-only case is assumed to be $15.25 per year.

METHODOLOGY:

- The CalWORKs, non-assistance CalFresh and CFAP administrative savings associated with continuing case activities under SAR (and AR/CO for CalWORKs) are calculated by multiplying the per case continuing costs by the casemonths of those required to report on a semiannual basis and comparing the cost to QR costs.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

CalWORKs and CalFresh Reporting*

METHODOLOGY(CONTINUED):

- The CalWORKs, non-assistance CalFresh and CFAP administrative savings due to reduced mailing of report forms are calculated by multiplying the SAR (and AR/CO for CalWORKs) caseload by the number of quarterly reports in one FY compared to the same caseload multiplied by the number of semiannual/annual reports and multiplying the difference by the cost to mail one report.
- The administrative savings for reduced mailings are offset by the administrative costs for income assessment at redetermination and for cases staying on longer. The costs for income assessment at redetermination are calculated by multiplying the additional caseworker time by the impacted caseload.
- The increased non-assistance CalFresh and CFAP caseload cost is calculated by multiplying the cumulated monthly increase in cases by the ongoing administrative cost per case.
- The total administrative savings for SAR are limited to the amount necessary to offset GF costs in each respective program.
- The following tables provide a breakout of the administrative savings (in thousands) for FY 2015-16 and FY 2016-17:

FY 2015-16

	Total	QR	SAR	AR/CO
Item 101 – CalWORKs Administration	-$95,701	-$58,815	-$13,178	-$23,708
Item 141 – CalFresh Administration	-179,836	-179,836	0	0
Item 141 – CFAP Administration	-2,749	-2,119	-630	0
Total	-$278,286	-$240,770	-$13,808	-$23,708

FY 2016-17

	Total	QR	SAR	AR/CO
Item 101 – CalWORKs Administration	-$93,982	-$57,842	-$13,109	-$23,031
Item 141 – CalFresh Administration	-195,848	-195,848	0	0
Item 141 – CFAP Administration	-2,926	-2,246	-680	0
Total	-$292,756	-$255,936	-$13,789	-$23,031

FUNDING:

The funding for CalWORKs administration is 92.8 percent TANF and 7.2 percent GF.

The CalFresh administration funding is 50 percent SNAP, 35 percent GF and 15 percent county. The CFAP costs are 100 percent GF; MOE eligible shares of cost are 13.54 percent in FY 2015-16 and 12.28 percent in FY 2016-17.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

CalWORKs and CalFresh Reporting*

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in CalWORKs reporting savings reflects a decrease in the projected caseload.

The increases in non-assistance CalFresh administrative savings reflects a projected increase in the total average monthly caseload as well as a decrease in the number of change reporter cases.

The increase in CFAP administrative savings reflects a decrease in change reporters somewhat offset by a slightly lower caseload than originally projected.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease in CalWORKs reporting savings reflects a projected decline in the total average monthly caseload.

The increase in non-assistance CalFresh and CFAP administrative savings reflects an increase in the projected caseload.

EXPENDITURES:

(in 000s)

FY 2015-16

	Total	Federal	State	County	Reimb
Item 101 – CalWORKs Administration					
CalWORKs Reporting	-$95,701	-$88,795	-$6,906	$0	$0
Item 141 – CalFresh Administration					
CalFresh Reporting	-179,836	-92,498	-59,589	-27,749	0
Item 141 – CFAP Administration					
CFAP Reporting	-2,749	0	-2,749	0	0
Total	-$278,286	-$181,293	-$69,244	27,749	$0

FY 2016-17

	Total	Federal	State	County	Reimb
Item 101 – CalWORKs Administration					
CalWORKs Reporting	-$93,982	-$87,200	-$6,782	$0	$0
Item 141 – CalFresh Administration					
CalFresh Reporting	-195,848	-97,924	-68,547	-29,377	0
Item 141 – CFAP Administration					
CFAP Reporting	-2,926	0	-2,926	0	0
Total	-$292,756	-$185,124	-$78,255	-29,377	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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CalWORKs Child Care – Stage One Services and Administration*

DESCRIPTION:

This premise reflects the cost for Stage One Child Care for CalWORKs families with children under 13 years of age. Eligible recipients include those who are working or participating in work activities while on aid, eligible teen parents participating in the Cal-Learn program and former CalWORKs recipients who are unable to transfer to Stage Two Child Care due to funding or programmatic issues.

The CalWORKs Child Care program includes three stages: Stage One is administered by CDSS; Stage Two is administered by CDE and serves individuals determined to be in a more stable situation, either working or participating in work activities while on aid, as well as participants transitioning off aid; Stage Three is also administered by CDE and serves participants who have been off aid for two years or more.

This premise includes Stage One Child Care services and administration funding previously identified in the Safety Net, RNE and State-Only Cal-Learn premises.

IMPLEMENTATION DATE:

This premise implemented on January 1, 1998.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Education Code sections 8350, 8351, 8352, 8357 and W&IC section 11331.7.
- The FY 2015-16 funding is maintained at $349,111,000 total funds.
- The projected monthly caseload is 41,787 children in FY 2016-17 based on a trend projection using actual caseload data reported on the CW 115 and CW 115A Child Care Monthly Reports. This includes approximately 290 Safety Net children.
- The adjusted services cost per case in FY 2014-15 is $564.50.
- The Stage One Child Care administrative ratio is 18 percent of the services expenditures and is based on actual expenditures from FY 2014-15. The administrative expenditures represent 15 percent of the total expenditures from FY 2014-15.
- The state-only Cal-Learn Child Care costs are 0.05 percent of the total Stage One Child Care cost less the Safety Net Child Care cost, based on expenditures from FY 2014-15.
- The Child Care costs for RNE recipients are 0.84 percent of the Stage One Child Care cost less the Safety Net Child Care cost, based on expenditures from FY 2014-15. Based on information from the CA 800 expenditure report, the state-only RNE households (those with no federally eligible members) reflect 53.09 percent of the RNE costs.
- The TANF Timed-Out Child Care costs are 2.04 percent of the Stage One Child Care cost less Safety Net Child Care cost, based on expenditures from FY 2014-15.
- The Child Care costs for two-parent families are 6.19 percent of the Stage One Child Care cost less the Safety Net Child Care cost, based on expenditures from FY 2014-15.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Child Care – Stage One Services and Administration*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The final Stage One cost per case including services, administration and the RMR increases, which implemented on January 1, 2015 and October 1, 2015, is $758.40. The costs for the RMR increases are reflected in their respective premises.

METHODOLOGY:

- The projected monthly services cost per case is based on FY 2014-15 Stage One Child Care actual expenditures claimed on the County Expense Claim, adjusted to account for the portion of the January 1, 2015 RMR increase already reflected in the actual expenditure data. This is divided by the actual Stage One caseload as reported on the CW 115 and CW 115A Child Care Monthly Reports.
- The Stage One Child Care services costs are calculated by multiplying the projected caseload by the services cost per case by 12 months.
- The Stage One Child Care administrative costs are calculated by multiplying the services costs by the services to administrative ratio.
- The total Stage One Child Care costs equal the services costs plus the administrative costs.
- The state-only portion of Stage One Child Care costs is the sum of the Stage One Child Care costs attributed to state-only Cal-Learn, RNE recipients, TANF Timed-Out recipients and two-parent families plus the Safety Net Child Care costs.

FUNDING:

Child Care for two-parent families is not funded with TANF funds, as these families must work or participate a minimum of 55 hours per week in WTW activities to be eligible for federally funded Child Care. Stage One Child Care for two-parent families, RNE, Safety Net, TANF Timed-Out and state-only Cal-Learn is funded with 100 percent GF. The Safety Net costs are shifted from MOE GF to non-MOE GF in the CalWORKs Non-MOE premise. All other cases are funded with TANF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO- YEAR CHANGE:

The overall decrease is due to a lower projected caseload and a lower cost per case. The decrease in federal funds and increase in GF reflects an increase in the projected percentage of services that will be provided to non-federally eligible families.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Child Care – Stage One Services and Administration*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – Stage One Child Care	Total	Federal	State	County	Reimb.
Services	$292,539	$267,223	$25,316	$0	$0
Administration	56,572	51,676	4,896	0	0
Total	$349,111	$318,899	$30,212	$0	$0

FY 2016-17

Item 101 – Stage One Child Care	Total	Federal	State	County	Reimb.
Services	$283,066	$255,478	$27,588	$0	$0
Administration	51,298	46,299	4,999	0	0
Total	$334,364	$301,777	$32,587	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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Regional Market Rate Increase*

DESCRIPTION:

This premise reflects the cost to the CalWORKs Stage One Child Care program to update the RMR ceilings from the 85th percentile of the 2005 RMR survey. The RMR ceilings are the maximum amounts that child care providers can be reimbursed from the state for subsidized child care. On January 1, 2015, RMR ceilings were updated to the 85th percentile of the 2009 RMR survey, reduced by 10.11 percent. If the updated RMR ceiling for a particular rate category within a county is less than the reimbursement amount prior to the increase, the rate in effect prior to January 1, 2015 is used for that category. On October 1, 2015 the RMR ceilings increased by an additional 4.5 percent. Child Care providers of current and former CalWORKs participants receiving Stage One, Stage Two, Stage Three and Alternative Payment Program child care may be affected by both increases.

Prior to October 1, 2015, license-exempt providers were reimbursed up to 60 percent of the family child care home rate. Refer to the RMR Increase – License Exempt premise for the increased cost to raise the ceiling for license-exempt providers to 65 percent of the family child care home rate.

IMPLEMENTATION DATE:

The RMR increase to the 85th percentile of the 2009 RMR survey, reduced by 10.11 percent implemented on January 1, 2015. The additional 4.5 percent RMR increase implemented October 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Education Code sections 8357 and 8447.
- This premise includes costs to update the reimbursement rate ceiling to the 85th percentile of the 2009 RMR survey, reduced by 10.11 percent. If the rate is less than the 85th percentile of the 2005 RMR survey, then the reimbursement rate remains at the 85th percentile of the 2005 RMR survey and is not changed. This premise also includes the cost to increase the reimbursement rate ceilings by 4.5 percent.
- The FY 2015-16 funding for the RMR increase to the 85th percentile of the 2009 RMR survey, reduced by 10.11 percent is maintained at $27,504,000 total funds. The FY 2015-16 funding for the 4.5 percent RMR increase is maintained at $14,503,000.
- The final projected Stage One Child Care caseload is 42,995 in FY 2016-17.
- The proportion of each county's caseload is based on the FY 2014-15 Stage One Child Care caseload as reported on the CW 115 and 115A Child Care Monthly Reports.
- According to SAWS Consortia data from calendar year 2014, the Stage One Child Care population reflects the following characteristics:
    - Approximately 17 percent of children served are infants, 54 percent are age two to five and 29 percent are school age.
    - Approximately 49 percent of children receive license-exempt care, 24 percent receive care in a family child care home and 27 percent receive care in Child Care Centers.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Regional Market Rate Increase*

KEY DATA/ASSUMPTIONS (CONTINUED):

- o Approximately 61 percent of children receive full-time care and 39 percent of children receive part-time care.

- The monthly full-time, weekly part-time and hourly rates are used to estimate the overall cost.
- Full-time cases are reimbursed according to the monthly full-time rate by county.
- License-exempt part-time cases are reimbursed using the hourly rate by county.
- Licensed part-time cases are reimbursed using either the weekly part-time or hourly rate. The 1999 Child Care Characteristics Study data on the Stage Two Child Care population is used as a proxy for the Stage One Child Care caseload to determine the proportion of cases reimbursed as weekly part-time versus hourly and the number of weeks or hours of care used per month.
  - o Twenty-eight percent of these cases are reimbursed using the hourly rate and average 43 hours of care per month.
  - o Seventy-two percent of these cases are reimbursed using the weekly part-time rate and average approximately three weeks of care per month.
- The Stage One Child Care administrative ratio is 18 percent of the services expenditures and is based on actual expenditures from FY 2014-15. The administrative expenditures represent 15 percent of total expenditures in FY 2014-15.
- The RMR increase to the 85th percentile of the 2009 RMR survey, reduced by 10.11 percent results in a weighted monthly average cost per case increase of $48.25. The 4.5 percent RMR increase results in a weighted monthly average cost per case increase of $27.03.

METHODOLOGY:

- To determine the cost by county to update the RMR ceiling for the different survey variations, the previous RMR ceiling is compared to the new RMR ceiling. This is done by county for the applicable rate categories by age group for each child care setting.
- If any category reflects a lower reimbursement under the new RMR ceiling, the reimbursement rate is held to the previous RMR ceiling and is not reduced.
- Each county's share of the projected Stage One Child Care caseload is determined by multiplying their proportion of the FY 2014-15 Stage One Child Care actual caseload by the final projected Stage One Child Care caseload for FY 2016-17.
- The Stage One Child Care caseload characteristics are applied to each county's share of the projected caseload to determine the projected caseload that falls into the various survey categories.
- The cost for each survey category is multiplied by its respective caseload to determine the costs for each care setting. This is done for each survey variation by county. For the weekly part-time rate and the hourly rate, the cost is multiplied by the hours or weeks of care used in a month.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Regional Market Rate Increase*

METHODOLOGY (CONTINUED):

- The costs for the different survey variations are summed to determine the total monthly services cost. The monthly services cost is multiplied by 12.
- The service cost is multiplied by the administrative ratio to determine the administrative cost.
- The service cost and administrative cost is summed to determine the total cost.

FUNDING:

The funding is TANF and GF/MOE consistent with the funding ratios in the CalWORKs Child Care Stage One Services and Administration premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The overall decrease reflects a lower final Stage One Child Care caseload projection for both RMR increases slightly offset by a full year of implementation for the 4.5 percent increase. The decrease in federal funds and increase in GF reflects an increase in the projected percentage of services that will be provided to non-federally eligible families.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Child Care	Total	Federal	State	County	Reimb.
RMR Increase to 85th of 2009 with 10.11 Percent Deficit	$27,504	$25,071	$2,433	$0	$0
4.5 Percent RMR Increase	14,503	13,220	1,283	0	0
Total	$42,007	$38,291	$3,716	$0	$0

FY 2016-17

Item 101 – CalWORKs Child Care	Total	Federal	State	County	Reimb.
RMR Increase to 85th of 2009 with 10.11 Percent Deficit	$24,896	$22,422	$2,474	$0	$0
4.5 Percent RMR Increase	13,947	12,561	1,386	0	0
Total	$38,843	$34,983	$3,860	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Regional Market Rate Increase – License-Exempt*

DESCRIPTION:

This premise reflects the cost to the CalWORKs Stage One Child Care program to increase the reimbursement ceilings for license-exempt child care providers from 60 to 65 percent of the family child care home rate. The RMR ceilings are the maximum amounts that child care providers can be reimbursed from the state for subsidized child care. Child Care providers of current and former CalWORKs participants receiving Stage One, Stage Two, Stage Three and Alternative Payment Program child care may be affected by this increase. Refer to the RMR Increase premise for details of the costs for RMR increases that are not specifically associated with license-exempt providers.

IMPLEMENTATION DATE:

This premise implemented on October 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Education Code section 8357.
- This premise includes the cost to increase the reimbursement ceiling for license-exempt providers from 60 to 65 percent of the family child care home rate.
- The FY 2015-16 funding for the license-exempt increase to 65 percent is maintained at $7,213,000.
- The final projected Stage One Child Care caseload is 42,995 in FY 2016-17.
- The proportion of each county's caseload is based on the FY 2014-15 Stage One Child Care caseload as reported on the CW 115 and 115A Child Care Monthly Reports.
- According to SAWS Consortia data from calendar year 2014, the Stage One Child Care population reflects the following characteristics:
    - Approximately 17 percent of children served are infants, 54 percent are age two to five and 29 percent are school age.
    - Approximately 49 percent of children receive license-exempt care, 24 percent receive care in a family child care home and 27 percent receive care in Child Care Centers.
    - Approximately 61 percent of children receive full-time care and 39 percent of children receive part-time care.
- The Stage One Child Care administrative ratio is 18 percent of the service expenditures and is based on actual expenditures from FY 2014-15. The administrative expenditures represent 15 percent of the total expenditures in FY 2014-15.
- The hourly and monthly full-time rates are used to estimate the overall cost to reimburse license-exempt providers up to 65 percent of the family child care home rates.
- The increase in the maximum allowable reimbursement for license-exempt providers from 60 to 65 percent results in a weighted monthly average cost per case increase of $16.31.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Regional Market Rate Increase – License-Exempt*

METHODOLOGY:

- To determine the cost to update the RMR ceilings for the license-exempt providers, the increase from 60 to 65 percent of the family child care home rate is determined by county for the applicable rate categories for each age group.
- Each county's share of the projected Stage One Child Care caseload is determined by multiplying their proportion of the FY 2014-15 Stage One Child Care actual caseload by the final projected Stage One Child Care caseload for FY 2016-17.
- The Stage One Child Care caseload characteristics are applied to each county's share of the projected caseload to determine the projected caseload that falls into the various survey categories.
- The cost for each survey category is multiplied by its respective caseload to determine the cost for each survey variation by county. For the hourly rate, the cost is multiplied by the hours of care used in a month.
- The costs for the different survey variations are summed to determine the total monthly services cost and then multiplied by 12 months.
- The services cost is multiplied by the administrative ratio to determine the administrative cost.
- The services cost and administrative cost is summed to determine the total cost.

FUNDING:

The funding is TANF and GF/MOE consistent with the funding ratios in the CalWORKs Child Care Stage One Services and Administration premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The overall FY 2016-17 increase reflects a greater use of license-exempt care, partially offset by a lower final Stage One Child Care caseload than previously projected and a full year of implementation. The decrease in federal funds and increase in GF reflects an increase in the projected percentage of services that will be provided to non-federally eligible families.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Regional Market Rate Increase – License-Exempt*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Child Care	Total	Federal	State	County	Reimb.
License-Exempt Increase to 65 percent	$7,213	$6,575	$638	$0	$0

FY 2016-17

Item 101 – CalWORKs Child Care	Total	Federal	State	County	Reimb.
License-Exempt Increase to 65 percent	$8,416	$7,580	$836	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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Health and Safety Requirements*

DESCRIPTION:

This premise reflects the costs for the TrustLine registration program and the Self-Certification process to ensure license-exempt child care providers meet health and safety requirements.

TrustLine is a state-mandated registration program that includes fingerprinting and background checks of certain license-exempt child care providers and applicants; this process includes searching the California Criminal History System, the California Child Abuse Central Index and conducting a FBI background check. TrustLine registration is required for child care providers in Stage One Child Care that are compensated by the CalWORKs program. This premise also includes reimbursement costs for processing applications referred by CDE for CalWORKs Stage Two and Stage Three Child Care and the Alternative Payment Program.

The CDSS CCL Division is responsible for processing TrustLine applications. The CDSS CCL Division contracts with DOJ to process the fingerprints and California Child Care Resource and Referral Network to search file activities. CCL also contracts with the California Child Care Resource and Referral Network to maintain the TrustLine registry and communicate the status of the TrustLine registrants with the payment programs. Counties use a CDSS website to process Live Scan applications and are able to utilize any LiveScan vendor authorized by DOJ for fingerprinting services. This premise includes both the contract costs and the county administrative costs associated with the TrustLine program.

This premise also reflects the administrative costs associated with ensuring that license-exempt child care providers self-certify that they meet the minimum health and safety standards. License-exempt providers must meet the following minimum standards: prevention and control of infectious diseases, building and physical premises standards and minimum health and safety training appropriate to the provider setting.

IMPLEMENTATION DATE:

The initial TrustLine program implemented on September 1, 1995.

The Self-Certification mandate for license-exempt providers implemented on October 1, 1996.

The requirement for FBI clearance implemented on January 1, 1999.

TrustLine Web-based Application replaced the web-based application and TrustLine Automated Registration Process on July 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Health and Safety Code sections 1596.60 through 1596.68 and W&IC section 11324.
- Providers for CalWORKs participants who are currently licensed, or who are an aunt, uncle or grandparent of the child, are exempt from TrustLine and Self-Certification requirements.
- The state sharing ratio for CDSS TrustLine and Self-Certification is 9.9 percent, based on actual county expenditures from FY 2014-15.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Health and Safety Requirements*

KEY DATA/ASSUMPTIONS (CONTINUED):

Self-Certification

- The Stage One caseload trend is applied to the actual CDSS application data from FY 2014-15 to develop the CDSS application projections. It is estimated that there will be 9,375 and 9,844 CDSS applications for FY 2015-16 and FY 2016-17, respectively.
- The Self-Certification county administration cost per case is $72.48, based on the actual CWD expenditures claimed on the CDSS County Expense Claim divided by the number of CDSS applications in FY 2014-15.

TrustLine

- The FY 2015-16 TrustLine funding is maintained at $3,904,000 total funds.
- For FY 2016-17, the Stage One caseload trend is applied to the actual CDSS application data from FY 2014-15 to develop the CDSS application projections. The CDE application projection is based on a trend projection using the most recent nine months of actual application data.
- The voluntary application projection is based on a trend projection using the most recent 48 months of actual application data.
- The ancillary application projection is based on a trend projection using the actual number of ancillary applications in FY 2014-15.
- For voluntary and ancillary TrustLine applicants, this premise includes only the Resource and Referral Network costs; these fees are reimbursed by applicants to the GF outside of the CDSS budget. Since voluntary and ancillary applicants pay fingerprinting and DOJ fees directly to the vendor, these costs are not included in this premise.
- The incomplete application projection is based on the actual proportion of incomplete applications to the total CDSS, CDE and voluntary applications in the most recent 12 months of available data. These applications only incur the incomplete application fee and are reflected in the Resource and Referral Network costs.
- The annual FY 2016-17 TrustLine application projections are as follows: 9,844 CDSS applications, 2,448 CDE applications, 2,085 voluntary applications, 2,652 ancillary applications and 1,438 incomplete applications (including CDSS, CDE and voluntary applicants).
- On July 1, 2015, all counties started using the TrustLine Web-based Application, a website controlled and operated by CDSS, to process LiveScan applications. Applicants are fingerprinted through a LiveScan vendor of their choice and then applications are entered into the TrustLine Web-based Application by a contracted vendor or county worker.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Health and Safety Requirements*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The FY 2016-17 contract service fees are as follows:

	FY 2016-17
DOJ Fingerprinting/Criminal History File	$32
DOJ California Child Abuse Central Index	$15
DOJ FBI Fingerprints	$17
Resource and Referral Network Application Fee	$35
Resource and Referral Network Incomplete Application Fee	$15
Fingerprinting and Data Entry Fee	$30

- The TrustLine county administration cost per case is $216.99, based on the actual CWD expenditures claimed on the CDSS County Expense Claim, divided by the number of CDSS applications in FY 2014-15. TrustLine county administration costs are only included for CDSS applications.

METHODOLOGY:

Self-Certification

- The Self-Certification administration cost is calculated by multiplying the projected number of CDSS Self-Certification applications by the Self-Certification county administration cost per case.

TrustLine

- The cost of each TrustLine contract is calculated by multiplying the projected number of applications by the applicable contract service fee(s).
- The TrustLine county administration cost is calculated by multiplying the projected number of CDSS applications by the TrustLine county administration cost per case.

FUNDING:

The CDSS Health and Safety child care costs for two-parent families, RNE, Safety Net, TANF Timed-Out and state-only Cal-Learn is funded with 100 percent GF. All other CDSS applications are funded with TANF. All costs associated with services to applicants referred by CDE are funded by reimbursements from CDE. Costs for voluntary and ancillary applicants are paid from GF.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Health and Safety Requirements*

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change in the TrustLine cost. The decrease in Self-Certification costs reflect a lower application projection and a lower county administration cost per case.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 increase in TrustLine and Self-Certification costs primarily reflect a higher projected number of applications.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CalWORKs Child Care	**Total**	**Federal**	**State**	**County**	**Reimb.**
TrustLine	$3,904	$3,146	$466	$0	$292
Self-Certification	680	612	68	0	0
Total	$4,584	$3,758	$534	$0	$292

FY 2016-17

Item 101 – CalWORKs Child Care	**Total**	**Federal**	**State**	**County**	**Reimb.**
TrustLine	$3,909	$3,080	$509	$0	$320
Self-Certification	714	643	71	0	0
Total	$4,623	$3,723	$580	$0	$320

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Tribal TANF*

DESCRIPTION:

This premise reflects GF costs to operate and administer Tribal TANF programs in California. Federal welfare reform legislation allows for each Indian tribe that has an approved Tribal Family Assistance Plan to receive a Tribal Family Assistance Grant. An MOU must be established in order to transfer the administrative authority to operate a TANF program from a county or other political subdivision of the State of California over to a tribe(s). Federal and state funding are based on FFY 1994 levels and expenditures. Transferred funds include amounts needed to meet grant and administrative costs related to cash aid and WTW services.

IMPLEMENTATION DATE:

This premise implemented March 1, 1998. A list of current Tribal TANF Programs in California and implementation dates for Tribal TANF expansions can be found online at: http://tribaltanf.cdss.ca.gov/Default.htm

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 10553.25.
- The GF costs are based on the county participation rates of reimbursement during FFY 1994. The state funding cannot exceed the amount designated for the Tribal TANF program based on the 1994 caseload counts.
- Each county participating in a Tribal TANF program has a county-specific approved or anticipated caseload.
- The average number of persons per case is 2.9.
- The average monthly cash aid cost per person, WTW cost per case and administration cost per case are based on the average expenditure amounts in FFY 1994.
- The direct distribution of TANF funds to the tribal organizations reduces both the TANF Block Grant available to the state and the state's MOE requirement. The state's MOE is reduced in the same proportion as the reduction in the block grant.
- The TANF Block Grant to California is $3,733,818,000.
- The MOE requirement for the TANF Block Grant is $2,908,684,000.

METHODOLOGY:

The amount of TANF funds transferred to the tribes is calculated as follows:

- The administrative costs are calculated by multiplying the average number of cash aid cases in a county by the average monthly administrative cost per case and the number of months implemented in that county under that Tribal TANF provider.
- The grant costs are calculated by multiplying the average number of persons per case by the number of cases in a county, by the cash aid cost per person and the number of months implemented in that county under that Tribal TANF provider.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Tribal TANF*

METHODOLOGY (CONTINUED):

- The WTW services costs are calculated by multiplying the annual number of WTW cases in a county by the average monthly WTW services cost per case and the number of months implemented in that county under that Tribal TANF provider. The 50 percent federal share of projected costs is the Tribal TANF Transfer amount.
- The Tribal TANF Transfer is divided by the total TANF Block Grant to develop a ratio that is applied to the MOE requirement to determine the Tribal TANF MOE Reduction.

FUNDING:

Grant costs are shared 50 percent TANF and 50 percent GF. The GF share of administrative and WTW services costs is based on the applicable GF percentage reimbursed during FFY 1994 in those counties in which the tribal groups are located.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects delayed implementation of the Pit River and Smith River Tribal TANF expansions from July 1, 2015, to January 1, 2016.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects the California Tribal TANF Partnership, Owens Valley Career Development Center and Washoe Tribal TANF providers expanding to new areas; implementation of four new Tribal TANF Providers (Hopland, Manchester Point, Pinoleville and Redding Rancheria); and a full year of implementation for the Pit River and Smith River Tribal TANF providers.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 101 – Tribal TANF	**Total**	**Federal**	**State**	**County**	**Reimb.**
Tribal TANF	$76,779	$0	$76,779	$0	$0
TANF Page – Total TANF Block Grant Expenditures					
State/County MOE Reduction – Tribal TANF	-64,251	0	0	0	0
TANF Page – TANF Transfers					
Tribal TANF – Transfer	82,478	82,478	0	0	0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Tribal TANF*

EXPENDITURES (CONTINUED):
(in 000s)

	FY 2016-17				
Item 101 – Tribal TANF	**Total**	**Federal**	**State**	**County**	**Reimb.**
Tribal TANF	$83,835	$0	$83,835	$0	$0
TANF Page – Total TANF Block Grant Expenditures					
State/County MOE Reduction – Tribal TANF	-70,123	0	0	0	0
TANF Page – TANF Transfers					
Tribal TANF – Transfer	90,016	90,016	0	0	0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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TANF/MOE in Other State Agencies*

DESCRIPTION:

This premise consolidates several premises associated with TANF funds and MOE expenditures in other state agencies. The TANF funds are used for eligible services in other departments' programs that also serve CalWORKs and needy families. Local and state expenditures by CDSS and other departments on behalf of TANF/CalWORKs-eligible families may be counted toward the state's MOE requirement for the TANF block grant.

Expenditures that would have been authorized in FFY 1995 and allowable under the former AFDC program, Job Opportunities and Basic Skills, Emergency Assistance, Child Care for AFDC recipients, and At-Risk Child Care or Transitional Child Care programs may count toward MOE. Expenditures not previously authorized and allowable are countable up to the amount by which they exceed the total state program expenditures in FFY 1995. State expenditures that are used as a match to draw down other federal funding are generally not countable toward TANF MOE.

CDSS transfers TANF to the following state agencies for the specified purpose:

- The CCC for educational services provided to participants in the WTW program.
- The CDE for educational activities designed to increase self-sufficiency, job training and work for CalWORKs clients.
- The California Student Aid Commission for Cal Grants that are awarded to low-income students attending public or private colleges and universities.

The following MOE eligible expenditures have been identified in three state agencies:

- The CCC work-study, other education-related work experience, job placement services and child care services, as well as coordination with county welfare offices to determine eligibility and availability of services provided to students who are CalWORKs recipients.
- The CDE child care programs that provide services for families who are served in the CalWORKs program as well as for families who are income eligible but not currently receiving TANF benefits.
- The Department of Child Support Services for the state portion of the $50 payment that is disregarded from child support collections and passed through to the custodial parent.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Title 45, CFR, sections 263.2 through 263.6.

<u>TANF Transfers to Other State Agencies</u>

- The contracted amounts of TANF pass-through are $8.4 million for CCC and $9.9 million for CDE, totaling $18.3 million.
- The TANF transfer to California Student Aid Commission for Cal Grants is approximately $520.9 million in FY 2015-16 and $825.5 million in FY 2016-17.
    - There are two components of the Cal Grants used for this premise. Cal Grant A can be used for tuition and fees at public and private colleges as well as some occupational and career colleges. Cal Grant B provides low-income students with a living allowance and assistance with tuition and fees.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

TANF/MOE in Other State Agencies*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The following criteria are applied to the Cal Grant expenditures:
  - Exclude state expenditures used as federal match.
  - Exclude federally funded expenditures.
  - Exclude TANF ineligible expenditures (Cal Grant B Access and Cal Grant C).
  - Include expenditures that meet TANF criteria (unmarried students age 25 or younger with annual parental/student income at or below the $50,000 threshold).

MOE Expenditures in Other State Agencies

- The eligible MOE expenditures claimed by CCC will be $34.9 million in FY 2015-16 and FY 2016-17.
  - Current CalWORKs recipients may utilize these services until their educational objectives are met.
  - These funds are required to be expended for educational-related services for CalWORKs program eligible recipients only.
- The eligible MOE expenditures claimed by CDE will be approximately $568.8 million in FY 2015-16 and FY 2016-17.
  - Federal regulations allow state expenditures for child care to satisfy both Child Care Development Fund MOE and TANF MOE, provided that these expenditures meet the MOE requirements for both grants. The total "double-countable" expenditures cannot exceed the MOE level for the Child Care Development Fund ($85.6 million).
  - All TANF/CalWORKs-eligible families meet Child Care Development Fund eligibility requirements and meet both Child Care Development Fund and TANF MOE expenditure requirements.
  - If a state has additional child care expenditures that have not been used toward meeting Child Care Development Fund MOE requirement or to receive federal matching funds, these expenditures may count toward the state's TANF MOE, provided that the benefiting families meet the state's definition for TANF eligibility. All other TANF MOE requirements and limitations, as set forth in federal regulations, must also be met.
- The amount of eligible MOE expenditures claimed by Department of Child Support Services is $11.3 million in FY 2015-16 and FY 2016-17.
  - The child support payment data is based on the counties' monthly Child Support 35 Reports and the Child Support Services Supplement to the Child Support 34 Monthly Report of Collections and Distributions.
  - The $50 disregard is shared between the state and the federal government. Only the state portion of the disregard is reflected in this premise.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

TANF/MOE in Other State Agencies*

METHODOLOGY:

TANF Transfers to Other State Agencies

- The specified amounts of TANF funds to be transferred from CDSS to CCC and CDE are established by interagency agreements.
- The amount of TANF transferred to California Student Aid Commission reflects the amount of TANF available for Cal Grants after funding CalWORKs and other programs.

MOE Expenditures in Other State Agencies

- The projected expenditures from CCC and Department of Child Support Services that count toward the MOE requirement is estimated and provided by each agency, respectively.
- The projected expenditures from CDE that count toward the MOE requirement are calculated by multiplying the applicable GF cost for child care programs by the percentage of TANF-eligible families receiving CDE Child Care Services.

FUNDING:

Funds that are passed through or transferred to CCC, CDE and California Student Aid Commission are 100 percent TANF. Expenditures claimed as MOE are 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change to the TANF Pass-Through for State Agencies or the TANF transferred to the California Student Aid Commission.

The increase to the MOE eligible expenditures from CCC reflects additional MOE eligible expenditures for services provided to CalWORKs students.

The increase to the MOE eligible expenditures claimed by CDE reflects an increase in the projected GF expenditures for CDE child care programs.

The decrease in countable MOE from the State Disregard Payment to Families reflects updated projections for the amount of disregard payments from the Department of Child Support Services.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change to the TANF Pass-Through for State Agencies, the MOE eligible expenditures from CCC, the countable MOE from the MOE eligible expenditures claimed by CDE or the State Disregard Payments to Families.

The increase in the TANF transfer to the California Student Aid Commission reflects available TANF in FY 2016-17 after funding CalWORKs and other programs.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

TANF/MOE in Other State Agencies*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 101 – Other TANF Items	Total	Federal	State	County	Reimb.
TANF Pass-Through for State Agencies	$18,377	$18,377	$0	$0	$0
TANF Transfer to Student Aid Commission	520,897	520,897	0	0	0
TANF Page – Other MOE Eligible Expenditures					
Community Colleges – Expansion of Services	34,897	0	34,897	0	0
CDE Child Care Programs	568,755	0	568,755	0	0
State Disregard Payment to Families	11,279	0	11,279	0	0

FY 2016-17

Item 101 – Other TANF Items	Total	Federal	State	County	Reimb.
TANF Pass-Through for State Agencies	$18,377	$18,377	$0	$0	$0
TANF Transfer to Student Aid Commission	825,543	825,543	0	0	0
TANF Page – Other MOE Eligible Expenditures					
Community Colleges – Expansion of Services	34,897	0	34,897	0	0
CDE Child Care Programs	568,755	0	568,755	0	0
State Disregard Payment to Families	11,279	0	11,279	0	0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Kin-GAP Program*

DESCRIPTION:

This premise provides funding intended to enhance family preservation and stability by recognizing many foster children are in long-term, stable placements with relatives and these placements are the permanent plan for the child. Accordingly, a dependent child who has been living with a relative for at least six months may receive a subsidy, if the relative assumes guardianship and dependency is dismissed. Once dependency is dismissed, there is no need for continued governmental intervention in the family life through ongoing or scheduled court and social services supervision of the placement.

Pursuant to W&IC section 11386, cases determined to be Title IV-E eligible have converted to the Fed-GAP program upon annual redetermination, effective January 1, 2011. Prospective federally eligible cases that would have entered the Kin-GAP program on or after January 1, 2011, now enter the Fed-GAP program.

This premise includes funding for the annual CNI COLA resulting from the *California Alliance of Child and Family Services v. William Lightbourne, et al.* court decision.

IMPLEMENTATION DATE:

The Kin-GAP program implemented on January 1, 2000, the enhancements implemented on October 1, 2006, and the annual CNI COLA implemented on July 1, 2011.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 11360 through 11380 and 11461.
- The state-only Kin-GAP program is available for those cases not eligible for the Fed-GAP program but meet the criteria for Kin-GAP. This includes cases transferring from the CalWORKs program, permanent residence under color of law and cases determined to be non-federally eligible upon annual redetermination.
- The Kin-GAP rate is equivalent to the basic FC rate for children placed in a licensed or approved foster family home, including all clothing allowances and SCIs received while in FC.
- When a child is living with a minor parent for whom a Kin-GAP payment is made, the payment shall include an amount for the care and supervision of the child.
- Federal and non-federal basic grant payments are based on the CA 800 Kin-GAP Summary Report of Expenditures from July 2014 through June 2015.
- Federally eligible cases have been transferred to the Fed-GAP program. Non-federally eligible cases remain in the Kin-GAP program, which represent approximately 51.8 percent of the total guardian assistance payment caseload based on the CA 800 Kin-GAP Summary Report of Expenditures from July 2014 through June 2015.
- The average monthly Kin-GAP caseload is 7,473 for FY 2015-16 and 7,709 for FY 2016-17.
- The average monthly Kin-GAP basic grant payment is $721.35.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Kin-GAP Program*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The projected Kin-GAP grant payment is adjusted to include a CNI COLA increase of 2.54 percent for FY 2015-16 and an additional CNI COLA increase of 2.96 percent for FY 2016-17.
- Based on the actual expenditures from July 2014 through June 2015, the cost of ongoing county Kin-GAP administrative functions is $55.51 per case, per month.
- The average initial clothing allowance provided to new cases is $220 and $99 annually thereafter.
- State and county expenditures associated with all cases are considered eligible to be counted toward the state's TANF MOE.
- This premise assumes no Title IV-E federal funding.

METHODOLOGY:

- The assistance costs are calculated by multiplying the total number of casemonths by the average monthly Kin-GAP grant payment.
- The administrative costs are calculated by multiplying the projected casemonths by the monthly Kin-GAP administrative cost per case.
- The CNI COLA costs reflect the net impact of the monthly grant adjusted for the CNI COLA, with the additional CNI COLA applied to the subsequent FY.

FUNDING:

Assistance costs are 79 percent GF and 21 percent county funds, and administrative costs are 50 percent GF and 50 percent county funds for TANF eligible cases. Administrative costs for non-TANF eligible cases are 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The basic cost decrease reflects a decrease in the caseload projection offset by an increase in the monthly average grant. There is no change in administration costs. The CNI COLA decrease reflects a decrease in the caseload projection.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 basic costs increase reflects an increase in projected caseload. The FY 2016-17 administration decrease reflects a decrease in caseload and a decrease in the administrative cost per case. The CNI COLA increase reflects the additional FY 2016-17 CNI COLA.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Kin-GAP Program*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 101 – Kin-GAP Assistance	Total	Federal	State	County	Reimb.
Kin-GAP – Basic Costs	$64,690	$0	$51,105	$13,585	$0
Kin-GAP – Administration	5,225	0	3,635	1,590	0
Kin-GAP – COLA Increase	1,643	0	1,298	345	0

FY 2016-17

Item 101 – Kin-GAP Assistance	Total	Federal	State	County	Reimb.
Kin-GAP – Basic Costs	$66,730	$0	$52,717	$14,013	$0
Kin-GAP – Administration	5,135	0	3,619	1,516	0
Kin-GAP – COLA Increase	3,721	0	2,939	782	0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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After 18 Program*

DESCRIPTION:

This premise reflects the fiscal impact of implementing the federal option to extend benefits as allowed in the Fostering Connections to Success and Increasing Adoptions Act of 2008 (PL 110-351). CDSS amended the Title IV-E state plan to extend benefits for youth up to age 21 in the FC (referred to as non-minor dependents), Kin-GAP, Fed-GAP and AAP programs, as well as foster youth who receive aid payments through the CalWORKs program. The goal of extending the age limit for eligible youth to receive benefits is to improve outcomes by allowing the youth to be provided support while still residing in the security of a supervised living placement and result in their successful transition to self-sufficiency.

Eligibility for extended benefits up to age 21 is available to non-minors who meet at least one of the five following criteria: 1) completing secondary education or a program leading to an equivalent credential, 2) being enrolled in an institution that provides postsecondary or vocational education, 3) participating in a program or activity designed to promote or remove barriers to employment, 4) being employed for at least 80 hours a month or 5) being incapable of doing any of the above due to a medical condition that is documented regularly in the non-minor's case plan.

In addition to the above criteria, the non-minor dependents must have entered into one of these out-of-home care programs at age 16 or older for AAP, Kin-GAP or Fed-GAP. Any case determined to include a disability can receive extended benefits up to age 21 regardless of the age of the youth upon entering the respective program.

IMPLEMENTATION DATE:

Extending benefits for Kin-GAP disabled cases implemented on January 1, 2011.

The implementation of benefits was extended to age 19 on January 1, 2012, to age 20 on January 1, 2013 and to age 21 on January 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11403(b).
- The effect of the After 18 program to CalFresh and CFAP is assumed to be included in the caseload trend.

<u>CalWORKs</u>

- Based on the CalWORKs CA 800 report from FY 2014-15, the projected average monthly caseload is four cases for FY 2015-16 and FY 2016-17.
- The monthly projected service-only grant cost is $317 which is equal to the non-exempt MAP for an AU of one in region one. This amount does not reflect the five percent MAP increase that implemented on March 1, 2014 or the additional five percent MAP increase that implemented on April 1, 2015.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

After 18 Program*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The value of the five percent MAP increase that began March 1, 2014, ($768 in FY 2015-16 and FY 2016-17) is included in the Five Percent MAP Increase - March 1, 2014 premise.
- The value of the five percent MAP increase that began April 1, 2015, ($816 in FY 2015-16 and FY 2016-17) is included in the Five Percent MAP Increase - April 1, 2015 premise.
- The average monthly administrative cost per case is $24.96.

Kin-GAP

- Of the youth eligible to extend FC benefits to 21 years of age, it is assumed 80 percent of foster youth that would normally emancipate at age 17 will continue to receive benefits until age 19, and of those, 37 percent will continue to receive benefits until age 20. Of those, 30 percent will continue to receive benefits until age 21.
- There are two Kin-GAP cases per month extending beyond age 18 due to a disability, based on point-in-time Kin-GAP Dual Agency cases by age, as of March 31, 2010.
- The Kin-GAP caseload was increased to include youth turning 18 years of age in 2011, including those youth who continue to receive benefits funded with county-only dollars.
- There are 15 average monthly Kin-GAP cases that will receive extended benefits beyond age 18 as a result of entering the Kin-GAP program at age 16 or older. This is based on entrances into the Kin-GAP program from calendar year 2009 data, including the impact of Kin-GAP Interstate Compact for the Placement of Children residing outside of California.
- The projected Kin-GAP grant is $809.00 for FY 2015-16 and $832.95 for FY 2016-17, a combination of the basic grant for ages 15 to 20, based on the Kin-GAP basic rate of $708.00, plus additional Kin-GAP benefits such as a SCI and clothing allowance which is determined on a case-by-case basis.
- The projected Kin-GAP grant is adjusted to include a CNI COLA increase of 2.54 percent in FY 2015-16 and an additional CNI COLA increase of 2.96 percent for FY 2016-17, resulting from the *California Foster Parent Association v. William Lightbourne, et al.* court decision.
- Based on actual Kin-GAP expenditure data, the projected average monthly administrative cost per case is $55.51 for FY 2015-16 and FY 2016-17.

METHODOLOGY:

- The CalWORKs grant and administration costs for service-only cases are calculated by multiplying the caseload by the MAP amount (excluding the MAP increases) and the average monthly administrative cost per case, which is then multiplied by 12 months.
- The Kin-GAP benefits are calculated by multiplying the total number of casemonths by the average Kin-GAP grant. The Kin-GAP administrative costs are calculated by multiplying the projected casemonths by the monthly administrative cost per case.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

After 18 Program*

FUNDING:

Costs are shared at the same ratios as in their respective programs.

The CalWORKs grant costs for service-only cases are 97.5 percent GF and 2.5 percent county funds and are not MOE countable. The administration costs for CalWORKs service-only cases are 100 percent GF and are not MOE countable.

The Kin-GAP assistance costs are 79 percent GF and 21 percent county funds. The Kin-GAP Administrative costs are 50 percent GF and 50 percent county funds for TANF eligible cases and 100 percent GF for non-TANF eligible cases.

The funding for the FC, Fed-GAP, AAP and CWS programs' portion of this estimate is included in the 2011 Realignment tab.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in CalWORKs grant and administration costs reflects a decreased projected caseload.

The Kin-GAP grant decrease reflects the updated grant amount.

There is no change to Kin-GAP administrative costs.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change to CalWORKs costs.

The FY 2016-17 Kin-GAP grant increase reflects the updated grant amount resulting from the CNI COLA.

There is no change to Kin-GAP administrative costs.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 101 – Kin-GAP Program	**Total**	**Federal**	**State**	**County**	**Reimb.**
After 18 Program – Kin-GAP Grant Impact	$149	$0	$118	$31	$0
After 18 Program – Kin-GAP Administration Impact	10	0	7	3	0
Item 101 – After 18 Program - Services-Only FC Cases					
Grants	15	0	15	0	0
Administration	1	0	1	0	0
Total	$175	$0	$141	$34	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

After 18 Program*

EXPENDITURES (CONTINUED):

(in 000s)

	FY 2016-17				
Item 101 – Kin-GAP Program	**Total**	**Federal**	**State**	**County**	**Reimb.**
After 18 Program – Kin-GAP Grant Impact	$154	$0	$122	$32	$0
After 18 Program – Kin-GAP Administration Impact	10	0	7	3	0
Item 101 – After 18 Program - Services-Only FC Cases					
Grants	15	0	15	0	0
Administration	1	0	1	0	0
Total	$180	$0	$145	$35	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Kin-GAP Nonrecurring Costs*

DESCRIPTION:

This premise provides funding to reimburse relatives who obtain legal guardianship of children in FC for nonrecurring expenses. The federal Fostering Connections to Success and Increasing Adoptions Act of 2008 (PL 110-351) created a Title IV-E option allowing states to provide Kin-GAP to relatives who assume legal guardianship of related foster children. The Act requires a written, binding Kin-GAP agreement that specifies, among other things, that the Title IV-E agency reimburse the legal guardian for the nonrecurring expenses associated with obtaining legal guardianship of the child, which cannot exceed $2,000.

IMPLEMENTATION DATE:

This premise implemented on January 1, 2012.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11364 and 11387.
- The maximum reimbursement per case is $2,000.
- Based on actual caseload and expenditure data from the Adoptions program, an average of 30 percent of relative foster parents will submit a claim in FY 2015-16 and FY 2016-17.
- Based on the caseload reported on the CA 237 Kin-Gap Caseload Movement Report, approximately 21 percent of FC children served in CalWORKs transfer to the Kin-GAP program. As a result, an average of 134 monthly cases will be eligible for the state-only Kin-GAP program in FY 2015-16 and FY 2016-17.

METHODOLOGY:

The average monthly Kin-GAP caseload is multiplied by the maximum reimbursement per case.

FUNDING:

The Kin-GAP program costs are 100 percent GF. The Fed-GAP and CWS programs portion of this estimate are included in the 2011 Realignment tab.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects an increase in caseload and the number of cases transferring to the Kin-GAP program.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Kin-GAP Nonrecurring Costs*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – Kin-GAP Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Nonrecurring Costs – Kin-GAP Impact	$267	$0	$267	$0	$0

FY 2016-17

Item 101 – Kin-GAP Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Nonrecurring Costs – Kin-GAP Impact	$267	$0	$267	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Tribal-State Title IV-E Agreements*

DESCRIPTION:

This premise reflects the costs to provide funding when a tribe seeks to implement a CWS program by entering into a Title IV-E Tribal-State Agreement. For tribes with a Title IV-E agreement, the state will provide the pass-through of federal Title IV-E and state funds for maintenance, administration and service costs for tribal children in FC.

IMPLEMENTATION DATE:

The Karuk Tribe implemented on March 1, 2013, and the Yurok Tribe implemented on July 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Federal Social Security Act, Indian Child Welfare Act and W&IC sections 10553.1 and 10553.2.
- The average monthly grants are based on statewide actual expenditures through June 2015.
  - The foster family home grant is $939.14 in FY 2015-16 and $966.93 in FY 2016-17.
  - The group home grant is $8,349.71 in FY 2015-16 and $8,596.88 in FY 2016-17.
  - The Fed-GAP grant is $813.26 in FY 2015-16 and $837.33 in FY 2016-17.
  - The Kin-GAP grant is $739.67 in FY 2015-16 and $761.57 in FY 2016-17.
  - The AAP grant is $987.27 in FY 2015-16 and $1,016.50 in FY 2016-17.
  - The supervised ILP grant is $875.39 in FY 2015-16 and $901.30 in FY 2016-17.
  - The after 18 foster family home grant is $1,029.98 in FY 2015-16 and $1,060.46 in FY 2016-17.
- The above grants include a CNI COLA of 2.54 percent for FY 2015-16 and 2.96 percent for FY 2016-17, resulting from the impact of the *California Foster Parent Association v. William Lightbourne et al.* court decision.
- The Supervised Independent Living Placement infant payment is $200 in FY 2015-16 and FY 2016-17.
- The Karuk Tribe average monthly projected caseload for FY 2015-16 is five for foster family homes, two for AAP, two for group homes, one for ER, one for ERA, three for FM, two for FR, two for PP and one for Adoptions.
- For FY 2016-17 the Karuk Tribe cases are projected to be five for foster family homes, two for AAP, two for group homes, four for ER, 20 for ERA, four for FM, four for FR, two for PP and one for Adoptions.
- The Yurok Tribe average monthly projected caseload for FY 2015-16 is three for foster family homes, one for AAP, two for Fed-GAP, one for Kin-GAP, eight for ER, 12 for FM, 12 for FR and one for PP.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Tribal-State Title IV-E Agreements*

KEY DATA/ASSUMPTIONS (CONTINUED):

- For FY 2016-17 for Yurok Tribe cases are projected to be 47 for foster family homes, 12 for AAP, 33 for Fed-GAP, three for Kin-GAP, nine for supervised Independent Living Placement, one for supervised ILP infant payment, 406 for ER, 200 for ERA, 26 for FM, 45 for FR and 41 for PP.
- All tribal CWS cases are federally eligible.
- The Karuk Tribe foster family homes, AAP, group home, and Adoptions cases are federally eligible.
- The percent of federally eligible cases for the Yurok tribe is 66 percent for foster family homes and supervised ILP and 96 percent for AAP cases based on the federal eligibility of cases transferring to the Yurok tribe from surrounding counties.
- The Karuk Tribe has one FC determination eligibility worker at a cost of $70,000 per year.
- The Yurok Tribe has two FC determination eligibility workers at a cost $50,000 per eligibility worker per year.
- As Title IV-E agencies, the Karuk and Yurok Tribes will receive additional funding in FY 2015-16 and FY 2016-17 for post-realignmnet activities and activities that were realigned to counties as part of 2011 Realignment. This additional funding will allow tribes to provide tribal youth with services that have previously been realigned to counties. For more information on the various post-realignment premises, please refer to the corresponding premise. For more information on 2011 Realignment, please refer to the 2011 Realignment tab.

METHODOLOGY:

- The assistance costs are calculated by multiplying the casemonths by the average grant amounts for each program component.
- The FC administrative costs are calculated by multiplying the number of eligibility workers by the annual eligibility worker costs.
- The CWS administrative costs are calculated by summing the products of the time necessary to complete the administrative activities multiplied by the tribal eligibility worker rates.
- The Adoptions costs are calculated by multiplying the number of eligibility workers by the annual eligibility worker costs plus the fixed costs associated with specialized training, nonrecurring expenses and Adam Walsh background checks.
- The costs associated with 2011 Realignment services are calculated by multiplying the 58-county realignment costs by the tribes' percentage of statewide caseload.

FUNDING:

Federal funding is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the enhanced Tribal FMAP of 83 percent for assistance, 50 percent for administrative costs and 75 percent for training costs for those cases and programs meeting eligibility criteria.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Tribal-State Title IV-E Agreements*

FUNDING (CONTINUED):

For assistance, due to the higher tribal FMAP rate the non-federal share will be funded with 100 percent GF for tribes with a federal FMAP of 80 percent or higher, an AAP Tribal FMAP of 62.5 percent or higher or a Fed-GAP Tribal FMAP of 60.5 percent or higher. If the FMAP falls below these thresholds, the tribal share of the non-federal costs will be 60 percent for FC, 25 percent for AAP and 21 percent for Fed-GAP.

For FC administration, the non-federal costs are 70 percent GF and 30 percent tribal funds.

The CWS administrative non-federal costs are 100 percent GF for background and criminal records checks, Live Scan machines, caregiver court filings and foster parent training and recruitment. The CWS basic direct costs do not have a federal share and are 70 percent GF and 30 percent tribal funds. The Adoptions administrative non-federal costs are 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The Kin-GAP grants implement in FY 2016-17.

The increase in FC grants reflect an increase in caseload, increases to FC average monthly grants and an increase in funding to allow tribes to implement FC programs.

The increase in AAP grants reflect an increase in caseload and an increase in the AAP average monthly grant.

There is no change in FC, Adoptions and CWS administration funding.

REASON FOR YEAR-TO-YEAR CHANGE:

The Kin-GAP grants implement in FY 2016-17.

The FY 2016-17 increase in FC grants reflect an increase in caseload and FC average monthly grants due to the updated CNI COLA.

The FY 2016-17 increase in AAP grants reflect an increase in caseload and an increase in the AAP average monthly grant due to the updated CNI COLA.

The FY 2016-17 increase in FC administration reflects an increase in caseload.

The FY 2016-17 increase in CWS and Adoptions administration reflects an increase in caseload and funding to allow tribes to implement CWS and Adoptions programs.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Tribal-State Title IV-E Agreements*

EXPENDITURES:
(in 000s)

FY 2015-16

Tribal-State Title IV-E Agreements	Total	Federal	State	County	Reimb.
Item 101 – Kin-GAP Grants	$9	$0	$9	$0	$0
Item 101 – FC Grants	303	242	61	0	0
Item 101 – AAP Grants	36	30	6	0	0
Item 141 – FC Administration	171	85	60	26	0
Item 151 – CWS Administration	293	127	114	52	0
Item 151 – Adoptions Administration	72	36	36	0	0
Total	$884	$520	$286	$78	$0

FY 2016-17

Tribal-State Title IV-E Agreements	Total	Federal	State	County	Reimb.
Item 101 – Kin-GAP Grants	$29	$0	$28	$1	$0
Item 101 – FC Grants	1,280	867	413	0	0
Item 101 – AAP Grants	171	142	29	0	0
Item 141 – FC Administration	193	96	71	26	0
Item 151 – CWS Administration	6,446	2,527	2,620	1,270	29
Item 151 – Adoptions Administration	1,072	504	564	4	0
Total	$9,191	$4,136	$3,725	$1,301	$29

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Payable From Title IV-E Child Support Collections/Recovery Fund*

DESCRIPTION:

This premise reflects the estimated federal share of FC child support collections as determined by the Department of Child Support Services. The Department of Child Support Services is responsible for transferring the federal share of FC collections, as reported to the federal government, to the Recovery Fund. The FC child support collections offset the federal Title IV-E share of FC expenditures.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2000.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Social Security Act section 457(e)(1).
- The federal share of the estimated FC collections is provided by the Department of Child Support Services based on the most recent budget process.
- The level of FFP for federal FC claims is 50 percent; the transfer of the collections is displayed as 100 percent federal funds.

METHODOLOGY:

The estimates are provided by the Department of Child Support Services.

FUNDING:

The FC child support collections offset the federal Title IV-E share of FC expenditures.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects an updated projection based on additional actual FC collections.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 decrease reflects an updated projection based on additional actual FC collections.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Payable From Title IV-E Child Support Collections/Recovery Fund*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – FC Net Payments	Total	Federal	State	County	Reimb.
Collections Offsetting Title IV-E FC Expenditures	-$6,268	-$6,268	$0	$0	$0
Collections Transferred to Recovery Fund	6,268	6,268	0	0	0

FY 2016-17

Item 101 – FC Net Payments	Total	Federal	State	County	Reimb.
Collections Offsetting Title IV-E FC Expenditures	-$6,064	-$6,064	$0	$0	$0
Collections Transferred to Recovery Fund	6,064	6,064	0	0	0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Continuum of Care Reform*

DESCRIPTION:

This premise provides funds to implement revisions to the state's current rate-setting system, services and programs for children and families in the continuum of AFDC-FC placements. Improvements to the continuum of care have been a consistent theme in child welfare in California for the past 15 years. The continuum of placement settings and the array of available services and supports for children and youth in FC is an interconnected system.

In September 2012, the CCR effort began through SB 1013 (Chapter 35, Statutes of 2012). This initial work resulted in the publication of the CDSS' 2015 report titled California's Child Welfare Continuum of Care Reform. The report outlined a comprehensive approach to improve the experience and outcomes of children and youth in FC. AB 403 (Chapter 773, Statutes of 2015) codified the recommendations, which seeks to assist youth in FC have their day-to-day physical, mental and emotional needs met, have the opportunity to grow up in a permanent and supportive home, and have the opportunity to grow into self-sufficient, successful adults.

AB 403 supports these efforts by giving families who provide FC, now known as resource families, with targeted training and support so that they are better prepared to care for youth living with them. The reform also advances California's long standing goal to decrease the stat's reliance on long-term group home care by increasing youth placement in family settings and by transforming existing group home care into places where youth, who cannot transition to family-base placements, can receive short-term, intensive treatment to allow them to do so.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2015, for the foster family agency social worker rate increase. Training, recruitment, retention and support activities for resource families and foster parents implemented on January 1, 2016. The transitioning of group home placements to resource families, Intensive Treatment FC placements or short-term residential treatment centers will implement on January 1, 2017. Other administrative activities to support the CCR will implement on either July 1, 2016, or January 1, 2017, as specified below.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: AB 403; W&IC sections 4096.5, 4096.6, 11400, 11402, 11462, 11462.01, 11462.04, 11462.015, 11462.02, 11463, 16000, 16519.5, 16519.52 through 16519.56 and 18987.72; Health and Safety Code sections 1502, 1506.1, 1507.25, 1522.42, 1522.43, 1529.2, 1530.8, 1562 and 6276.38.

Assistance Placements

- This component implements January 1, 2017.
- The FC youth in group home care will transition to alternative placements including foster family agencies, foster family homes, relative placements, Intensive Treatment FC placements or short-term residential treatment centers.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Continuum of Care Reform*

KEY DATA/ASSUMPTIONS (CONTINUED):

Assistance Placements (continued)

- All FC group home cases in Rate Classification Levels 1-9 will be impacted in this component. Fifty percent will be placed in a foster family agency, 30 percent will be placed in an Intensive Treatment FC Level III placement, 10 percent will be placed in a foster family home and 10 percent will be placed in a relative placement.
- All FC group home cases in Rate Classification Levels 10-12 will be impacted in this component. Fifty 50 percent of CWS cases and 30 percent of probation cases will be placed an Intensive Treatment FC Level I placement. Some of the cases that are assumed to be shifting to Intensive Treatment FC Level I rate may be placed in relative homes.
- The remaining cases in group home Rate Classification Levels 10-12 and all cases in a group home Rate Classification Level 14 will be placed in a short-term residential treatment center.
- The FC youth in CWS placements will phase out of group homes over 24 months and FC youth in probation placements will phase out of group homes over 36 months.
- The FC youth in CWS placements represent 64.1 percent of the group home caseload and probation placements represent 35.9 percent of the group home caseload, based on FC placement data from CWS/CMS between April 1, 2015 through June 30, 2015.

Foster Family Agency – Social Worker Rate Increase

- This component implemented on July 1, 2015.
- The social worker component of the foster family agency rate received an increase of 15 percent.
- The cost of the social worker increase is $7.3 million total funds in FY 2015-16 and $7.6 million total funds in FY 2016-17.

Accreditation

- This component implements July 1, 2016.
- All short-term residential treatment centers and foster family agency programs will be accredited by a national accreditation body selected by CDSS.
- Fifty percent of the accreditation costs will be funded with GF for up to two years.
- The cost of accreditation is $2.8 million total funds in FY 2016-17.

Contracts and Automation

- This component implements July 1, 2016.
- The contract cost to develop provider performance measures is $0.3 million total funds in FY 2016-17.
- A one-time automation system change request to the CWS/CMS is required and will cost $0.5 million total funds in FY 2016-17.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Continuum of Care Reform*

KEY DATA/ASSUMPTIONS (CONTINUED):

Child and Family Teams

- This component implements January 1, 2017.
- All placing agencies will utilize tools with child and family teams to assess the child and family's needs and to match a child to the most appropriate placement setting.
- Additional funds will supplement previously realigned funding for participatory case planning activities included in 2011 Realignment.
- The CWDs will receive $12.9 million total funds and probation departments will receive $1.5 million total funds in FY 2016-17 to complete child and family team activities.

Second Level Administration Review

- This component implements January 1, 2017.
- All cases placed in a short-term residential treatment center will require a placement review at intervals no greater than six months and require county deputy director approval for placements exceeding six months.
- The CWDs and probation departments will each receive $18,000 in FY 2016-17 to complete placement reviews.

Case Planning Assessment and Training

- This component implements July 1, 2016.
- Placing agencies will utilize information technology tools with common domains and unlimited users and clients.
- The case planning assessment tool subscription fee is $3.5 million total funds in FY 2016-17.
- The CWDs will receive $0.1 million total funds and probation departments will receive $3.0 million total funds in FY 2016-17 to train social workers and probation officers.

Resource Family Training, Recruitment, Retention and Support

- This component implemented January 1, 2016.
- In FY 2015-16, funding for resource family training, recruitment, retention and support is $2.7 million GF for CWDs and probation departments.
- For FY 2015-16, an additional $14.5 million GF was appropriated by the Legislature for CWDs to address specific needs and challenges in recruiting, retaining and supporting foster parents.
- In FY 2016-17, funding will be provided to strengthen county foster parent recruitment and support coordinators, to increase foster parent support and training, to supplement funding for foster caregivers and to provide a supplemental rate for emergency placement foster homes.
- In FY 2016-17, CWDs will receive $17.2 million GF and probation departments will receive $15.0 million GF.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Continuum of Care Reform*

KEY DATA/ASSUMPTIONS (CONTINUED):

Resource Family Approval

- Twelve counties will implement on July 1, 2016: Butte, Kings, Madera, Monterey, Orange, San Francisco, San Luis Obispo, Santa Barbara, Santa Clara, Stanislaus, Ventura and Yolo Counties.
- The remaining 46 counties will implement on January 1, 2017.
- Resource Family Approvals will replace existing processes. Savings of $19.1 million total funds in FY 2016-17 are generated from the elimination of the following duplicative processes:
    - Social workers will no longer need to perform relative and non-relative extended family member home approvals.
    - Social workers will no longer need to complete activities associated with finding an alternative placement for relative cases and foster family home cases.
    - Placements will become more stable, eliminating secondary placements for relative cases and foster family home cases.
    - County adoptions workers will no longer need to work on adoption home approvals and denied applications.
    - Background checks for adoption home approvals and denied applications will not be required.
    - County licensing program analysts will no longer need to work on approved or denied county licenses.
- After savings, costs of $16.2 million total funds in FY 2016-17 are required for the creation of new activities and increasing workload for current activities.
    - A county social worker will need to approve a resource family, complete resource family re-approvals and perform grievance reviews for denied resource families.

Percent of Eligible Costs

- The percent of federally eligible costs is 69 percent in FY 2015-16 and 68 percent in FY 2016-17 for the 49-county estimate.
- For contract costs, the percent of federally eligible costs is 66 percent in FY 2015-16 and FY 2016-17 for the 58-county estimate.

METHODOLOGY:

- Assistance placement savings are calculated by multiplying the decrease in placement rates for group home cases that transition to a level of care with a lower rate.
- Assistance placement costs are calculated by multiplying the increase in placement rates for group home cases that transition to a short-term residential treatment center that receives a higher rate.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Continuum of Care Reform*

METHODOLOGY (CONTINUED):

- The total costs for CCR assistance are calculated by adding the assistance placement savings, the assistance placement costs and the costs for the social worker rate increase.
- The CCR administrative costs are calculated by summing the costs for accreditation, contracts and automation, child and family teams, second level administration review, case planning assessment and training, resource family approval and resource family training, recruitment, retention and support.

FUNDING:

Federal funding for the social worker component of the foster family agency rate is provided by Title XX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for assistance. Federal funding for administrative costs is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 50 percent administration rate and 75 percent enhanced training rate for those cases and programs meeting eligibility criteria.

The responsibility for child welfare and protective services was realigned to the counties in 2011 as part of 2011 Public Safety Realignment. Pursuant to Proposition 30, legislation enacted after September 30, 2012, that has an overall effect of increasing the costs already borne by a local agency for programs or levels of service mandated by 2011 Realignment shall apply to local agencies only to the extent that the state provides annual funding for the cost increase.

While AB 403 imposes various new requirements and a higher level of service on local agencies that have an overall effect of increasing costs in the short-term, AB 403 will eventually reduce overall costs of foster care, which will allow counties to reinvest these savings in CWS. Over the long term, local agencies should realize net savings from significant reductions in FC assistance expenditures as group home placements will gradually transition over to alternative family-based settings. For 2016-17, funding for the remaining non-federal costs is 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no net change in the 49-county assistance costs. There is no net change in the Title IV-E California Well-Being Project assistance costs.

The increase in the 49-county and Title IV-E California Well-Being Project administrative costs reflects additional funding for resource family outreach, recruitment and support.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 increase for the 49-county assistance costs reflects a proportion of group home cases moving to short-term residential treatment centers. The FY 2016-17 decrease for the Title IV-E California Well-Being Project assistance costs reflects a proportion of group homes moving to foster family homes, foster family agencies or relative placements.

The FY 2016-17 increase for the 49-county and Title IV-E California Well-Being Project counties administrative costs reflects the additional funding required to implement the CCR.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Continuum of Care Reform*

EXPENDITURES:
(in 000s)

			FY 2015-16		
Item 101 – FC Grants	**Total**	**Federal**	**State**	**County**	**Reimb.**
CCR – Assistance	$3,889	$2,951	$938	$0	$0
Item 151 – CWS Administration					
CCR – Administration	13,483	4,634	8,849	0	0
Item 153 – Title IV-E Project					
CCR – Assistance	3,369	0	3,369	0	0
CCR – Administration	12,332	3,988	8,344	0	0
Total	$33,073	$11,573	$21,500	$0	$0

			FY 2016-17		
Item 101 – FC Grants	**Total**	**Federal**	**State**	**County**	**Reimb.**
CCR – Assistance	$6,758	$3,655	$3,103	$0	$0
Item 151 – CWS Administration					
CCR – Administration	43,092	15,955	27,137	0	0
Item 153 – Title IV-E Project					
CCR – Assistance	336	0	336	0	0
CCR – Administration	38,419	11,536	26,883	0	0
Total	$88,605	$31,146	$57,459	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

After 18 Supervised Independent Living Placement Infant Payment*

DESCRIPTION:

This premise reflects funding for non-minor dependent parents living in a supervised independent living placement who have developed a parenting support plan between themselves, an identified responsible adult and the CWD. Once the county determines the identified responsible adult meets specified criteria, then the non-minor dependent parent is eligible to receive a $200 per month increase to their supervised independent living placement payment. Previously, funding was provided to minor dependent parents, but funding is now expanded to include non-minor dependent parents to cover the increased care and supervision of the child.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 11465 and 16501.
- The FY 2015-16 administrative funding is maintained at $4,000 total funds.
- In FY 2015-16 and FY 2016-17 there will be 365 non-minor dependents in a supervised independent living placement that have an infant child.
- The eligible population will receive a $200 per month increase to their supervised independent living placement payment.
- It will take a social worker two hours to complete a written parenting support plan.
- The social worker cost per hour is $72.60.
- The percent of federally eligible cases is 66 percent in FY 2016-17 for the 58-county estimate.

METHODOLOGY:

The assistance costs are calculated by multiplying the total number of cases by the $200 payment increase. These costs are then multiplied by 12 to get the annualized cost. The administrative costs are calculated by multiplying the cases by the social worker time to complete the written parenting support plan and then multiplied by the hourly social worker cost.

FUNDING:

Federal funding is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for assistance and 50 percent for administrative costs for those cases and programs meeting federal eligibility criteria.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

After 18 Supervised Independent Living Placement Infant Payment*

FUNDING (CONTINUED):

The responsibility for child welfare and protective services was realigned to the counties in 2011 as part of 2011 Public Safety Realignment. Pursuant to Proposition 30, legislation enacted after September 30, 2012, that has the overall effect of increasing the costs incurred by a local agency for programs or levels of service mandated by 2011 Realignment, shall apply to local agencies only to the extent that the state provides annual funding for the cost increase. Local agencies are not obligated to provide programs or levels of service required by legislation above the level for which funding has been provided. Therefore, funding for the remaining nonfederal costs for all 58 counties is 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase in assistance is attributable to a revision in projected caseload. There is no change in administrative costs.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change in assistance costs. The FY 2016-17 increase in administrative costs is attributable to a revision in projected caseload..

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 101 – FC Grants	**Total**	**Federal**	**State**	**County**	**Reimb.**
After 18 Supervised Indep. Living Plcmt Infant Payment	$876	$287	$589	$0	$0
Item 151 – CWS Administration					
After 18 Supervised Indep. Living Plcmt Infant Payment	4	2	2	0	0
Total	$880	$289	$591	$0	$0

	FY 2016-17				
Item 101 – FC Grants	**Total**	**Federal**	**State**	**County**	**Reimb.**
After 18 Supervised Indep. Living Plcmt Infant Payment	$876	$287	$589	$0	$0
Item 151 – CWS Administration					
After 18 Supervised Indep. Living Plcmt Infant Payment	53	17	36	0	0
Total	$929	$304	$625	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Relative Foster Care Home Disallowance*

DESCRIPTION:

The OIG at the United States DHHS conducted an audit between October 1, 2000, and November 20, 2001, of Los Angeles County's relative approved FC cases to determine whether federal Title IV-E FC payments made to relative caregivers were claimed in accordance with Title 45 CFR section 1355.20. Federal regulations require states to apply uniform FC licensing standards for all foster family homes that claim FFP. The auditors found the state agency claimed FFP for relative approved homes utilizing a different type of FC licensing standard during the audit period. As a result, the OIG found the state out of compliance with federal regulations and indicated the state would need to refund the federal government the Title IV-E funds used for unallowable FC payments for all relative approved homes. The federal ACF sent a demand letter, which was received on July 18, 2014, requiring CDSS to repay the FFP claimed during the audit period.

IMPLEMENTATION DATE:

This disallowance implemented on July 7, 2014, the date stamp on the demand letter.

KEY DATA/ASSUMPTIONS:

- The audit reviewed a random sample of 100 cases out of 11,931 relative home placements in Los Angeles County between October 1, 2000, and November 20, 2001.
- The OIG extrapolated this sample of 100 cases to the entire population of court dependent children in relative homes in Los Angeles County to arrive at the disallowed amount.
- On July 18, 2014, CDSS received a disallowance letter from the federal ACF to refund $45.5 million.
- The disallowance was appealed on August 8, 2014.
- Penalties and/or interest on the disallowance are accruing daily and continue to accrue while the disallowance is being appealed.
- There is a one-time estimated payment of $50 million for the federal Title IV-E FC disallowance, which includes the payment of penalties and/or interest. These funds are set aside pending the outcome of the appeal process.
- CDSS is negotiating a resolution to the disallowance and final costs are likely to be lower than estimated.

METHODOLOGY:

The costs reflect the amount of the federal Title IV-E FC disallowance and estimated accrued interest charges.

FUNDING:

This premise is 100 percent GF.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Relative Foster Care Home Disallowance*

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects the one-time payment in FY 2015-16, if necessary.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 decrease reflects the one-time payment in FY 2015-16, if necessary.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – FC Net Payments	**Total**	**Federal**	**State**	**County**	**Reimb.**
Relative FC Home Disallowance**	$50,000	$0	$50,000	$0	$0

FY 2016-17

Item 101 – FC Net Payments	**Total**	**Federal**	**State**	**County**	**Reimb.**
Relative FC Home Disallowance**	$0	$0	$0	$0	$0

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**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Approved Relative Caregiver Funding Option Program*

DESCRIPTION:

This premise represents funding for the Approved Relative Caregiver Funding Option Program, which provides an augmentation to the rate paid for non-federally eligible FC children who are placed with relatives. Previously, children in FC who were not Title IV-E eligible and placed with relatives were only eligible to receive a CalWORKs payment, which is lower than the foster family home basic rate provided to foster parents and relatives of federally eligible children. This county optional program provides an additional amount above the CalWORKs grant to bring the total payment to relative caregivers up to the same amount as the foster family home rate paid for federally eligible children.

IMPLEMENTATION DATE:

This premise implemented on January 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11461.3.
- The Approved Relative Caregiver GF provides an additional amount above the CalWORKs payment to approved relative caregivers that equals the foster family home basic rate (dependent on the child's age).
- To be eligible for the program, all participants must apply for CalWORKs.
- For those children who qualify for CalWORKs, TANF/MOE funding will be used for the CalWORKs portion of the Approved Relative Caregiver rate. The remaining amount up to the foster family home basic rate will be funded with Approved Relative Caregiver GF.
- For those children who do not qualify for CalWORKs, Approved Relative Caregiver GF will cover the entire amount of the foster family home basic rate.
- The TANF/MOE share of the foster family home basic rate is based on the CalWORKs MAP levels for an AU size of one. For information regarding the CalWORKs MAP levels refer to the CalWORKs Grants premise.
- The Approved Relative Caregiver GF fund will be adjusted to fully fund the annual CNI COLA provided to the foster family home basic rate.
- Counties who opt-into the program will be required to provide the foster family home basic rate amount for all eligible cases for the duration of the county's participation in the program.
- Any Approved Relative Caregiver GF expenditures that exceed the county's established base funding (with annual growth) will be paid by the county. Appropriate adjustments will be made during the year-end closeout to redistribute county specific unspent funds to those counties who overmatch their allocation.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Approved Relative Caregiver Funding Option Program*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The FY 2015-16 base funding was finalized and published in CFL No. 15/16-24. The FY 2016-17 base funding is based on a projected CNI COLA of 2.96 percent and the base funding will be updated in the 2016 May Revision.
- State expenditures associated with all cases under the age of 18 are considered TANF/MOE countable.

METHODOLOGY:

The base funding level for the statewide Approved Relative Caregiver Funding Option Program is held to the 2014-15 statutory appropriation with a yearly CNI COLA adjustment.

FUNDING:

This optional payment is funded 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 increase for the statewide Approved Relative Caregiver Funding Option Program reflects the impact of the CNI COLA on the foster family home basic rate and unchanged CalWORKs MAP levels.

EXPENDITURES:

(in 000s)

			FY 2015-16		
Item 101 – FC Grants	**Total**	**Federal**	**State**	**County**	**Reimb.**
Approved Relative Caregiver Funding Option Program**	$30,108	$0	$30,108	$0	$0

			FY 2016-17		
Item 101 – FC Grants	**Total**	**Federal**	**State**	**County**	**Reimb.**
Approved Relative Caregiver Funding Option Program**	$31,831	$0	$31,831	$0	$0

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**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Refugee Programs*

DESCRIPTION:

This premise reflects the costs associated with the Refugee Resettlement program. The RCA program includes cash grants provided to refugees during their first eight months in the United States if they are not otherwise eligible for other categorical welfare programs. It also reflects administrative costs necessary to perform the administrative function for the RCA program. These include overhead, direct costs, salaries and benefits of eligibility workers and first line supervisors who determine eligibility and provide ongoing case management for the RCA program. In addition, this premise includes the Refugee Social Services, Unaccompanied Refugee Minors, Targeted Assistance to high refugee impacted counties and Refugee School Impact Grant premise items. Detailed descriptions of these premises can be found in the 2012 May Revision, Estimate Methodologies section.

IMPLEMENTATION DATE:

The RCA program implemented on March 17, 1980. The Refugee Social Services and Unaccompanied Refugee Minors programs implemented on October 1, 1981. The Targeted Assistance program implemented on October 1, 1983. The Refugee School Impact program implemented on August 15, 2005.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Title VIII of the United States Code section 1522 authorizes the federal government to provide grants to states to assist refugees who resettle in the United States. The W&IC sections 13275 through 13282 authorize CDSS to administer the funds provided under Title VIII of the United States Code. These sections also provide CDSS the authority to allocate federal Refugee Social Services and Targeted Assistance funds to the counties.

RCA – Grants

- Based on most recent actual expenditures from FY 2014-15, the average monthly grant for RCA recipients in FY 2015-16 and FY 2016-17 is estimated to be $309.39. The impact of the five percent MAP increases is included in this cost per case.
- The average monthly caseload is estimated at 1,815 cases for FY 2015-16 and FY 2016-17.

RCA – Administration

- Based on data from FY 2014-15, the average monthly administrative cost per RCA case is $104.64.
- The average monthly caseload is estimated at 1,815 cases for FY 2015-16 and FY 2016-17.

Refugee Social Services

- The federal grant includes $7,958,730 in total awarded funds in Refugee Social Services for FY 2015-16 and FY 2016-17.
- Of the $7,958,730 total funds, $919,984 will be distributed to qualifying refugees through the Wilson/Fish Alternative Project.
- The Refugee Social Services fund includes a 15 percent deduction in administrative funds for state operations cost in the amount of $1,005,812.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Refugee Programs*

KEY DATA/ASSUMPTIONS (CONTINUED):

Refugee Social Services (continued)

- The federal grant includes $147,051 in discretionary funding to serve elderly refugees in FY 2015-16 and FY 2016-17.
- A contract for $122,310 total funds in FY 2015-16 and FY 2016-17 is available to serve Cuban/Haitian Entrants Program.

Unaccompanied Refugee Minors

- A contract for $11,439,179 total funds in FY 2015-16 and $12,186,260 total funds in FY 2016-17 is available to serve Unaccompanied Refugee Minors.

Targeted Assistance

- The federal grant includes $4,559,940 total awarded funds in Targeted Assistance for FY 2015-16 and FY 2016-17.
- Of the $4,559,940 total funds, $564,943 will be distributed to qualifying refugees through the Wilson/Fish Alternative Project.
- The Targeted Assistance grant has a five percent deduction in administrative funds for state operations cost in the amount of $199,750.
- The federal grant includes $275,000 in Targeted Assistance Discretionary funds awarded in FFY 2014, which is budgeted for FY 2015-16 and FY 2016-17.
- The Targeted Assistance Discretionary grant has a five percent deduction in administrative funds for state operations cost in the amount of $13,750.

Refugee School Impact Grant

- The federal grant includes $1,000,000 to serve school-age refugee children and their families in FY 2015-16 and FY 2016-17.
- For this grant, $100,000 in administrative funds is deducted for state operations costs.

METHODOLOGY:

- The RCA average grant is multiplied by the estimated annual caseload.
- The monthly average cost per case for RCA administration is multiplied by the estimated annual caseload.
- The Refugee Social Services funding is based on the sum of the standard federal grant award (less the portion of the Wilson/Fish Alternative Project and state operations cost), the Cuban/Haitian Entrants and Elder Discretionary contracts.
- The Unaccompanied Refugee Minor funding is based on the contract amount from Office of Refugee Resettlement.
- The Targeted Assistance funding is based on the sum of federal grants (less the portion of the Wilson/Fish Alternative Project and state operations cost), and Targeted Assistance Discretionary (less state operations).

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Refugee Programs*

METHODOLOGY (CONTINUED):

- The Refugee School Impact Grant funding is based on a federal award less state operations cost.

FUNDING:

These programs are 100 percent federally funded.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in RCA grants reflects lower projected caseload. The increase in RCA administration is due to an increase in the projected cost per case which is slightly offset by decreased caseload. The increase in Refugee Social Services and Targeted Assistance is due to the updated contract amounts from the Office of Refugee Resettlement. There is no change in Unaccompanied Refugee Minors and Refugee School Impact Grant.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change in funding. However, in FY 2016-17, costs for Refugee Social Services, Unaccompanied Refugee Minor, Targeted Assistance and Refugee School Impact Grant are shifted from Item 151 to Item 101.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 101 – Refugee Programs	**Total**	**Federal**	**State**	**County**	**Reimb.**
Refugee Cash Assistance	$6,740	$6,740	$0	$0	$0
Item 141 – County Administration					
RCA – Administration	2,279	2,279	0	0	0
Item 151 – Special Programs					
Refugee Social Services	6,252	6,252	0	0	0
Unaccompanied Refugee Minors	11,439	11,439	0	0	0
Targeted Assistance	4,056	4,056	0	0	0
Refugee School Impact Grant	900	900	0	0	0
Total	$31,666	$31,666	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Refugee Programs*

EXPENDITURES (CONTINUED):

(in 000s)

	FY 2016-17				
Item 101 – Refugee Programs	**Total**	**Federal**	**State**	**County**	**Reimb.**
Refugee Cash Assistance	$6,740	$6,740	$0	$0	$0
Refugee Social Services	6,252	6,252	0	0	0
Unaccompanied Refugee Minors	12,186	12,186	0	0	0
Targeted Assistance	4,056	4,056	0	0	0
Refugee School Impact Grant	900	900	0	0	0
Item 141 – County Administration					
RCA – Administration	2,279	2,279	0	0	0
Total	$32,413	$32,413	$0	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Trafficking and Crime Victims Assistance Program (TCVAP)*

DESCRIPTION:

This premise represents the costs associated with extending social services and benefits to otherwise ineligible noncitizens who are victims of human trafficking, domestic violence and other serious crimes through the TCVAP. These individuals are eligible for state-funded services and benefits to the same extent as persons who are eligible under the federal Refugee Act of 1980. The state-funded services and benefits provided include cash and medical assistance for up to eight months, employment services, food assistance through CFAP, IHSS and CAPI.

Noncitizen trafficking and crime victims who have children and are eligible for CalWORKs will receive assistance through a state-funded CalWORKs grant. Eligible noncitizen trafficking and crime victims who do not have children will receive assistance through a state-funded TCVAP Cash Assistance grant.

The TCVAP requires victims of human trafficking to file for a T nonimmigrant visa with the appropriate federal agency as the first step to apply for federal status. This is necessary to demonstrate that they are taking steps to meet the conditions for federal eligibility in order to qualify for state public social services. To remain eligible for benefits and services, victims of trafficking must show evidence that they have applied for the T visa within one year from the date of application for state public social services. Victims of domestic violence and other serious crimes must have filed a formal application for or have received a U nonimmigrant visa to qualify for TCVAP benefits.

IMPLEMENTATION DATE:

This premise implemented on January 1, 2007.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 18945.
- No TCVAP recipients are currently receiving CAPI or IHSS benefits.

TCVAP CalWORKs

- The TCVAP recipients are subject to the same WTW requirements and exemptions as other CalWORKs participants, except those recipients who do not have work authorization and are not required to participate in job search.
- The benefits provided to the TCVAP CalWORKs recipients mirror CalWORKs benefits.
- Most TCVAP recipients do not have work authorization, and therefore will not receive earned income to offset their monthly grant. Services and child care are provided, as needed, for recipients participating in qualifying activities. The estimated monthly TCVAP CalWORKs caseload is 1,226 for FY 2015-16 and FY 2016-17 based on the most recent county survey.
- The cost to add an adult to a TCVAP CalWORKs AU is $135.
- There are 1.7 children per case and it is assumed that 15.5 percent of the cases are required to participate in WTW activities and are utilizing child care services, based on the stage one child care utilization rate as a portion of the total CalWORKs population.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Trafficking and Crime Victims Assistance Program (TCVAP)*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The child care cost per case is $747.56 in FY 2015-16 and $758.40 in FY 2016-17.
- The average number of children who will receive services per month is 323.
- Utilization rates and cost per case for CalWORKs transportation and ancillary services are based on actual CalWORKs data from FY 2014-15. The transportation utilization rate is 57.13 percent and $87.09 cost per case, and the ancillary utilization rate is 11.76 percent and $104.96 cost per case.
- The WTW case management utilization rate is 41.2 percent and the cost per case is $206.02.

TCVAP Cash Assistance

- All benefits and administrative costs for TCVAP Cash Assistance recipients mirror the services and administrative costs for RCA recipients. For more information on the caseload and cost per case assumptions, please refer to the RCA portion of the Refugee Programs premise.
- The estimated monthly caseload of TCVAP Cash Assistance cases is 23.
- The average TCVAP Cash Assistance monthly grant is $309.39.
- The administrative cost per case for a TCVAP Cash Assistance case is $104.64.
- The average monthly cost per case of TCVAP Employment Services is $28.43 per case.

TCVAP CFAP

- Approximately 90.5 percent of CalWORKs cases also receive food assistance based on the FFY 2013 RADEP sample data. Applying this ratio to the TCVAP monthly caseload yields 1,130 CFAP cases per month.
- The average benefit per person is $131.27.
- Of the monthly CFAP cases, 20 cases will require CFAP administrative funding.
- The administrative costs for CFAP are $25.01 per case per month.

METHODOLOGY:

TCVAP CalWORKs

- Grant costs are calculated by multiplying the average monthly number of cases by the cost to add an adult to a case by 12 months.
- Employment services costs include case management, transportation and ancillary costs. These costs are calculated by multiplying the average monthly number of cases utilizing the service by the cost per case by 12 months.
- Child care costs are calculated by multiplying the average monthly number of children by the cost per child by 12 months.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Trafficking and Crime Victims Assistance Program (TCVAP)*

METHODOLOGY (CONTINUED):

TCVAP Cash Assistance

- Grant costs are calculated by multiplying the average monthly number of cases by the cost per case by 12 months.
- Administrative costs are calculated by multiplying the average monthly number of cases by the administrative cost per case by 12 months.
- Employment Services costs are calculated by multiplying the average monthly number of cases by the services cost per case by 12 months.

TCVAP CFAP

- Benefit costs are calculated by multiplying the average monthly benefit per person by the projected monthly number of CFAP recipients by 12 months.
- On-going administrative costs are calculated by multiplying the average monthly number of cases requiring administrative funding by the average monthly cost per case by 12 months.

FUNDING:

The TCVAP CalWORKs grants are funded with 97.5 percent GF and 2.5 percent county. The TCVAP CalWORKs Employment Services, Administration, Child Care, TCVAP Cash Assistance and CFAP are funded with 100 percent GF. Under Title 45 of the CFR Part 263.2(b), these cases are not MOE eligible.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects higher projected caseload based on the FY 2014-15 county survey.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change in grants and administration costs. The increase in services cost reflects an increase in the child care cost per case.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Trafficking and Crime Victims Assistance Program (TCVAP)*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – TCVAP	**Total**	**Federal**	**State**	**County**	**Reimb.**
Grants	$3,850	$0	$3,754	$96	$0
Services	5,068	0	5,068	0	0
Administration	34	0	34	0	0
Total	$8,952	$0	$8,856	$96	$0

FY 2016-17

Item 101 – TCVAP	**Total**	**Federal**	**State**	**County**	**Reimb.**
Grants	$3,850	$0	$3,754	$96	$0
Services	5,110	0	5,110	0	0
Administration	34	0	34	0	0
Total	$8,994	$0	$8,898	$96	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

State Utility Assistance Subsidy (SUAS)*

DESCRIPTION:

This premise reflects increased costs to CalFresh and CFAP as a result of providing a utility benefit through SUAS. To the extent permitted by federal law, households receiving the SUAS benefit are entitled to receive the standard utility allowance when calculating CalFresh benefits. As a result of receiving the standard utility allowance, some households will experience an increase in food benefits and some previously ineligible households will become eligible for CalFresh or CFAP. The SUAS replaced LIHEAP beginning in November 2014. For information on LIHEAP, please see the 2015 May Revision Binder.

IMPLEMENTATION DATE:

The SUAS premise implemented on July 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 18901.2.
- A $20.01 SUAS benefit is applied to those CalFresh and CFAP households that experience an increase in benefits or become eligible for benefits as a result of using the standard utility allowance.
- The total average monthly CalFresh caseload is projected to be 2,146,174 in FY 2015-16 and 2,203,513 in FY 2016-17.
- Actual SUAS benefit issuance data is available for CalWIN from January through August 2015 and for C-IV from December 2014 through August 2015. Data for LEADER is only available for September 2015. Based on this data, SUAS benefits are issued to 34.23 percent of the CalFresh caseload.
- Non-assistance households receiving the SUAS benefit generate an EBT transaction fee in the month of issuance. These fees total $384,293 in FY 2015-16 and $374,662 in FY 2016-17 and are reflected in the EBT premise.
- Early implementation issues caused the SUAS benefit to be issued more than once to certain households. These issues have been resolved, but resulted in a one-time increase in benefit costs of approximately $1.22 million in FY 2015-16.

METHODOLOGY:

- The annual number of SUAS issuances is calculated by multiplying the average monthly caseload by the percent receiving SUAS.
- The SUAS benefit costs are calculated by multiplying the benefit amount by the number of issuances.
- In FY 2015-16 benefit costs are increased by the one-time costs of the duplicate issuances.

FUNDING:

The SUAS costs are 100 percent GF.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

State Utility Assistance Subsidy (SUAS)*

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects a change in methodology to use the actual issuance data. The increase also reflects implementation issues in July and August 2015.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects the correction of implementation issues slightly offset by projected caseload growth.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 - Other Assistance Payments	Total	Federal	State	County	Reimb.
SUAS Benefit	$15,917	$0	$15,917	$0	$0

FY 2016-17

Item 101 - Other Assistance Payments	Total	Federal	State	County	Reimb.
SUAS Benefit	$15,093	$0	$15,093	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Emergency Food for Families Fund*

DESCRIPTION:

This premise reflects expenditures from contributions designated on state income tax returns for the Emergency Food for Families Fund. This fund provides additional USDA commodities to a network of food banks for distribution to eligible individuals and households under TEFAP. These funds are provided to supplement, not supplant, existing program funds. This fund will sunset on January 1, 2019.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2000.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Revenue and Taxation Code sections 18851 through 18855.
- Funds available in FY 2015-16 are $492,000. These funds represent the actual contributions made in FY 2014-15 less administrative costs reported by the FTB and the SCO.
- Funds available in FY 2016-17 are $507,000. These funds represent the contributions projected to be made in FY 2015-16 less administrative costs reported by the FTB and the SCO.

METHODOLOGY:

The funding reflects the actual and projected contributions to the fund in the previous FY less the administrative costs to the fund incurred by the FTB and the SCO.

FUNDING:

This program is funded 100 percent by tax revenue collections for the Emergency Food for Families Fund.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects an adjustment to match actual contributions to the fund in FY 2014-15.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects projected contributions to be made during FY 2015-16 to be allocated in FY 2016-17.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Emergency Food for Families Fund*

EXPENDITURES:
(in 000s)

			FY 2015-16		
Item 101 - Food Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Emergency Food for Families Fund	$492	$0	$492	$0	$0

			FY 2016-17		
Item 101 - Food Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Emergency Food for Families Fund	$507	$0	$507	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

The Emergency Food Assistance Program (TEFAP)*

DESCRIPTION:

This premise reflects the administrative funds for TEFAP. The USDA provides funding specifically for administrative purposes and allows states to convert up to ten percent of their food allotment to administrative funds. The funding is used to support the USDA's Commodity Household Food Distribution Program. This premise reflects the move of TEFAP funds from state operations to the local assistance budget in order to expedite reimbursement and avoid delay in providing funds to food banks and California Foodlink.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2010.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: 7 United States Code section 2036(a).
- Funding in FY 2015-16 is based on the FFY 2015 federal TEFAP allocation, less the state operations cost.
- The FFY 2016 funding is not available at this time; therefore, the FY 2016-17 funding is also based on the FFY 2015 federal TEFAP allocation, less the state operations cost.
- The FFY 2015 federal funding for TEFAP administration is $6,543,072.
- As allowed under federal law, California has elected to convert ten percent of the USDA food allotment into administrative funds, which will provide an additional $4,331,055 for TEFAP administrative costs.
- The state operations cost for TEFAP is $600,000.

METHODOLOGY:

The total cost is the total administrative funding, plus the funding converted from food allotment to administration, less the state operations costs.

FUNDING:

This program is funded with 100 percent federal funds from the USDA.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

The Emergency Food Assistance Program (TEFAP)*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 101 – Food Assistance Programs	Total	Federal	State	County	Reimb.
TEFAP	$10,274	$10,274	$0	$0	$0

FY 2016-17

Item 101 – Food Assistance Programs	Total	Federal	State	County	Reimb.
TEFAP	$10,274	$10,274	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Drought Food Assistance Program*

DESCRIPTION:

This premise reflects funding for the temporary program developed in response to the Governor's Drought Emergency Declaration in January 2014. The Drought Food Assistance Program is designed to provide food assistance to drought-affected counties that suffer high levels of unemployment.

The Drought Food Assistance Program is provided through the California Emergency Foodlink. Foodlink is the non-profit contractor that purchases and distributes USDA food statewide. Foodlink will procure, pre-package and distribute Drought Food Assistance Program food boxes to food banks in those counties identified by the Governor's Drought Task Force as being the most severely affected by the drought. In order to receive this assistance, identified counties are required to provide a drought action plan to CDSS for approval.

IMPLEMENTATION DATE:

This premise implemented on March 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Section 22 of the Budget Act of 2013; Section 32 of the Budget Act of 2015.
- Low-income individuals in counties heavily dependent on agricultural employment will be adversely impacted by California's current drought. These individuals will need food assistance, thus placing demands on the Drought Food Assistance Program.
- Counties identified as being most severely impacted by the drought are Amador, Butte, Colusa, Fresno, Glenn, Imperial, Kern, Kings, Lake, Lassen, Madera, Merced, Modoc, Monterey, San Benito, San Joaquin, San Luis Obispo, Santa Barbara, Santa Cruz, Sierra, Siskiyou, Stanislaus, Sutter, Tehama, Tulare, Ventura, Yolo and Yuba, as well as the Coachella Valley in Riverside County.
- Funding is provided for the procurement, receiving, handling, packaging and shipping costs of food boxes. The funding is based on the anticipated demand for the Drought Food Assistance Program and current costs of activities and materials.
- In FY 2015-16, $13.95 million was provisionally allocated. Additionally, $137,901 of provisional funding was carried over to FY 2015-16 from FY 2014-15. These funds will be available until December 31, 2016.
- In FY 2016-17, $18.36 million is required to fund the program through June 2017.

METHODOLOGY:

Funding reflects anticipated needs for FY 2015-16 and FY 2016-17.

FUNDING:

The funding is 100 percent GF.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Drought Food Assistance Program*

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects unused provisional funding from FY 2014-15.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects the funding required to carry the program through FY 2016-17.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – Food Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Drought Food Assistance Program	$0	$0	$0	$0	$0
Drought Food Assistance Program – Provisional**	14,084	0	14,084	0	0
Total	$14,084	$0	$14,084	$0	$0

FY 2016-17

Item 101 – Food Assistance	**Total**	**Federal**	**State**	**County**	**Reimb.**
Drought Food Assistance Program	$18,360	$0	$18,360	$0	$0
Drought Food Assistance Program – Provisional**	0	0	0	0	0
Total	$18,360	$0	$18,360	$0	$0

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**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Work Incentive Nutritional Supplement (WINS)*

DESCRIPTION:

This premise reflects the costs of providing additional support to eligible working families in the form of a supplemental food assistance benefit. Working families who are receiving CalFresh or CFAP, but not receiving CalWORKs assistance, may be eligible for the WINS benefit if they meet certain thresholds of hours worked. Households may be eligible for one $10 WINS benefit per month, applied to the recipient's EBT card. The WINS benefit does not count as income in the CalFresh or CFAP benefit determination and is not subject to child support assignment. Counties must verify the number of hours recipients are working to provide the benefit. CalFresh families that receive the WINS benefit are counted in the TANF WPR calculation.

IMPLEMENTATION DATE:

The program began on June 1, 2014, with full implementation on July 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 15525.
- The projected ongoing monthly non-assistance CalFresh WINS caseload is approximately 192,610 and 208,750 cases in FY 2015-16 and FY 2016-17, respectively, based on a trend projection using actual EBT issuance data and caseload data reported on the WINS 2 – Monthly Caseload Report.
- The new monthly non-assistance CalFresh WINS caseload is approximately 21,820 and 23,400 in FY 2015-16 and FY 2016-17, respectively, based on actual caseload data reported on the WINS 2 – Monthly Caseload Report.
- The CFAP WINS caseload represents approximately 4.7 percent of the non-assistance CalFresh WINS caseload, based on actual data from the WINS 2 – Monthly Caseload Report.
- Each WINS case will receive one $10 WINS benefit per month.
- The average non-assistance CalFresh eligibility worker cost is $58.27 per hour.
- An additional five minutes of administrative time per participant is required during application intake for new WINS-eligible cases to discuss the requirements of the WINS program.
- An additional twenty minutes of administrative time per participant is required semiannually to fulfill the work verification, documentation requirements, data collection and federal sample requirements for the WINS program.
- Because all WINS cases are CalFresh or CFAP households, all other ongoing administrative costs are already reflected in CalFresh and CFAP administrative costs.
- Los Angeles County processes their county's closed WINS cases for the RADEP Sample. An additional $48,000 annually is provided to Los Angeles County for this purpose.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Work Incentive Nutritional Supplement (WINS)*

METHODOLOGY:

- Benefit costs for non-assistance CalFresh WINS cases is determined by multiplying the average monthly non-assistance CalFresh WINS caseload by the monthly benefit amount and then by 12 months.
- Administrative costs for newly eligible non-assistance CalFresh WINS cases is determined by multiplying the new WINS-eligible caseload by the cost for five minutes of administrative time for intake and then by 12 months.
- Ongoing administrative costs for non-assistance CalFresh WINS cases is determined by multiplying the average monthly non-assistance CalFresh WINS caseload by the cost for an additional 20 minutes of administrative time per SAR period.
- The total administrative cost for non-assistance CalFresh WINS is the sum of the administrative cost for newly eligible WINS cases and ongoing WINS cases plus the cost for Los Angeles County to process their closed WINS cases.
- The administrative cost for newly eligible and ongoing non-assistance CalFresh WINS cases is multiplied by the CFAP WINS to non-assistance CalFresh WINS caseload proportion to determine the CFAP WINS administrative costs.
- The benefit cost for WINS cases is multiplied by the CFAP WINS to non-assistance CalFresh WINS caseload proportion to determine the CFAP WINS benefit costs.

FUNDING:

The WINS benefit and administration costs for CalFresh cases are funded with GF countable toward the MOE requirement in the TANF program. The WINS benefit and administration costs for CFAP cases are funded with non-MOE GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase in the non-assistance CalFresh WINS cost reflects an updated WINS caseload projection and a higher proportion of newly eligible WINS cases, based on actual WINS data. The increase in the CFAP WINS cost also reflects a higher propotion of CFAP to non-assistance CalFresh WINS cases, based on actual WINS data.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects a projected WINS caseload increase.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Work Incentive Nutritional Supplement (WINS)*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – Other Assistance Payments	Total	Federal	State	County	Reimb.
WINS - Benefits	$23,113	$0	$23,113	$0	$0
WINS - Administration	8,802	0	8,802	0	0
WINS - CFAP Benefits	1,079	0	1,079	0	0
WINS - CFAP Administration	409	0	409	0	0
Total	$33,403	$0	$33,403	$0	$0

FY 2016-17

Item 101 – Other Assistance Payments	Total	Federal	State	County	Reimb.
WINS - Benefits	$25,050	$0	$25,050	$0	$0
WINS - Administration	9,521	0	9,521	0	0
WINS - CFAP Benefits	1,169	0	1,169	0	0
WINS - CFAP Administration	442	0	442	0	0
Total	$36,182	$0	$36,182	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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California Food Assistance Program (CFAP)*

DESCRIPTION:

This premise reflects the benefit and administrative costs associated with CFAP for eligible legal noncitizens over the age of 18 and under the age of 65. This group meets all federal food stamp eligibility criteria except for their immigration status. The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PL 104-193) made these legal noncitizens who entered the United States on or after August 22, 1996, ineligible for federal CalFresh benefits unless they were exempt under certain refugee categories. Federal CalFresh benefits for the ineligible legal noncitizens were terminated in August 1997.

Effective October 2002, the Food Stamp Reauthorization Act of 2002 restored federal eligibility for food assistance to legal noncitizens who are disabled, noncitizens who have been in the United States for five years or more and for all noncitizen children.

IMPLEMENTATION DATE:

This premise implemented on October 1, 2002.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 18930 through 18935.
- The number of public assistance CFAP recipients is based on the trend of actual caseload from October 2014 through June 2015. The number of non-assistance CFAP recipients is based on the trend of actual caseload from January 2015 through June 2015.
- The projected average monthly number of CFAP recipients is 48,676 in FY 2015-16 and 51,587 in FY 2016-17. The projected average monthly number of CFAP households is 20,846 in FY 2015-16 and 22,101 in FY 2016-17.
- The average monthly benefit amount per person was $131.43 for July 2014 through July 2015.
- The EBT processing fee charged by FNS is $314 per $1.0 million of benefits.
- The average monthly administrative cost per case is $25.01.
- Costs for the CFAP population within TCVAP are subtracted as they are reflected in the TCVAP premise. The administrative costs for this population are $6,002 and the benefit costs are $1.8 million in both FY 2015-16 and FY 2016-17.
- The caseload ratio is projected to be 13.54 percent public assistance and 86.46 percent non-assistance in FY 2015-16 and 12.88 percent public assistance and 87.12 percent non-assistance in FY 2016-17.

METHODOLOGY:

- Benefit costs are calculated by multiplying the projected average monthly number of recipients by the average monthly benefit cost per person, which is then multiplied by 12 months.
- Total benefit costs are increased to include the EBT processing fee charged by FNS.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

California Food Assistance Program (CFAP)*

METHODOLOGY (CONTINUED):

- Administrative costs are calculated by multiplying the average monthly administrative cost per case by the projected average monthly number of households, which is then multiplied by 12 months.
- Both benefit and administrative costs are reduced by the costs for the CFAP population within TCVAP.

FUNDING:

The expenditures are 100 percent GF. The public assistance portion of the costs is eligible to be counted towards the TANF MOE requirement.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in benefits reflects technical adjustments and slower caseload growth than previously projected. The decrease is partially offset by higher average monthly benefits.

The increase in administrative costs reflects a greater number of households with fewer persons than previously projected, partially offset by a technical adjustment.

REASON FOR YEAR-TO-YEAR CHANGE:

The increases in the benefit and administrative costs reflect a higher projected caseload.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 101 – CFAP Assistance	Total	Federal	State	County	Reimb.
CFAP Benefits	$75,011	$0	$75,011	$0	$0
Item 141 – CFAP Administration					
CFAP Administration	6,250	0	6,250	0	0

FY 2016-17

Item 101 – CFAP Assistance	Total	Federal	State	County	Reimb.
CFAP Benefits	$79,505	$0	$79,505	$0	$0
Item 141 – CFAP Administration					
CFAP Administration	6,627	0	6,627	0	0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Modified Categorical Eligibility*

DESCRIPTION:

This premise reflects increased costs to CalFresh and CFAP due to providing Modified Categorical Eligibility for all non-assistance households with gross income at or below 200 percent of the FPL. Modified Categorical Eligibility allows the exemption of all resources in the determination of eligibility for CalFresh for non-assistance households at or below the gross income test that meet all other CalFresh eligibility requirements. Modified Categorical Eligibility is determined for these households by receipt of the TANF-funded "Family Planning – PUB 275" brochure.

Previously, this premise was identified as Categorical Eligibility - Medi-Cal and reflected the AB 191 (Chapter 669, Statutes of 2013) provision that any non-assistance households including a member who receives Medi-Cal be conferred eligibility for CalFresh if the household's gross income does not exceed 200 percent of the FPL. The Budget Act of 2014 increased the gross income test from 130 percent to 200 percent of the FPL for all households, instead of only those that receive or are eligible to receive Medi-Cal.

IMPLEMENTATION DATE:

This premise implemented January 1, 2014. The expansion to non-Medi-Cal households with a gross income of up to 200 percent of the FPL implemented on July 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 18901.5.
- Increasing the gross income test to 200 percent of the FPL for all non-assistance households increases the number of households who enroll in CalFresh.
- Based on the 2014 American Community Survey, there are 4,108,734 individuals in California households that have a gross income between 130 percent and 200 percent of the FPL.
- Of those 4,108,734 individuals, 898,093 are aged and 552,370 are disabled. The aged and disabled individuals are excluded from this estimate, assuming they are already qualified from an earlier phase of Modified Categorical Eligibility implementation or are served by SSI and are therefore ineligible for CalFresh.
- Based on the 2014 American Community Survey, 25 percent of individuals with income between 130 percent and 200 percent FPL are over 185 percent of the FPL. It is assumed the majority of these individuals in households of three or more will be unable to meet the net income test for CalFresh and therefore are not reflected in this premise.
- Of the remaining population potentially eligible for CalFresh, it is assumed that after passing the net income test, the majority of households would only be eligible for a small benefit amount; therefore, a five percent participation rate is used.
- Based on a simulation conducted by Mathematica Policy Research, approximately 12 percent of the households up to 200 percent of the FPL are one-person households, 29 percent are two-person households and 59 percent are households with three or more individuals.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Modified Categorical Eligibility*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The newly eligible cases are anticipated to enroll in CalFresh with an even distribution over 12 months beginning March 2015. Cases that were anticipated to enroll March through June 2015 are assumed to be reflected in the CalFresh and CFAP basic trends and are excluded from this premise.
- The projected average monthly caseload enrolled in CalFresh for this premise is 26,032 for FY 2015-16 and 36,752 for FY 2016-17.
- The intake cost for an eligibility worker to process new non-assistance CalFresh households is $51.00 per case.
- Based on historical caseload attrition, after full implementation, it is estimated that approximately four percent of the caseload will leave monthly and four percent will enter monthly.
- No intake administration costs are provided for households that apply and are denied as it is assumed that those households would have applied and been denied for other reasons regardless of this policy.
- The cost for an eligibility worker to process quarterly reports for non-assistance CalFresh ongoing cases is $39.33 per case on a quarterly basis.
- For ongoing cases, it is assumed that 7.2 percent each month would require a mid-period change and that the cost to process a mid-period report is $28.23.
- The CFAP benefit cost is assumed to be one percent of the CalFresh benefit cost. Based on the higher gross income for these cases and the minimum benefit cost projections for FFY 2015, it is assumed that the CalFresh benefit amount is $16 for a one-person household, $16 for a two-person household and approximately $89 for a household of three or more individuals.

METHODOLOGY:

- The intake administration costs are calculated by multiplying the cases that enter CalFresh by the intake cost for an eligibility worker to process new non-assistance CalFresh cases.
- The CalFresh ongoing administration costs for quarterly reports are calculated by multiplying the ongoing cases that enrolled the last quarter by $39.33.
- The CalFresh ongoing administration costs for mid-period changes are calculated by multiplying the ongoing cases by the percent each would require a mid-period change and by the cost to process a mid-period report on a monthly basis.
- The total CalFresh administration costs reflect the intake eligibility, QR and mid-period change costs.
- The CFAP administration costs are calculated by multiplying CalFresh administration costs by one percent.
- The CFAP benefit costs are calculated by multiplying the cases enrolled in CalFresh by the appropriate benefit projection for their household size and then by one percent.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Modified Categorical Eligibility*

FUNDING:

The CalFresh administration costs are 50 percent SNAP, 35 percent GF and 15 percent county funds. The CFAP funding is 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects a larger number of people between 130 and 200 percent of FPL, based on 2014 census data.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects a full year of implementation.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 101 – CFAP Benefits	**Total**	**Federal**	**State**	**County**	**Reimb.**
Modified Categorical Eligibility	$131	$0	$131	$0	$0
Item 141 – CalFresh Administration					
Modified Categorical Eligibility	5,293	2,646	1,852	795	0
Item 141 – CFAP Administration					
Modified Categorical Eligibility	53	0	53	0	0
Total	$5,477	$2,646	$2,036	$795	$0

	FY 2016-17				
Item 101 – CFAP Benefits	**Total**	**Federal**	**State**	**County**	**Reimb.**
Modified Categorical Eligibility	$185	$0	$185	$0	$0
Item 141 – CalFresh Administration					
Modified Categorical Eligibility	7,578	3,789	2,652	1,137	0
Item 141 – CFAP Administration					
Modified Categorical Eligibility	76	0	76	0	0
Total	$7,839	$3,789	$2,913	$1,137	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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School Lunch Program*

DESCRIPTION:

This premise provides the option for local school districts or county offices of education to partner with local CalFresh county offices to identify potential new CalFresh applicants. Households that qualify for free or reduced-price school meals will be notified that they may also qualify for CalFresh benefits. With authorization from the applicant, the information included in the School Lunch Program application will be shared with the local CalFresh county office for consideration of eligibility. This is an optional county program.

IMPLEMENTATION DATE:

Implementation varies by local school districts within a county and is dependent on when an MOU is reached and Free and Reduced Price Meal application referrals are received by the CWD. School districts within Santa Clara implemented in 2013. Additional school districts in Alameda, Kern, Placer, Santa Clara and Santa Cruz counties implemented in 2014. Additional school districts have implemented or are anticipated to implement in Los Angeles and Santa Cruz counties in 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 18901.55.
- The caseload impact for school districts that implemented in 2013 and 2014 is reflected in the caseload trend and funded in the CalFresh Administration premise.
- The FY 2015-16 funding is maintained at $10.8 million total funds.
- Based on FY 2014-15 caseload data from CDE, there are approximately 19,103 children ages five through 17 that are eligible for free or reduced-price school meals in the school districts implementing in Los Angeles County and 4,436 children in Santa Cruz County.
- Based on the SSI SDX Management Report, 2.8 percent of children eligible for free or reduced-price school meals are recipients of SSI/SSP and are therefore ineligible for CalFresh.
- Based on the Pew Research Center data on the unauthorized immigrant population and the DOF caseload projections, 1.1 percent of children under the age of 17 are undocumented and therefore ineligible for CalFresh.
- Based on June 2015 MEDS data, approximately 44.1 percent of children eligible for free or reduced-price school meals are already recipients of CalFresh.
- Based on June 2015 MEDS data, 47.9 percent of children eligible for free or reduced-price school meals have a non-school-aged sibling (under five years of age) who would also be eligible for CalFresh benefits.
- Based on June 2015 MEDS data for CalFresh households with children, there are a total of three members per household, two of which are children.
- Based on the state's 2012 CalFresh working poor participation rate, 49.0 percent of eligible households will participate in CalFresh.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

School Lunch Program*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Based on the DFA 296 CalFresh Monthly Caseload Movement Statistical Reports for FY 2014-15, an average of 59.0 percent of CalFresh applicants are approved as eligible to receive benefits.
- The intake cost for an eligibility worker to process a non-assistance CalFresh case is $51.00 per case. This cost will occur one-time for new applicants.
- After initial enrollment, a four percent new applicant rate per month is assumed with an intake cost of $51.00 per case. This will not result in a net change in caseload as a four percent attrition rate is also assumed.
- Based on county time study data collected during 2005, 7.2 percent of the caseload is subject to mid-period reporting. The cost to process a mid-period report is $28.23.
- The cost for an eligibility worker to process non-assistance CalFresh and CFAP continuing cases is $13.11 per case per month.
- Based on the benefit cost expenditures for FY 2014-15, the households with children are estimated to have an average monthly CalFresh benefit amount of $425.17.
- The impact to CFAP is approximately one percent of the CalFresh impact.

METHODOLOGY:

- The children eligible for free or reduced-price school meals in the school districts implementing in a county are reduced by the percent of these children on SSI or already receiving CalFresh benefits. The remaining children are multiplied by the percent of children aged five through 17 with a sibling under five years of age to determine the total children aged zero through 17. The total children aged zero through 17 is reduced by the percent that are undocumented to determine the total number of children that will be referred to CalFresh through the school districts.
- The total number of children referred to CalFresh is divided by the number of children per CalFresh household to determine the total number of households that will be referred to CalFresh. These households are multiplied by the working poor participation rate to determine how many households will receive CalFresh for benefits and ongoing administration cost.
- The number of households that will receive CalFresh is divided the CalFresh approval rate to determine the number of CalFresh applications for CalFresh intake administration costs.
- Intake costs are determined by multiplying the number of applicants by the intake cost per applicant in the month of implementation for a school district. After the initial application, this caseload in multiplied by the attrition rate to determine the new intake administration costs for the remaining number of months implemented in a FY.
- Monthly administrative costs associated with processing mid-period changes are calculated by multiplying the ongoing cases by the percentage subject to mid-period reports and by the mid-period report cost.
- Quarterly administrative costs are calculated by multiplying the ongoing cases by the monthly eligibility worker cost for continuing cases.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

School Lunch Program*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The CFAP benefit costs are calculated by multiplying the caseload by the average monthly CalFresh benefit cost for a household with children, the months implemented in that district during the FY and then by one percent.
- The CFAP administration costs are calculated by multiplying the total CalFresh administrative cost by one percent.

FUNDING:

The CalFresh administrative costs are funded 50 percent SNAP, 35 percent GF and 15 percent county funds. The CFAP benefit and administrative costs are 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The decreases reflect the removal of costs for the caseload impact for school districts that implemented in 2013 and 2014 which are reflected in the caseload trend. Those cases are funded in the CalFresh Administration premise.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 101 – CFAP Benefits	**Total**	**Federal**	**State**	**County**	**Reimb.**
School Lunch Program	$2,110	$0	$2,110	$0	$0
Item 141 – CalFresh Administration					
School Lunch Program	8,561	4,281	2,996	1,284	0
Item 141 – CFAP Administration					
School Lunch Program	86	0	86	0	0
Total	$10,757	$4,281	$5,192	$1,284	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

School Lunch Program*

EXPENDITURES (CONTINUED):
(in 000s)

	FY 2016-17				
Item 101 – CFAP Benefits	**Total**	**Federal**	**State**	**County**	**Reimb.**
School Lunch Program	$575	$0	$575	$0	$0
Item 141 – CalFresh Administration					
School Lunch Program	2,517	1,258	881	378	0
Item 141 – CFAP Administration					
School Lunch Program	25	0	25	0	0
Total	$3,117	$1,258	$1,481	$378	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Student Eligibility*

DESCRIPTION:

Existing federal law provides that students who are enrolled in college or other institutions of higher education at least half time are not eligible for SNAP benefits unless they meet one of several specified exemptions, including participating in specified employment training programs. This premise expands CalFresh eligibility to students who participate in educational programs that could be a component of CalFresh Employment and Training. In consultation with representatives of various organizations, such as CCC and universities, the counties and other specified stakeholders, CDSS established a protocol to screen for all possible exemptions to student rules.

IMPLEMENTATION DATE:

This premise implemented on October 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 18901.11.
- Based on FY 2013-14 enrollment data from the CCC Chancellor's Office, 78,978 students participated in Extended Opportunity Programs and Services.
- It is anticipated that many of these students are in households already receiving CalWORKs and CalFresh, live-in households with income over the CalFresh income limits or are eligible for other student exemptions. Therefore, it is estimated that only five percent of Extended Opportunity Programs and Services students (3,949 students) will participate in CalFresh.
- An even distribution of eligible households are anticipated to enroll in CalFresh over a 12-month period, adding 329 cases per month. These eligible households are assumed to have one person per household.
- The intake cost for an eligibility worker to process a non-assistance CalFresh case is $51.00 per case.
- Based on historical caseload attrition, after full implementation, it is estimated that approximately four percent of the caseload will leave monthly and four percent will enter monthly.
- The cost for an eligibility worker to process quarterly reports for non-assistance CalFresh ongoing cases is $39.33 per case on a quarterly basis or $13.11 per case per month.
- For ongoing cases, it is assumed that 7.2 percent each month would require a mid-period change and that the cost to process a mid-period report is $28.23.
- Based on benefit cost expenditures for FY 2014-15, the projected monthly CalFresh benefit amount for non-assistance CalFresh households is $141.72 (assuming one person per household).
- The CFAP impact is calculated as one percent of the CalFresh impact.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Student Eligibility*

METHODOLOGY:

- Monthly intake costs are determined by multiplying the number of households entering CalFresh by the intake cost per case.
- Monthly administrative costs associated with processing mid-period changes are calculated by multiplying the ongoing cases by the percent of the caseload requiring a mid-period report and then by the cost to process a mid-period report.
- The CalFresh ongoing administration costs for QR are calculated by multiplying the ongoing cases by the monthly cost to process a quarterly report on a monthly basis.
- The total CalFresh administration costs reflect the intake eligibility, quarterly reporting, mid-period change costs.
- The CFAP administration impact is calculated as one percent of the CalFresh administration impact.
- The monthly CFAP benefit costs are calculated by multiplying the caseload by the average CalFresh benefit cost and then by one percent.

FUNDING:

Administrative costs for this CalFresh program are funded 50 percent SNAP and 50 percent GF. The CFAP benefit and administration costs are 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects growth in the actual number of Extended Opportunity Programs and Services students from FY 2012-13 to FY 2013-14.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects a full year of implementation.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 101 – CFAP Benefits	**Total**	**Federal**	**State**	**County**	**Reimb.**
Student Eligibility	$21	$0	$21	$0	$0
Item 141 – CalFresh Administration					
Student Eligibility	298	149	149	0	0
Item 141 – CFAP Administration					
Student Eligibility	3	0	3	0	0
Total	$322	$149	$173	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Student Eligibility*

EXPENDITURES (CONTINUED):
(in 000s)

	FY 2016-17				
Item 101 – CFAP Benefits	**Total**	**Federal**	**State**	**County**	**Reimb.**
Student Eligibility	$66	$0	$66	$0	$0
Item 141 – CalFresh Administration					
Student Eligibility	800	400	400	0	0
Item 141 – CFAP Administration					
Student Eligibility	8	0	8	0	0
Total	$874	$400	$474	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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School Supplies for Homeless Children Fund*

DESCRIPTION:

This premise reflects expenditures for the School Supplies for Homeless Children Fund derived from contributions on state income tax returns. This fund is to be dispersed to a nonprofit organization to provide school supplies and health related products to local education agencies for homeless children.

The fund first appeared on state income tax returns in calendar year 2013. Administrative responsibility was transferred from CDE to CDSS on September 16, 2014. It will remain a voluntary contribution fund for five years provided the minimum contribution amount is met. The fund must garner a minimum contribution of $255,500 in calendar year 2015.

IMPLEMENTATION DATE:

This premise implemented on September 16, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Revenue and Taxation Code sections 18897 and 18898.
- The FY 2015-16 funding represents contributions to the School Supplies for Homeless Children Fund (unspent and new contributions) from July 2014 through June 2015, less state operations costs and FTB and SCO fees.

METHODOLOGY:

The total costs reflect the amount appropriated for FY 2015-16 local assistance costs.

FUNDING:

This program is funded 100 percent from the School Supplies for Homeless Children Fund.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

School Supplies for Homeless Children Fund*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 101 – Other Assistance Payments	**Total**	**Federal**	**State**	**County**	**Reimb.**
School Supplies for Homeless Children Fund	$530	$0	$530	$0	$0

FY 2016-17

Item 101 – Other Assistance Payments	**Total**	**Federal**	**State**	**County**	**Reimb.**
School Supplies for Homeless Children Fund	$530	$0	$530	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Electronic Theft of Benefits*

DESCRIPTION:

This premise reflects costs for reimbursing CalWORKs, CAPI, TCVAP and RCA recipients whose cash benefits were lost due to electronic theft ("skimming"). Previously, statute only protected recipients from loss of electronic benefits after an EBT card or personal identification number was reported lost or stolen.

IMPLEMENTATION DATE:

This premise implemented on January 1, 2013.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 10072.
- The estimated cost of $10,000 for FY 2015-16 and FY 2016-17 is based on the electronic benefit theft claims submitted by recipients to counties for reimbursement between January 1, 2013 and February 28, 2015.

METHODOLOGY:

The total cost is based on actual reimbursement claims paid.

FUNDING:

These costs are funded with 100 percent GF and are not TANF/MOE eligible.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

		FY 2015-16			
Item 101 – Other Assistance Payments	**Total**	**Federal**	**State**	**County**	**Reimb.**
Electronic Theft of Benefits	$10	$0	$10	$0	$0

		FY 2016-17			
Item 101 – Other Assistance Payments	**Total**	**Federal**	**State**	**County**	**Reimb.**
Electronic Theft of Benefits	$10	$0	$10	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Emergency Fire Response*

DESCRIPTION:

This premise represents the costs associated with the emergency disaster response to the September 2015 Butte and Valley Fires. President Obama declared Lake County and Calaveras County Major Disaster areas on September 22 and September 24, 2015, respectively.

The declarations allowed the California Office of Emergency Services to instruct CDSS to activate the State Supplemental Grant Program. The State Supplemental Grant Program provides funds to assist people who have suffered damage from a declared disaster.

IMPLEMENTATION DATE:

This premise implemented on September 22, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Government Code sections 8625 through 8629 and W&IC sections 13600 and 13601.
- The State Supplemental Grant Program has a maximum grant amount of $10,000 per household. Smaller grants can also be awarded, but given the magnitude of the destruction it is assumed that households which qualify for a grant will receive the maximum amount.
- Approximately 2,100 homes were destroyed in the two fires.
- Fifty percent of the homes destroyed may be eligible for the State Supplemental Grant. The other 50 percent will have their loss covered completely by Federal Emergency Management Administration grants, homeowner's insurance and Small Business Administration disaster loans.
- Costs related to the Emergency Fire Response are displayed as a non-add line in the budget. To the extent the costs cannot be absorbed within existing budgeted resources, additional expenditure authority will be pursued through a Supplemental Appropriation Bill.

METHODOLOGY:

Cost for the State Supplement Grant Program is calculated by multiplying the number of destroyed homes by the percent of eligible households, and then by the maximum grant amount.

FUNDING:

The State Supplemental Grant Program is 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

This is a new premise.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Emergency Fire Response*

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects the expectation that the emergency disaster response will be complete in FY 2015-16.

EXPENDITURES:

(in 000s)

FY 2015-16

101 – Other Assistance Payments	Total	Federal	State	County	Reimb.
Emergency Fire Response**	$10,500	$0	$10,500	$0	$0

FY 2016-17

101 – Other Assistance Payments	Total	Federal	State	County	Reimb.
Emergency Fire Response**	$0	$0	$0	$0	$0

**This is a non-add line.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

SSI/SSP Basic Costs*

DESCRIPTION:

This premise reflects the basic costs for the SSI/SSP program. The SSI/SSP is a cash assistance program for low-income aged, blind and disabled persons. The SSI portion, authorized by Title XVI of the Social Security Act, replaced the prior federal/state matching grant program of adult assistance to the aged, blind and disabled in January 1974. California opted to supplement SSI payments, creating the SSP program. The SSA administers the SSI/SSP program at California's option. The maximum amount of aid is dependent on whether the recipient is aged, blind or disabled, their living arrangement, marital status and whether or not the recipient is a minor.

IMPLEMENTATION DATE:

The SSI/SSP program was implemented in 1974.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: PL 92-603.
- The SSA will continue to administer the program under Title XVI of the Social Security Act.
- Title XVI section 1611 of the Social Security Act defines the amount of SSI benefits an individual may be eligible to receive. State law defines the amount of SSP benefits.
- The basic cost per case for SSI and SSP estimates is developed from actual federal and state expenditures reported on the State Data Exchange and SSA 8700 reports, as well as caseload and federal and state expenditures reported on SSP 107 reports.
- The Title XIX medical facility and SSP-only caseload remains stable with significantly lower average grants than SSI/SSP recipients.
- The projected SSI/SSP caseloads are 307,125 for aged recipients, 15,548 for blind recipients and 818,364 for disabled recipients in FY 2015-16; 308,855 for aged recipients, 15,508 for blind recipients and 832,128 for disabled recipients in FY 2016-17.
- The estimated SSI grants before the CPI COLA impact are $416.4 for aged recipients, $542.7 for blind recipients and $571.1 for disabled recipients.
- The estimated SSP grants before the CNI COLA impact are $170.5 for aged recipients, $219.8 for blind recipients and $163.8 for disabled recipients.
- The projected SSP-only caseloads are 50,025 for aged recipients, 2,601 for blind recipients and 92,224 for disabled recipients in FY 2015-16; 48,785 for aged recipients, 2,480 for blind recipients and 88,255 for disabled recipients in FY 2016-17.
- The estimated SSP-only grants before the CNI COLA impact are $101.74 for aged recipients, $125.88 for blind recipients and $108.37 for disabled recipients.
- The projected caseloads of recipients in Title XIX medical facilities are 4,517 for aged recipients, 227 for blind recipients and 10,535 for disabled recipients in FY 2015-16; 4,456 for aged recipients, 224 for blind recipients and 10,392 for disabled recipients in FY 2016-17.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

SSI/SSP Basic Costs*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The estimated SSI grant for the recipients in Title XIX medical facilities are $54.73. The estimated SSP grant for the recipients in Title XIX medical facilities are $30.12.
- Based on August 2015 State Data Exchange, there are 1,064,199 individual cases (82.4 percent) and 226,951 couple cases (17.6 percent).
- The average monthly caseload is 1,301,167 in FY 2015-16 and 1,311,082 in FY 2016-17.

METHODOLOGY:

The SSI/SSP basic costs are estimated for five sub-groups: aged, blind, disabled, recipients in Title XIX medical facilities and those only receiving SSP. For each sub-group, SSI and/or SSP average grants are calculated based on historical data, and then multiplied by the projected caseload. The expenditures in each sub-group are summed to get total SSI and SSP expenditures.

FUNDING:

The SSI portion of the program is funded with 100 percent federal Title XVI funds and the SSP portion is funded with 100 percent GF. Costs for each component are computed separately.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects a lower caseload growth and a lower SSP grant than projected in appropriation offset by a higher SSI grant.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects an increase in caseload and a higher SSI grant slightly offset by a lower SSP grant absent COLA impact.

EXPENDITURES:

(in 000s)

			FY 2015-16		
Item 111 - SSI/SSP	**Total**	**Federal**	**State**	**County**	**Reimb.**
Basic Costs	$9,722,024	$7,253,951	$2,468,073	$0	$0

			FY 2016-17		
Item 111 - SSI/SSP	**Total**	**Federal**	**State**	**County**	**Reimb.**
Basic Costs	$9,848,138	$7,356,516	$2,491,622	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

SSP – 2017 COLA Impact*

DESCRIPTION:

This premise reflects the 2016-17 Governor's Budget Proposal to provide COLA to the SSI/SSP, CAPI and California Veterans Cash Benefit program recipients. A CNI of 2.96 percent will be applied to the SSP portion of the grant.

IMPLEMENTATION DATE:

The 2017 COLA of CNI will implement on January 1, 2017.

KEY DATA/ASSUMPTIONS:

- The estimated 2017 CNI COLA of 2.96 percent will be provided to the recipients.
- The projected existing SSP caseload that will receive the 2017 COLA is 1,296,011. The estimated increase to the SSP grants due to the COLA is $4.67.
- Due to the increase of the SSP grant, the new SSP caseload is projected to increase by 38,362. The administration cost for each new SSP case is $11.79.
- The projected CAPI caseload that will receive the 2017 COLA is 15,099. The estimated increase to the CAPI grants due to the COLA is $4.67.
- Due to the increase of the CAPI grant, the new CAPI caseload is projected to increase by 447. The administration cost for each new CAPI case is $61.62.
- The projected California Veterans Cash Benefit caseload that will receive the 2017 COLA is 375. The estimated increase to the California Veterans Cash Benefit grants due to the COLA is $4.65.

METHODOLOGY:

- For the 2017 COLA impact on the SSP, increased SSP average grants are multiplied by the total of new SSP cases and existing SSP cases to determine the increase in grant costs. Administration cost for the new SSP cases are calculated by multiplying the number of new SSP cases and the SSP administration cost.
- For the 2017 COLA impact on the CAPI program, increased CAPI average grants are multiplied by the total of new CAPI cases and existing CAPI cases to determine the increase in grant costs. Administration cost for the new CAPI cases are calculated by multiplying the number of new CAPI cases and the CAPI administration cost.
- For the 2017 COLA impact on the California Veterans Cash Benefit program, increased California Veterans Cash Benefit average grants are multiplied by the cases to determine the increase in costs for the period.

FUNDING:

The increase to the SSP grant will be funded with 100 percent GF.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

SSP – 2017 COLA Impact*

CURRENT YEAR CHANGE FROM APPROPRIATION:

This new premise implements in FY 2016-17.

REASON FOR YEAR-TO-YEAR CHANGE:

This is a new premise.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 111 – SSI/SSP	**Total**	**Federal**	**State**	**County**	**Reimb.**
SSP 2017 COLA (2.96 Percent CNI Estimated)	$0	$0	$0	$0	$0

	FY 2016-17				
Item 111 – SSI/SSP	**Total**	**Federal**	**State**	**County**	**Reimb.**
SSP 2017 COLA (2.96 Percent CNI Estimated)	$40,722	$0	$40,722	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

SSI/SSP – Federal COLA Impact*

DESCRIPTION:

This premise reflects the impact of the federal COLA as applied to the SSI portion of the grant for SSI/SSP program recipients.

IMPLEMENTATION DATE:

The 2016 federal COLA implemented on January 1, 2016. The 2017 federal COLA will implement on January 1, 2017.

KEY DATA/ASSUMPTIONS:

- Authorizing Statute: Title XVI of the Social Security Act section 1617.
- The SSA establishes maximum grant amounts, which are referred to as payment standards, for the SSI program.
- Each year, the SSA releases a preliminary estimate of the COLA that will apply to the following year's SSI grants and, later in the year, releases the final COLA based on the CPI.
- The estimated 2016 federal COLA is zero percent for calendar year 2016 based on the escalation estimates provided by the DOF.
- The estimated 2017 federal COLA with a CPI of 1.7 percent will be passed through to recipients on January 1, 2017.
- The projected caseloads to be impacted by the 2017 federal COLA are 362,095 for aged recipients, 18,212 for blind recipients and 930,775 for disabled recipients.
- The estimated increased grants due to the 1.7 percent federal COLA are $9.88 for aged recipients, $10.65 for blind recipients and $11.25 for disabled recipients.

METHODOLOGY:

New payment standards for SSI are implemented when there is a positive COLA based on the CPI. The updated caseload and average grants are then multiplied to determine changes in costs for the period applicable to the new standards.

FUNDING:

The SSI portion is funded with 100 percent federal Title XVI funds.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects a half-year impact of the 2017 federal COLA.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

SSI/SSP – Federal COLA Impact*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 111 – SSI/SSP	Total	Federal	State	County	Reimb.
2016 Federal COLA (0 Percent CPI)	$0	$0	$0	$0	$0
2017 Federal COLA (1.7 Percent CPI Estimated)	0	0	0	0	0

FY 2016-17

Item 111 – SSI/SSP	Total	Federal	State	County	Reimb.
2016 Federal COLA (0 Percent CPI)	$0	$0	$0	$0	$0
2017 Federal COLA (1.7 Percent CPI Estimated)	85,580	85,580	0	0	0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

State Supplementary Payment (SSP) Administration*

DESCRIPTION:

The SSA formerly administered the SSI/SSP program benefit payments without charge to the states. The Omnibus Budget Reconciliation Act of 1993 shifted costs for administration of SSP to the state, effective October 1, 1993. It also allowed additional service fees if the SSA provides services beyond the expected level, such as increasing or decreasing payment standards outside of the normal January 1st schedule.

IMPLEMENTATION DATE:

This premise was implemented on October 1, 1993.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: PL 105-33.
- The SSA will continue to administer this program under Title XVI of the Social Security Act.
- The federal Balanced Budget Act of 1997 (PL 105-33) amended existing federal statutes pertaining to administration fees for SSP payments. From FFY 1998 through 2002, administration fees increased from $5.00 to $8.50 per SSP payment. Increases after FFY 2002 are based on the CPI, or at a rate the Commissioner of Social Security determines is appropriate for the state.
- Effective October 1, 2015, the administration fee increased from $11.55 to $11.56 per payment determined by SSA. Effective October 1, 2016, the fee will increase to $11.76 per payment based on a projected increase of 1.7 percent.
- The projected average monthly number of SSP payments is 1,333,309 in FY 2015-16 and 1,343,309 in FY 2016-17.
- Administrative costs associated with the California Veterans Cash Benefit program are included in this premise. The projected average caseloads are 517 in FY 2015-16 and 375 in FY 2016-17.
- GF costs associated with the Non-Medical Out-Of-Home Care administration were previously included in the County Services Block Grant premise. Effective with the 2012-13 Governor's Budget, these funds have been included in this premise. The Non-Medical Out-Of-Home Care administration is estimated using average expenditures over the past three years.

METHODOLOGY:

- For SSP administration, the projected number of payments is multiplied by the administrative fee and then by 12 months
- The California Veterans Cash Benefit program administration is estimated by multiplying the projected caseload by the administrative fee and then by 12 months.
- The estimated costs are $354,000 in FY 2015-16 and $351,745 in FY 2016-17.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

State Supplementary Payment (SSP) Administration*

FUNDING:

The administration costs are 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects a slower caseload growth slightly offset by a higher administration fee per case.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects the increase in caseload and administration fee per case.

EXPENDITURES:

(in 000s)

			FY 2015-16		
Item 111 – SSI/SSP Expenditures	**Total**	**Federal**	**State**	**County**	**Reimb.**
SSP Administration	$185,343	$0	$185,343	$0	$0

			FY 2016-17		
Item 111 – SSI/SSP Expenditures	**Total**	**Federal**	**State**	**County**	**Reimb.**
SSP Administration	$189,126	$0	$189,126	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

California Veterans Cash Benefit Program*

DESCRIPTION:

This premise reflects the cost of providing benefits to World War II veterans who returned to the Republic of the Philippines, no longer have a place of residence in California and were receiving SSP benefits on December 14, 1999.

IMPLEMENTATION DATE:

This premise implemented on July 19, 2000.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 12400.
- The grant costs are the equivalent of the SSP benefits the veterans would receive under the SSI/SSP program.
- An average benefit payment of $157.18 per month will be paid to eligible recipients.
- The average monthly number of participating veterans is 517 in FY 2015-16 and 375 in FY 2016-17.
- The SSA administers the California Veterans Cash Benefit program in conjunction with benefits under Title VIII of the federal Social Security Act.
- Administrative costs associated with the California Veterans Cash Benefit program are reflected in the SSP Administration premise.

METHODOLOGY:

The estimated costs are calculated by multiplying the number of participating veterans by the benefit payment amount and months in the FY.

FUNDING:

This program is funded with 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects a slower caseload decline than projected in 2015-16 Appropriation, partially offset by a lower average grant.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects a lower projected average monthly caseload.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

California Veterans Cash Benefit Program*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 111 - SSI/SSP	Total	Federal	State	County	Reimb.
California Veterans Cash Benefit Program	$976	$0	$976	$0	$0

FY 2016-17

Item 111 - SSI/SSP	Total	Federal	State	County	Reimb.
California Veterans Cash Benefit Program	$707	$0	$707	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Cash Assistance Program for Immigrants (CAPI)*

DESCRIPTION:

This premise reflects the costs associated with providing benefits to aged, blind and disabled legal immigrants under CAPI. This premise includes both grant and administrative costs.

The Base CAPI recipients include immigrants who entered the United States prior to August 22, 1996 and are not eligible for SSI/SSP benefits solely due to their immigration status. It also includes those who entered the United States on or after August 22, 1996 but meet special sponsor restrictions (have a sponsor who is disabled, deceased or abusive).

The Extended CAPI recipients include immigrants who entered the United States on or after August 22, 1996, who do not have a sponsor or have a sponsor who does not meet the sponsor restrictions of the base program.

IMPLEMENTATION DATE:

This premise implemented on October 1, 1998.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 18937 through 18944.
- Under state law, the CAPI program is governed by the same federal and state regulations which govern the SSI/SSP program.
- State law also established that benefits paid under CAPI are equivalent to benefits provided under the SSI/SSP program, except that the monthly grant is reduced by $10 per individual and $20 per couple.
- The average monthly caseload for Base CAPI is 1,121 for FY 2015-16 and 1,145 for FY 2016-17.
- The average monthly caseload for Extended CAPI is 13,173 for FY 2015-16 and 13,954 for FY 2016-17.
- The average grant for Base CAPI is $726.48 from June 2015 to December 2016 and $737.34 beginning January 2017.
- The average grant for Extended CAPI is $767.03 from June 2015 to December 2016 and $777.89 beginning January 2017.
- The average monthly administrative cost per case for FY 2015-16 and FY 2016-17 is $61.62.
- The average grants for both Base and Extended CAPI cases are impacted by the federal COLAs.

METHODOLOGY:

The Base CAPI grant costs are estimated by multiplying the projected monthly Base CAPI caseload by the Base CAPI average grant and administration cost per case. The Extended CAPI grant costs are estimated by multiplying the Extended CAPI caseload by the Extended CAPI average grant and administrative cost per case.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Cash Assistance Program for Immigrants (CAPI)*

FUNDING:

The program is funded with 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase in both Base and Extended CAPI costs reflects higher caseloads and higher average grants, which is partially offset by a decrease in the administrative cost per case.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase in both Base and Extended CAPI costs reflects higher caseloads and higher average grants.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – SSI/SSP	**Total**	**Federal**	**State**	**County**	**Reimb.**
Base CAPI	$10,600	$0	$10,600	$0	$0
Extended CAPI	130,990	0	130,990	0	0
Total	$141,590	$0	$141,590	$0	$0

FY 2016-17

Item 111 – SSI/SSP	**Total**	**Federal**	**State**	**County**	**Reimb.**
Base CAPI	$10,903	$0	$10,903	$0	$0
Extended CAPI	139,676	0	139,676	0	0
Total	$150,579	$0	$150,579	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

IHSS County Maintenance Of Effort (MOE)*

DESCRIPTION:

This premise establishes a county MOE level for the county share of IHSS service and administrative costs (including Public Authority Administration costs) in lieu of counties paying a fixed percentage share of each dollar expended. Total county service and administrative costs that exceed the county MOE will be shifted to GF.

For 43 counties, the county MOE levels for both services and administration are based on county expenditures for FY 2011-12, adjustments for any county negotiated wage and health benefits increases and the application of a 3.5 percent annual inflation factor starting July 1, 2014. For 15 selected small counties, the county MOE is based on either the FY 2011-12 county allocations or county expenditures, whichever is lower. In addition, this includes adjustments for any county negotiated wage and health benefit increases and the application of the 3.5 percent annual inflation factor.

IMPLEMENTATION DATE:

This premise was implemented on July 1, 2012.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 12306.15.
- The FY 2011-12 county MOE base, published in CFL No.14/15-44, was $925,783,339. An adjustment to base expenditures for Stanislaus County resulted in a revised county MOE base of $925,700,082. The county MOE base includes savings due to CFCO.
- Per W&IC section 12306.15(c)(1), beginning July 1, 2014, the county MOE base increases annually by the 3.5 percent inflation factor.
- Annualized and estimated adjustments reflect approved individual provider wage, health benefit and contract mode rates.
- Annualized adjustments in counties in FY 2012-13 increased the county MOE by $19,596,183. Annualized adjustments in FY 2013-14 increased the county MOE by $8,816,866.
- For FY 2014-15, the county MOE included the final FY 2011-12 county MOE base, annualized adjustments for FY 2012-13 increases, annualized adjustments for FY 2013-14 increases, a 3.5 percent inflation factor of $33,393,960, estimated adjustments for FY 2014-15 increases of $11,675,995 and annualized adjustments for FY 2014-15 of $18,644,027.
- For FY 2015-16, the county MOE includes the final FY 2011-12 county MOE base, annualized adjustments for FY 2012-13 increases, annualized adjustments for FY 2013-14, annualized adjustments for FY 2014-15, a 3.5 percent inflation factor of $35,238,128 and an estimated adjustments for FY 2015-16 of $1,328,833.
- For FY 2016-17, the county MOE includes a 3.5 percent inflation factor of $36,520,831 and an annualized adjustment for FY 2015-16 of $1,362,840.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

IHSS County Maintenance Of Effort (MOE)*

METHODOLOGY:

- The base county MOE level for IHSS services and administration was determined using FY 2011-12 actual county share expenditures based on the following sharing ratios:
  - For individual provider costs up to the maximum level of state participation of $12.10 per hour in combined wages and health benefits, 65 percent GF and 35 percent county for the non-federal share are applied. For costs above $12.10 per hour, 100 percent county funds are applied for the non-federal share.
  - For contract mode, counties are responsible for paying 100 percent of the non-federal share of any cost increase exceeding the Maximum Allowable Contract Rate.
  - The CFCO enhanced federal funding reduces non-federal expenditures. The county share of federally eligible costs was reduced based on the FY 2011-12 CFCO savings by county.
- County adjustments for both individual provider wage, health benefit and contract mode rates are calculated by multiplying the increases by the FY 2011-12 service hours for the months effective in the current FY by the county share. The FY 2011-12 service hours by county are located in attachment II and attachment III of CFL No.14/15-44.
- For the FY following approved rate increases, the annualized cost of the adjustment will be added to the county MOE base.

FUNDING:

Funding for this premise is 100 percent county funds, displayed as a reimbursement.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The county MOE increase reflects contract mode rate adjustments beginning FY 2012-13 and individual provider's additional wage and health benefit adjustments for counties with rate changes between July 2015 and September 2015 and is slightly offset by Santa Clara County's health benefit rate adjustment.

REASON FOR YEAR-TO-YEAR CHANGE:

The county MOE increase reflects the annual 3.5 percent inflation factor and the annualized adjustment cost of approved county wage and health benefit increases in FY 2015-16.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

IHSS County Maintenance Of Effort (MOE)*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS	Total	Federal	State	County	Reimb.
IHSS County MOE	$0	$0	-$1,043,417	$0	$1,043,417

FY 2016-17

Item 111 – IHSS	Total	Federal	State	County	Reimb.
IHSS County MOE	$0	$0	-$1,079,973	$0	$1,079,973

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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IHSS Basic Services*

DESCRIPTION:

This premise reflects the basic service costs for the IHSS program. The IHSS program enables eligible individuals to receive in-home services that allow them to remain safely in their own homes as an alternative to out-of-home care. Eligible recipients are aged, blind or disabled individuals who receive public assistance or have low incomes. Services include: domestic and related services (e.g., housework, meal preparation, laundry, shopping); personal services; accompaniment to medical appointments; protective supervision for mentally-impaired recipients who may place themselves at risk for injury, hazard or accident; and paramedical services when directed by a physician.

There are four IHSS program components:

- The PCSP - Provides federally funded personal care services to recipients who are eligible for Medi-Cal, have a chronic disabling condition and have an assessed need for services to remain safely in their own home.
- The IHSS Plus Option - Provides federally funded services to recipients who have a chronic disabling condition and have an assessed need for services to remain safely in their own home. These recipients do not qualify for PCSP because services are provided by a spouse or parent of a minor child, the recipient receives advance pay or the recipient receives a restaurant meal allowance.
- Residual - Provides non-federally funded program services to recipients who are not eligible for Medi-Cal, but meet the SSI/SSP income standards, are 65 years or older, blind or disabled and have an assessed need for services to remain safely at home.
- The CFCO - Provides federally funded services at an enhanced FMAP of 56 percent to those recipients who have a chronic disabling condition, have an assessed need for services in order to remain safely at home and are determined eligible for a nursing facility level of care. The federal CMS approved state plan amendment 13-007 effective July 1, 2013, updating eligibility language for compliance with the Social Security Act section 1915(k)(1) and 42 CFR section 441.510. Costs for the CFCO program are displayed separately in the tables.

There are three service delivery modes for IHSS: the individual provider mode, consisting of an individual provider hired by the recipient; the county contract mode, consisting of a county-contracted service provider who employs individuals to provide services to IHSS recipients; and the welfare staff/homemaker mode, which utilizes county employees to provide services to recipients.

This premise also includes claims bill, workers' compensation benefits and contract costs to administer, monitor and issue payments for compensation claims. York Risk Services Group administers the workers' compensation insurance for providers under the individual provider mode. The DGS manages and supervises the contract and monitors high-cost cases ($50,000 and over on a quarterly basis). The SCO issues the payments for compensation claims.

IMPLEMENTATION DATE:

This premise implemented on April 1, 1993.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

IHSS Basic Services*

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 12300-12314, 14132.95 and 14132.956.
- Average cases per month are projected to be 463,537 in FY 2015-16 and 489,775 in FY 2016-17. Federally eligible cases account for 98.78 percent of the total caseload and the remaining are residual cases with no FFP. The CFCO costs are displayed seperately on the CFCO line in the tables. The average provider cost per hour in individual provider mode for FY 2015-16 is $12.68 and for FY 2016-17 is $12.80.
- The weighted average monthly hours per case prior to reduction to service hours are 101.9 in both FY 2015-16 and FY 2016-17.
- The total share of cost paid by IHSS recipients in the individual provider mode of service is estimated at $24.8 million in FY 2015-16 and FY 2016-17.
- The restaurant meal allowance monthly grant is $62 per person and totals $0.25 million in FY 2015-16 and FY 2016-17.
- Total claims bill and workers' compensation cost, which includes the York Risk Services Group, DGS and SCO contracts, is assumed to be $92.2 million in FY 2015-16 and $94.5 million in FY 2016-17. In the FY 2015-16 $4.8 million and $2.6 million in FY 2016-17 of the total workers' compensation cost will be billed to DHCS for benefits covering Waiver for Personal Care Services providers.
- The cost for cases in the county contract mode and welfare staff/homemaker mode are $17.4 million in FY 2015-16 and FY 2016-17.
- The CFCO cases are displayed under the CFCO table line and represent 59 percent of federally eligible expenditures.
- All costs for recipients in the California Community Transitions Money Follows the Person Demonstration project are reflected in the California Community Transitions Money Follows the Person Rebalancing Demonstration premise.
- Under California Labor Code section 1182.12, the California minimum wage increased from $8.00 per hour to $9.00 per hour effective July 2014 followed by an increase to $10.00 per hour effective January 2016. In FY 2015-16, 29 counties will be impacted by the January 2016 increase.
- Due to implementation of the IHSS county MOE, all non-federal IHSS provider wage costs will be GF. The impact of the minimum wage increase is included in this premise and also displayed as a non-add budget line.

METHODOLOGY:

The estimated IHSS basic services cost for individual provider mode is computed on a county specific basis by multiplying the casemonths by average hours per case (prior to the reduction to service hours) and provider cost per hour. The share of cost paid by IHSS recipients is subtracted from the statewide total, and then the restaurant meal allowance costs and workers' compensation costs are added. Estimated costs for county contract mode and welfare staff/homemaker mode are added to compute the total IHSS basic service cost for all modes. Costs for CFCO cases are displayed separately on the CFCO table line.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

IHSS Basic Services*

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to the implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The net increase reflects an increase in hours per case and provider cost per hour.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects an increased caseload, hours per case and provider cost per hour.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS Services	Total	Federal	State	County	Reimb.
IHSS Basic – Services	$2,950,469	$0	$1,519,051	$0	$1,431,418
Community First Choice Option (CFCO)	4,231,157	0	1,861,709	0	2,369,448
Minimum Wage Impact**	71,209	0	32,970	0	38,239
Total	$7,181,626	$0	$3,380,760	$0	$3,800,866

FY 2016-17

Item 111 – IHSS Services	Total	Federal	State	County	Reimb.
IHSS Basic – Services	$3,147,436	$0	$1,620,460	$0	$1,526,976
Community First Choice Option (CFCO)	4,513,214	0	1,985,814	0	2,527,400
Minimum Wage Impact**	150,480	0	69,672	0	80,808
Total	$7,660,650	$0	$3,606,274	$0	$4,054,376

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**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Reduction in Service Hours*

DESCRIPTION:

This premise reflects the savings and administrative costs associated with reducing IHSS service hours for all recipients in accordance with the IHSS Settlement Agreement, filed March 28, 2013. This settlement resolves two class-action lawsuits: *Oster v. Lightbourne* and *Dominguez v. Schwarzenegger*. Premises previously associated with these lawsuits include the Cost Containment premise *(Oster I)*, 20 Percent Trigger Reduction *(Oster II)* and Reduce Wages to $9.50 and $0.60 in Health Benefits *(Dominguez)*.

Initially a 3.6 percent across-the-board reduction to IHSS service hours was implemented February 1, 2011, and sunsetted on June 30, 2013. As a settlement to the above lawsuits, an eight percent reduction to authorized service hours was implemented on July 1, 2013. This reduction is lowered to seven percent effective July 1, 2014. Due to the 3.6 percent reduction to authorized hours from February 1, 2011, through June 30, 2013, this premise reduces service hours by an additional 3.4 percent in FY 2014-15 and subsequent years.

IMPLEMENTATION DATE:

This premise implemented July 1, 2013.

KEY DATA/ASSUMPTIONS:

- Authorizing Statute: W&IC section 12301.02.
- There is a seven percent reduction to projected IHSS service hours.
- The net impact of the reduction to service hours after appeals based on changes in circumstances will be 6.47 percent.
- Monthly service hours prior to reductions are 47.2 million hours in FY 2015-16 and 49.9 million hours in FY 2016-17.
- The average provider cost per hour is $12.68 in FY 2015-16 and $12.80 in FY 2016-17.
- In FY 2015-16 there are county administrative costs associated with appeals base on changes in recipient circumstances. For FY 2016-17 it is assumed that there are no administration activities.
- The social worker unit cost per hour is $60.55.
- Social workers will need 104,296 hours in FY 2015-16 and 110,199 hours in FY 2016-17 for the combined reassessments and follow-up activities as requested by the recipients impacted by the reduction.

METHODOLOGY:

The savings from services are calculated by multiplying the total hours by the net reduction by provider cost per hour. Administrative costs are calculated by multiplying the social worker cost by the amount of social worker time required to perform reassessments and follow-up activities.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Reduction in Service Hours*

FUNDING:

Savings from services are shared based on FFP eligibility criteria. Federal savings for cases eligible for CFCO funding will have FFP of 56 percent. All other cases will have FFP of 50 percent. Non-federal savings are 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The FY 2015-16 increase in savings from service hours is due to higher average hours per case prior to the reduction in service hours and higher provider cost per hour. The FY 2015-16 decrease in administration costs is due to a lower caseload than previously projected.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase in savings is due to higher provider cost per hour and higher caseload.
The decrease in administration costs is due to the assumption that there are no administration activities in FY 2016-17.

EXPENDITURES:

(in 000s)

			FY 2015-16		
Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Reduction in Service Hours	-$464,842	$0	-$218,872	$0	-$245,970
Item 111 – IHSS Administration					
Reduction in Service Hours – Administration	6,315	0	3,170	0	3,145
Total	-$458,527	$0	-$215,702	$0	-$242,825

			FY 2016-17		
Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Reduction in Service Hours	-$495,904	$0	-$233,498	$0	-$262,406
Item 111 – IHSS Administration					
Reduction in Service Hours – Administration	0	0	0	0	0
Total	-$495,904	$0	-$233,498	$0	-$262,406

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Restoration in Service Hours*

DESCRIPTION:

This premise reflects the cost of restoring the seven percent reduction to IHSS service hours implemented under W&IC 12301.02.

IMPLEMENTATION DATE:

This premise was implemented July 1, 2015.

KEY DATA/ASSUMPTIONS:

- The Reduction in Service Hours premise accounts for IHSS basic cost savings as a result of the statutory reduction. To restore service hours, costs of $464.8 million are included for FY 2015-16 and $495.9 million for FY 2016-17.
- The CCI premise assumes new cases associated with the CCI population received the reduction in service hours. The costs associated with restoring hours to this population are $5.1 million for FY 2015-16 and $5.5 million for FY 2016-17.
- The Caseload Impact of the ACA premise assumes new cases associated with the newly eligible ACA population also received the reduction in service hours. Costs associated with restoring hours to this population are $2.0 million for FY 2015-16 and $5.9 million for FY 2016-17.
- The FLSA Regulations, Overtime and Compliance premise accounts for hours under the assumption that the FY 2015-16 reduction in service hours remains in place. Costs associated with additional hours subject to overtime pay are $26.1 million for FY 2015-16.

METHODOLOGY:

The costs are calculated by offsetting the savings in the Reduction in Service Hours premise by the additional cost of restoring hours to new populations associated with CCI and ACA and the additional costs associated with the FLSA overtime.

FUNDING:

The Budget Act of 2015 temporarily restored the 7 percent reduction in full for FY 2015-16 using GF for all non-federal costs. For FY 2016-17 the non-federal share will be funded with Managed Care Organization (MCO) tax funds. Federal funds are provided by Title XIX of the Social Security Act. Costs are shared based on FFP eligibility criteria. Newly eligible ACA cases will have a FFP rate of 100 percent. Cases eligible for CFCO funds will have a FFP rate of 56 percent. All other cases will have a FFP rate of 50 percent. Non-federal costs are 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Restoration in Service Hours*

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase in total cost reflects a slower caseload growth offset by higher FLSA costs, higher average hours per case and higher provider cost per hour.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase in total costs reflects faster caseload growth, higher average hours per case and higher provider cost per hour.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Restoration in Service Hours	$498,104	$0	$233,279	$0	$264,825

FY 2016-17

Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Restoration in Service Hours	$507,329	$0	$236,210	$0	$271,119

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

IHSS Caseload Impact of the Affordable Care Act*

DESCRIPTION:

This premise reflects the costs associated with the IHSS program from an increase in the IHSS population as a result of implementing the Patient Protection and ACA, PL 111-148.

Effective January 2014, the ACA provides an enhanced FMAP rate for services to newly eligible individuals between 19 and 65 years of age whose household income does not exceed 138 percent of the FPL. Due to the changes in Medi-Cal eligibility resulting from the ACA, newly eligible adults, some of which were previously covered under other programs such as the Low Income Health Program, are transitioning into Medi-Cal and seeking IHSS services.

The DHCS' ACA optional expansion aid codes identify the newly eligible individuals who utilize IHSS services. These cases are eligible for an enhanced FMAP of 100 percent through June 2016.

Increases to the IHSS caseload for new recipients qualified under previous eligibility requirements are not accounted for in this premise. In addition to newly eligible individuals in the optional expansion, it is anticipated that unidentified Medi-Cal eligible individuals will apply for IHSS services due to outreach, advertisements and community activities to recruit the expansion population.

IMPLEMENTATION DATE:

This premise implemented January 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: ABX1 1 (Chapter 3, First Extraordinary Session, Statutes of 2013) and SBX1 1 (Chapter 4, First Extraordinary Session, Statutes of 2013) changed the following W&IC sections as related to the IHSS program: 14005.30, 14005.37, 14005.60, 14005.61, 14005.64, 14005.65, 14005.66, 14005.67, 14005.68, 14011.66, 14014.5, 14016.5, 14057, 14102.5, 14103, 14132, 14132.02 and 15926.
- There are 4,258 existing ACA caseloads at the start of FY 2015-16, with a projected 403 new IHSS cases on board each month eligible for enhanced FMAP. The average monthly ACA caseload is projected to be 6,879 in FY 2015-16 and 11,717 in FY 2016-17.
- Newly eligible adults between 19 and 65 years of age use an average of 73.4 IHSS hours per case per month.
- The provider cost per hour is $12.68 in FY 2015-16 and $12.80 in FY 2016-17.
- The social worker unit cost is $60.55 per hour.
- The standard social worker hours per case per year are 11.58 hours.
- The Supportive Individual Provider cost per case is $20.99 per case per year.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

IHSS Caseload Impact of the Affordable Care Act*

METHODOLOGY:

Service costs are calculated by adding the cost of new and existing ACA caseloads. New ACA caseloads are multiplied by the average hours per case and by the provider cost per hour on a monthly basis. Existing ACA caseloads, which are already identified in the IHSS Basic Services, is multiplied by the average hours per case by the provider cost per hour and the enhanced FMAP of 50 percent on a monthly basis.

Administrative costs are calculated by multiplying the increase to IHSS caseload by the social worker hours per case per year and by the social worker unit cost. The Supportive Individual Provider cost is computed by multiplying the increased IHSS caseload by the Supportive Individual Provider cost per case per year. For existing ACA cases budgeted under the basic caseload, no administrative costs are reflected in this premise.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, based on FFP eligibility criteria. Service costs receive a FMAP of 100 percent for FY 2015-16 and an average FMAP of 97.5 percent for FY 2016-17. Administration costs receive a FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in service and administrative cost is due to higher existing ACA cases going into FY 2015-16.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase in FY 2016-17 service and administrative costs reflect the higher ACA caseload and cost per hour. Starting FY 2016-17, GF costs will exist as the enhanced FMAP reduces from 100 percent to an average of 97.5 percent.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Caseload Impact of the ACA – Services	$53,021	$0	$0	$0	$53,021
Item 111 – IHSS Administration					
Caseload Impact of the ACA – Administration	1,892	0	950	0	942
Total	$54,913	$0	$950	$0	$53,963

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

IHSS Caseload Impact of the Affordable Care Act*

EXPENDITURES (CONTINUED):

(in 000s)

	FY 2016-17				
Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Caseload Impact of the ACA – Services	$106,866	$0	$2,102	$0	$104,764
Item 111 – IHSS Administration					
Caseload Impact of the ACA – Administration	5,386	0	2,704	0	2,682
Total	$112,252	$0	$4,806	$0	$107,446

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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FLSA Regulations, Overtime and Compliance*

DESCRIPTION:

This premise reflects the cost of compliance with the final federal pay regulations for direct care workers that impact IHSS provider overtime, payment for commute time between multiple recipients and wait time associated with medical accompaniment. In September 2013, the United States Department of Labor issued its Final Rule concerning domestic workers under the FLSA. The regulations were scheduled to go into effect January 2015 and contained several significant changes impacting the IHSS program, including: (1) more clearly defining the tasks that comprise "companionship services"; and (2) limiting exemptions for companionship services and live-in domestic service employees to the individual, family or household using the services, and not third-party employers.

Under the Final Rule, the state, as a third-party employer, can no longer claim the "companionship services" or "live-in domestic service employee" exemption under the federal minimum wage and overtime regulations. This means the state will be required to pay IHSS providers overtime under the FLSA. Because the state is no longer able to claim minimum wage and overtime exemptions, the state is required to compensate providers for commute time between multiple recipients and wait time during medical accompaniment.

IMPLEMENTATION DATE:

This premise will implement February 1, 2016.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: FLSA Department of Labor Wage and Hour Division 29 CFR Part 552, W&IC sections 12300.4, 12300.41 and 12301.1.
- The following percentage assumptions were a result of October 2015 CMIPS II data analysis.

FLSA Overtime

- The W&IC section 12300.4 specifies that IHSS providers are not permitted to work over 66 hours of authorized hours within a work week, as reduced by the net percentage defined in W&IC sections 12301.02 and 12301.03.
- The average monthly impacted recipients for FY 2015-16 are projected to be 471,191 with average monthly providers projected to be 436,001. Average monthly impacted recipients for FY 2016-17 are projected to increase to 502,586 with average monthly providers projected to be 460,976.
- A new process has been developed to implement work week agreements for all recipients and providers. Labor law requires providers to be paid for any time worked, even if the provider has been instructed not to work. Providers working beyond work week limitations will be subject to disciplinary action, including termination. Overtime cost is $6.34 per hour in FY 2015-16 and $6.40 in FY 2016-17 (based on average monthly wages of $12.68 per hour in FY 2015-16 and $12.80 in FY 2016-17).

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

FLSA Regulations, Overtime and Compliance*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Twenty-eight percent of providers are projected to work over 40 hours a week per month. These providers will be subject to a hold harmless period for paying overtime for three months when the program implements on February 1, 2016.
- Restrictive Overtime
  - Fourteen percent of providers with a single recipient are projected to work over 40 hours per week, with an estimated 53.30 overtime hours in FY 2015-16 and 53.13 overtime hours in FY 2016-17.
  - Nine percent of providers with multiple recipients are projected to work over 40 hours per week, with an estimated 57.63 overtime hours in FY 2015-16 and 57.52 overtime hours in FY 2016-17.
- Five percent of recipients are projected to increase the demand for provider hours as a result of increased flexibility, with an estimated five additional hours of overtime for both FY 2015-16 and FY 2016-17.

FLSA Compliance

- The state is not eligible to claim the minimum wage and overtime exemptions; therefore the state is required to comply with the provisions of FLSA including payment to providers for time spent traveling between recipients and waiting for recipients during medical accompaniment.
- Eighteen percent of providers serve multiple recipients. It is estimated providers will spend an average of ten hours per month traveling between recipients.
- Ninety-five percent of recipients will have a provider accompany them to medical visits. It is estimated providers will spend three hours per month waiting for recipients to complete their appointments during medical accompaniment.
- Three percent of providers receiving medical accompaniment time will be above the maximum allowable cap.
- Ninety-two percent of average monthly recipients will be below the cap and will be qualified to get new hours of wait time.
- Twenty-eight percent of providers with over 40 hours a week or more per month are subject to a hold harmless period for paying compliance overtime for 3 months in FY 2015-16.
- Restrictive Overtime:
  - Restrictive overtime will apply to an estimated 14.4 percent of providers with a single recipient who works over 40 hours per week.
  - Restrictive overtime will apply to an estimated nine percent of providers with multiple recipients who work over 40 hours per week.
  - Eighty-eight percent of providers with overtime hours will be impacted by wait time, with three percent of recipients for these providers above the cap.
  - The average monthly recipients below the cap who are qualified to get new hours for wait time is 85.5 percent.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

FLSA Regulations, Overtime and Compliance*

KEY DATA/ASSUMPTIONS (CONTINUED):

Providers with Multiple Live-in Recipients

- The Governor's Budget does not assume exceptions for providers with multiple live-in recipients.

FLSA Administration

- The salary cost per hour is $60.55 for social workers and $16.80 for clerks.
- A notification will be mailed to current IHSS providers explaining the new policy and workweek agreement. Costs associated with mailing this population is $2.5 million for FY 2015-16.
- Outreach and Technical Assistance:
  - For the existing population, one-time costs of $10.0 million are included in FY 2015-16 for social workers to respond to questions regarding notices and workweek agreements.
  - Costs of $864,000 for FY 2015-16 and $1.1 million for FY 2016-17 are included to assist new recipients and providers with their workweek agreements.
- Overtime Approval/Exception Process:
  - It is assumed that a portion of the population with more complex care needs will call their social worker for one hour of assistance monthly in FY 2015-16.
  - Ongoing costs are included to assist new recipients with complex care needs three times per year.
- In accordance with W&IC sections 12300.4(b)(5), a provider who violates the limitations on overtime and/or the travel time regulations on multiple occasions will be terminated as a provider. Violations are assessed in a four-stage process:
  - The first time a provider exceeds the work and/or travel limits they will receive a written notice which will require an hour of social worker time.
  - The second time a provider exceeds the work and/or travel limits they will receive a second written notice and will be required to attend a mandatory training. If the provider fails to attend the mandatory training, they will automatically receive a third violation. Social workers will spend 30 minutes processing second violations for providers who complete the mandatory training and three hours for second violations for providers who do not complete the mandatory training (which includes the third violation).
  - The third violation will result in a three month suspension for the provider and will require two hours of social worker time.
  - If a fourth violation occurs after the provider returns from suspension they will be terminated as an IHSS provider for one year. Social workers will spend two hours processing these violations.
- The cost of adding providers to the Public Authority registry is $34.50 per provider.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

FLSA Regulations, Overtime and Compliance*

KEY DATA/ASSUMPTIONS (CONTINUED):

- A 24-month study to provide feedback to the legislature will be conducted with costs of $250,000 in both FY 2015-16 and FY 2016-17 in accordance with the W&IC section 12300.41(b).

METHODOLOGY:

- The estimated costs for FLSA overtime are calculated by adding the total costs associated with overtime.
- For FLSA compliance, monthly costs for travel time are calculated by multiplying the number of providers serving multiple recipients by the cost per hour for ten hours. Monthly costs for wait time during medical accompaniment are calculated by multiplying the number of recipients in need of medical accompaniment and the cost per hour for three hours.
- The FLSA administration costs are calculated by adding the total costs associated with additional social worker and clerical activities related to notices, workweek agreements, overtime approvals/exceptions and violations to the cost of adding additional providers to registries and the 24-month study.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, based on FFP eligibility criteria. For cases eligible for CFCO funding, approved service costs receive a FMAP of 56 percent. All other costs receive a FMAP of 50 percent. The federal share is reflected as a reimbursement, consistent with actual cash flow. Overtime and service costs for wait time during medical accompaniment are eligible for enhanced CFCO funding. Commute time and administrative costs are not eligible for CFCO funding.

Funding for all non-federal costs is 100 percent GF due to the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase to FLSA overtime and compliance reflects higher provider cost per hour and change in implementation, offset by lower projected caseload and no exceptions for providers with multiple live-in recipients.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase to FLSA overtime and compliance reflects higher projected caseload and higher provider cost per hour. The decrease to FLSA administration reflects the absence of one-time cost incurred in FY 2015-16, offset by higher projected caseload and provider cost per hour.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

FLSA Regulations, Overtime and Compliance*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 111 – IHSS Services	Total	Federal	State	County	Reimb.
FLSA Overtime	$356,115	$0	$164,280	$0	$191,835
FLSA Compliance	246,860	0	116,885	0	129,975
Providers with Multiple Live-in Recipients	0	0	0	0	0
Item 111 – IHSS Administration					
FLSA - Administration	49,712	0	24,955	0	24,757
Total	$652,687	$0	$306,120	$0	$346,567

FY 2016-17

Item 111 – IHSS Services	Total	Federal	State	County	Reimb.
FLSA Overtime	$475,028	$0	$218,115	$0	$256,913
FLSA Compliance	366,125	0	171,856	0	194,269
Providers with Multiple Live-in Recipients	0	0	0	0	0
Item 111 – IHSS Administration					
FLSA - Administration	4,835	0	2,427	0	2,408
Total	$845,988	$0	$392,398	$0	$453,590

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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Coordinated Care Initiative (CCI)*

DESCRIPTION:

This premise reflects the costs of providing services to IHSS recipients under CCI. The CCI will be administered by DHCS and is designed to improve care for beneficiaries eligible for both the state Medi-Cal program and the federal Medicare program. The CCI will assist IHSS recipients in accessing seamless, coordinated and quality care and help them find medical professionals, customer service and support groups. As a CCI benefit, IHSS will continue to be administered by CDSS.

There are two major components of the CCI: Cal MediConnect and Managed Medi-Cal Long-Term Supports and Services. Under the Cal MediConnect plan, all of a beneficiary's services will be combined into a single health plan. Managed Medi-Cal Long-Term Supports and Services will require Medi-Cal beneficiaries (including those who have opted out of Cal MediConnect or were not eligible for Cal MediConnect) to join a Medi-Cal managed care plan to receive their benefits.

In accordance with implementation of CCI, Care Coordination Teams will be established to assist CCI recipients in developing and personalizing a care plan, better manage diverse care needs and ensure delivery of the right services at the right time and place. Enrollment in a Care Coordination Team is voluntary and may include the CCI recipient's primary care physician, nurses, IHSS social workers, IHSS providers and others, as appropriate.

IMPLEMENTATION DATE:

This premise implemented in April 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: SB 1008 (Chapter 33, Statutes of 2012) and SB 1036 (Chapter 45, Statutes of 2012) changed the following sections of California law as related to the IHSS program: Government Code section 6531.5; Government Code Title 23; W&IC sections 10101.1, 12306, 12306.1,12306.15, 12330, 14182, 14186, 14186.35 and 14186.36.
- The CCI consists of seven pilot counties (Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo and Santa Clara), which implemented on a phase-in basis staggered by sub-population groups beginning April 2014. Orange County phased-in implementation began on August 2015.
- CDSS will continue to budget IHSS service and administrative costs as normal for those IHSS recipients covered under the CCI.
- The DHCS will estimate and budget the costs of recipients in long-term care settings who will exit and receive IHSS in a home-based or community-based setting. These new cases will result in an increased caseload and cost to the IHSS program.
- This premise includes CFCO funding for eligible service costs.
- The social worker cost is $60.55 per hour.
- The standard social worker hours are 11.58 hours per case per year.
- The supportive individual provider cost per case is $20.99 per case per year.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Coordinated Care Initiative (CCI)*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Ten percent of CCI recipients will participate in the CCI Care Coordination Team. Care Coordination Teams will require one hour of social worker time per year for each participating recipient.

METHODOLOGY:

- The CCI service costs associated with IHSS are estimated by DHCS, using actual FY 2010-11 IHSS service expenditures along with other home-based and community-based services expenditures and a projected annual growth rate.
- The estimated CCI costs incorporate county capitation rates and assumes a portion of each county specific rate is attributable to IHSS service costs.
- The CCI New Administration Costs are calculated by multiplying the derived average monthly CCI caseload for the new CCI population by the standard social worker hours per case per year and by the social worker unit cost. The Supportive IP cost is computed by multiplying the average monthly new CCI caseload by the Supportive IP cost per case. The costs related to provider orientation, provider background checks and provider enrollment forms are calculated by multiplying the cost per case per year by the average monthly caseload for the new CCI population.
- The CCI Care Coordination Team administrative costs are calculated by multiplying the annual CCI population assumed to participate in a Care Coordination Team by the social worker cost per hour and by one hour.

FUNDING:

The CCI service costs are included in the DHCS budget. The non-federal costs are displayed as a reimbursement.

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP for eligible cases. For service costs, cases eligible for CFCO funding will have FFP of 56 percent and all other cases will have FFP of 50 percent. For administrative costs, FFP is based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow.

Funding for non-federal costs is 100 percent GF. The IHSS county MOE establishes fixed expenditures for each specific county. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in the CCI reimbursement reflects updated costs from DHCS to account for delays in transfers between CDSS and DHCS.

The decrease in CCI new administration costs reflects lower projections of the new CCI caseload.

The decrease in CCI Care Coordination Teams reflects updated caseload in CCI counties.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Coordinated Care Initiative (CCI)*

REASON FOR YEAR-TO-YEAR CHANGE:

The increases in CCI reimbursement, CCI administration cost and CCI Care Coordination Teams reflect higher costs as the CCI implements on a phase-in basis.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
CCI Reimb. (State)	$1,114,753	$0	$0	$0	$1,114,753
Item 111 – IHSS Administration					
CCI New Administration Cost	3,635	0	1,825	0	1,810
CCI Care Coordination Teams	1,096	0	550	0	546
Total	$1,119,484	$0	$2,375	$0	$1,117,109

FY 2016-17

Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
CCI Reimb. (State)	$1,196,798	$0	$0	$0	$1,196,798
Item 111 – IHSS Administration					
CCI New Administration Cost	3,865	0	1,940	0	1,925
CCI Care Coordination Teams	1,158	0	581	0	577
Total	$1,201,821	$0	$2,521	$0	$1,199,300

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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Federally Ineligible Providers*

DESCRIPTION:

This premise reflects the cost of a state/county funded program for IHSS providers who have criminal histories and have been found ineligible for federal Medicaid reimbursement, even though the recipients they serve are Medi-Cal eligible. The court in *Ellis/Beckwith v. Wagner and Maxwell-Jolly (Beckwith)* required the state to enroll all providers with previous criminal convictions unless the provider was convicted of one of the three crimes listed in W&IC section 12305.81. These crimes include fraud against a government health care or supportive services program, specified abuse of a child and specified abuse of an elder or dependent adult. The W&IC section 12305.87 expands the list of convictions that can be used as a basis to exclude a provider from the program.

State statute authorizes an IHSS recipient to waive the exclusionary convictions of an individual, as identified under that same section, and continue to receive services from the otherwise ineligible provider. Statute also allows individuals excluded under that section to apply for a general exception to work as a provider and, if granted, be eligible to provide IHSS. However, these crimes and waiver/exception processes are not consistent with federal requirements for excluded Medicaid providers.

To ensure CDSS continues to receive federal reimbursement and to comply with the requirements of the *Beckwith* court order, a state/county funded program was established. This program allows enrollment of providers who have criminal conviction(s) that are not identified in W&IC sections 12305.81 and 12305.87 but warranted placement on the federal OIG list (requiring exclusion from Medicaid participation) and due to the court order, must be allowed to continue working for their Medi-Cal recipients. As these providers are ineligible to provide services to Medicaid-eligible recipients, this premise creates the necessary funding shift to assure no federal share is used in the compensation of service hours provided under these circumstances.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2010, with a retroactive application to November 2009.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 12305.81 and 12305.87.
- This estimate reflects the non-federal costs and federal savings adjustments associated with providers who are on the OIG and Suspended and Ineligible Provider list. These providers are ineligible to receive compensation with a federal share for services provided.
- The estimate shifts the costs for 306 providers in FY 2015-16 and 320 providers in FY 2016-17 who provide services under an individual waiver or a general exception. Based on the ratio of providers to recipients in FY 2014-15, this will impact 331 cases in FY 2015-16 with an average of 101.9 monthly hours per recipient and 346 cases in FY 2016-17 with an average of 101.9 monthly hours per recipient, after the restoration to service hours.
- The average provider cost per hour is $12.68 in FY 2015-16 and $12.80 in FY 2016-17.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Federally Ineligible Providers*

METHODOLOGY:

The costs are calculated by multiplying the number of recipients who are being served by a provider who receives an individual waiver or general exception by the average hours and the cost per hour for 12 months. The cost for 50 percent of these cases, originally identified as federal costs under basic services, are then shifted to GF costs.

FUNDING:

Funding for non-federal costs is 100 percent GF due to the implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change to the total funding amounts. The decrease in GF reflects a decrease in the number of ineligible providers and impacted recipients, which is partially offset by higher average hours per recipient and higher provider cost per hour.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change to the total funding amounts. The GF increase reflects provider growth and increased provider cost per hour.

EXPENDITURES:

(in 000s)

			FY 2015-16		
Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Federally Ineligible Providers	$0	$0	$2,568	$0	-$2,568

			FY 2016-17		
Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Federally Ineligible Providers	$0	$0	$2,712	$0	-$2,712

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

California Community Transitions Money Follows the Person Rebalancing Demonstration*

DESCRIPTION:

This premise reflects the CDSS' receipt of an enhanced FMAP as a result of the California Community Transitions Money Follows the Person Rebalancing Demonstration, which is administered by DHCS. This program provides an enhanced FMAP to CDSS via an interagency agreement with DHCS for eligible Medi-Cal beneficiaries who have transitioned out of long-term health care facilities into community or home living environments and are receiving IHSS.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2011, with benefits retroactive to June 30, 2010.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Deficit Reduction Act of 2005 section 6071 (PL 109-171) and the Patient Protection and ACA section 2403 (PL 111-148).
- The enhanced FMAP is available for qualified services provided to California Community Transitions participants for 365 days after transition from a long-term health care facility.
- The California Community Transitions cases receive an enhanced FMAP of 75 percent. California Community Transitions cases already receiving a CFCO enhanced FMAP receive a reduced enhancement of 69 percent.
- On average, each month 310 recipients (140 CFCO cases) in FY 2015-16 and FY 2016-17 will transition from long-term health care facilities into IHSS.
- The average provider cost per hour is $12.68 in FY 2015-16 and $12.80 in FY 2016-17.
- The average monthly hours per recipient is 101.9 hours in FY 2015-16 and FY 2016-17, after the impact of the restoration to service hours.

METHODOLOGY:

The cost of this premise is calculated by multiplying the number of California Community Transitions recipients by the cost of their average service hours.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, the Deficit Reduction Act of 2005 section 6071 (PL 109-171) and the Patient Protection and ACA section 2403 (PL 111-148) with the amount of FFP based on the FMAP for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to the implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

California Community Transitions Money Follows the Person Rebalancing Demonstration*

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects a higher provider cost per hour.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 increase reflects a higher provider cost per hour.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
California Community Transitions Money Follows the Person	$4,806	$0	$1,332	$0	$3,474

FY 2016-17

Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
California Community Transitions Money Follows the Person	$4,853	$0	$1,345	$0	$3,508

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Provider Wage Reimbursement*

DESCRIPTION:

This premise reflects the costs associated with managing incorrect share of cost deductions from IHSS provider wages. Recipients can pay the provider for the erroneous deduction and file a claim for reimbursement using the Conlan II claim process. Due to financial hardship, some recipients are unable to front payments. The provider wage reimbursement process allows providers to contact the county and request payment directly.

This process mitigates financial hardship for IHSS recipients and providers by preventing disruption of IHSS services if the recipient cannot reimburse his/her provider and avoiding potential legal action by IHSS providers and labor unions relating to payment of wages.

IMPLEMENTATION DATE:

This premise implemented on September 1, 2014.

KEY DATA/ASSUMPTIONS:

- Approximately 88 providers will receive provider wage reimbursement in both FY 2015-16 and FY 2016-17.
- The average payout per case is $845.22 each year.
- One hour of social worker time is needed for activities associated with claim processing. These activities include confirmation of the correct share of cost between the MEDS and CMIPS systems, analyzing database information, completing the county form, assembling claim files and sending claim forms to CDSS APD for processing.
- The social worker unit cost is $60.55 per hour.

METHODOLOGY:

The estimated administrative cost is calculated by multiplying the social worker cost for one hour by the number of incorrect deduction claims. The estimated wage reimbursement cost is computed by multiplying the average payout per case by the number of cases assumed to receive provider wage reimbursement each year.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The net increase reflects an increase in the average payout per claim, which is partially offset by a decrease in the caseload projection.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Provider Wage Reimbursement*

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Provider Wage Reimbursement	$75	$0	$38	$0	$37
Item 111 – IHSS Administration					
Provider Wage Reimbursement - Administration	6	0	3	0	3
Total	$81	$0	$41	$0	$40

FY 2016-17

Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Provider Wage Reimbursement	$75	$0	$38	$0	$37
Item 111 – IHSS Administration					
Provider Wage Reimbursement - Administration	6	0	3	0	3
Total	$81	$0	$41	$0	$40

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Conlan*

DESCRIPTION:

This premise reflects the costs for reimbursement of eligible IHSS personal care services rendered during the Medi-Cal eligibility determination period and up to three months prior to applying for services. Eligible recipients may also be reimbursed under this premise for excess share of cost paid after approval of eligibility. In *Conlan v. Bonta*, the San Francisco Superior Court ordered prompt reimbursement to Medi-Cal recipients for covered services performed 90 days prior to the Medi-Cal application date. The DHCS implementation plan to comply with *Conlan v. Bonta* is the subject of *Conlan v. Shewry*. Beginning in December 2006, DHCS sent notices to current and former Medi-Cal beneficiaries regarding the process to file a beneficiary reimbursement claim. The DHCS contracts with Affiliated Computer Services to process the reimbursement claims and forward them to CDSS APD for finalization.

IMPLEMENTATION DATE:

The court ordered a start date of November 16, 2006.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: ACL 07-11 (February 20, 2007) and ACL 07-32 (September 13, 2007).
- Approximately 32 claims for services rendered during the evaluation period or post-approval will be forwarded to APD each month in FY 2015-16 and FY 2016-17. This accounts for the assumption that claims are reduced in comparison to FY 2014-15 by the implementation of the provider wage reimbursement process, reducing claims filed by recipients for reimbursement of excess share of cost paid.
- The average cost per claim is $845.

METHODOLOGY:

The estimated cost is calculated by multiplying the number of claims by the average cost per claim.

FUNDING:

Funding for Conlan claims is 100 percent GF due to the implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION :

The decrease reflects a lower number of claims paid, which is partially offset by a higher average payout per claim.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Conlan*

EXPENDITURES:
(in 000s)

			FY 2015-16		
Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Conlan	$324	$0	$324	$0	$0

			FY 2016-17		
Item 111 – IHSS Services	**Total**	**Federal**	**State**	**County**	**Reimb.**
Conlan	$324	$0	$324	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Waivers for Personal Care Services*

DESCRIPTION:

This premise reflects the costs for personal care services that are provided above a recipient's assessed authorized hours under the IHSS program.

On January 1, 2007, the previous Nursing Facility Level A/B, Nursing Facility Subacute and In-Home Medical Care Waivers were merged into two distinct home and community-based services waivers; the Nursing Facility/Acute Hospital Waiver and the In-Home Operations Waiver. All existing waiver participants were transitioned to one of the new waivers using specific level of care and cost neutrality criteria. The vast majority of existing participants were enrolled in the Nursing Facility/Acute Hospital Waiver.

Waivers for Personal Care Services were redefined under these two waivers to include services that differ from those in the state plan which allow beneficiaries to remain at home. Although there is no longer a requirement that waiver consumers receive the maximum of 283 hours of IHSS prior to receiving Waivers for Personal Care Services, waiver consumers must first utilize authorized state plan IHSS hours prior to accessing this waiver service. These services will be provided by the counties' IHSS program providers and will be paid via an interagency agreement with DHCS, or will be provided by home health agencies and other qualified home and community-based services waiver provider types who will be paid via the Medi-Cal fiscal intermediary.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2000.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 14132.97.
- The federal CMS approved a temporary extension for the In-Home Operations Waiver through March 30, 2015. The In-Home Operations Waiver for January 1, 2015 through December 31, 2019 is pending CMS approval.
- The Nursing Facility/Acute Hospital Waiver was renewed on December 1, 2012, and has been extended through December 31, 2016.
- The projected Nursing Facility/Acute Hospital Waiver hours for Nursing Facility Level A/B (intermediate/skilled) is 2,437,106 in FY 2015-16 and 2,613,612 in FY 2016-17.
- The projected Nursing Facility/Acute Hospital Waiver hours for Nursing Facility Subacute Level of Care is 1,206,986 in FY 2015-16 and 1,218,591 in FY 2016-17.
- The projected In-Home Operations Waiver hours for Nursing Facility Level A/B (intermediate/skilled) is 135,201 in FY 2015-16 and 125,579 in FY 2016-17.
- The projected In-Home Operations Waiver hours for Nursing Facility Subacute Level of Care is 27,199 in FY 2015-16 and 27,772 in FY 2016-17.
- The cost per hour is assumed at $10.63 in FY 2015-16 and $10.70 in FY 2016-17.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Waivers for Personal Care Services*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The workers compensation cost for Waivers for Personal Care Services providers is included under the IHSS workers compensation policy and billed to DHCS. The total cost to be paid for workers' compensation in FY 2015-16 is $4,764,466 and for FY 2016-17 is $2,625,489.

METHODOLOGY:

Costs are calculated by multiplying the projected total waiver hours by the cost per hour for waiver costs. Workers compensation costs for Waivers for Personal Care Services providers are added to calculate the total reimbursement from DHCS to CDSS.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with a FMAP of 56 percent in accordance with CFCO eligible funding. The non-federal share of the service costs is funded with 100 percent GF. The DHCS draws down GF and Title XIX reimbursement shares for this premise through its budget. CDSS receives full reimbursement from DHCS.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects a lower projected caseload.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects an increase in cost per hour.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS Services	Total	Federal	State	County	Reimb.
Waivers for Personal Care Services	$45,227	$0	$0	$0	$45,227

FY 2016-17

Item 111 – IHSS Services	Total	Federal	State	County	Reimb.
Waivers for Personal Care Services	$45,271	$0	$0	$0	$45,271

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Title XIX Reimbursement – IHSS/CWS/APS*

DESCRIPTION:

This premise summarizes the FFP associated with Title XIX eligible services as authorized under Title XIX of the federal Social Security Act across all local assistance programs administered by CDSS. Certain IHSS assessment and eligibility activities are eligible to receive Title XIX funding. Certain health-related activities in CWS and APS are also eligible to receive these funds. CDSS coordinates with DHCS to establish claiming processes to draw down applicable FFP for eligible costs.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 12300 through 12317.2, 15703 through 15705.40 and 16500.
- Realigned and non-realigned Title XIX eligible expenditures are displayed in this premise for reference. For more information on realigned programs, please refer to the 2011 Realignment tab of this binder.
- Title XIX reimbursements for IHSS services and administration, CMIPS, CWS and APS are displayed in the CDSS tables in the reimbursement column on the corresponding table lines.
- The CCI reimbursement table line does not include any Title XIX reimbursements. Reimbursements included on this line represent GF reimbursement for costs budgeted by DHCS.
- Waivers for Personal Care Services include $19.9 million in GF reimbursement from DHCS in both FY 2015-16 and FY 2016-17. The remaining reimbursements, $25.3 million and $25.4 million respectively, are Title XIX.
- The non-realigned CWS premises with eligible Title XIX costs include the CWS/CMS Ongoing M&O, CWS-NS Project and Katie A. Settlement Agreement Reporting premises. Please refer to the corresponding premises for additional information.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act.

The IHSS Basic Services table line accounts for Title XIX reimbursements based on an FMAP of 50 percent for all federally eligible cases. The CFCO table line represents the additional six percent Title XIX funding for eligible cases included in IHSS Basic Services. The IHSS Caseload Impact of the ACA table line represents the enhanced FMAP of 100 percent for FY 2015-16 and an average FMAP of 97.5 percent for FY 2016-17. For California Community Transitions Money Follows the Person Rebalancing Demonstration cases, Title XIX reimbursement is based on the FMAP of 69 percent for CFCO cases and 75 percent for all other cases.

Federally eligible IHSS administrative costs are based on a FMAP rate of 50 percent. The resulting FFP is 49.8 percent for FY 2015-16 and FY 2016-17. The CMIPS support contracts and CMIPS II systems are eligible to receive Title XIX reimbursement at the rate of 49.8 percent.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Title XIX Reimbursement – IHSS/CWS/APS*

FUNDING (CONTINUED):

The CWS program costs receive Title XIX funding at the enhanced administrative rate of 75 percent for SPMP eligible costs and 50 percent for non-SPMP costs. The APS health-related activities in support of Medi-Cal eligible recipients are eligible to receive Title XIX reimbursement at the 50 percent rate. Eligible SPMP activities receive Title XIX reimbursement at the enhanced 75 percent rate. A portion of the CWS and APS programs has been realigned and is included in the 2011 Realignment tab.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase in IHSS services and administration reflects updated caseload and actual expenditures. The increase in CMIPS reflects updated costs. The decrease in CWS reflects baseline budget adjustments to CWS/CMS Ongoing M&O, offset by an increase in theCWS-NS Project. The decrease in APS reflects updated expenditures.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase in IHSS services and administration reflects updated caseload and actual expenditures. The decrease in CMIPS reflects updated costs. The increase in CWS reflects additional funding for the CWS-NS Project and Tribal-State Title IV-E agreements, slightly offset by a baseline budget adjustment for CWS/CMS M&O. There is no change for APS.

EXPENDITURES:

(in 000s)

	FY 2015-16
Item 111 – IHSS	**Reimbursement**
IHSS Services and Administration	$4,464,878
CMIPS	49,915
Item 151 – Health Related Activities	
CWS Administration	145,817
APS Administration	98,142
Total	$4,758,752

	FY 2016-17
Item 111 – IHSS	**Reimbursement**
IHSS Services and Administration	$4,875,621
CMIPS	44,471
Item 151 – Health Related Activities	
CWS Administration	248,867
APS Administration	98,142
Total	$5,267,101

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

IHSS Basic – Administration*

DESCRIPTION:

This premise reflects the costs of administering the IHSS program through the PCSP, IHSS Plus Option, Residual and CFCO programs. The IHSS program provides in-home services to the aged, blind and disabled to help individuals maintain an independent living arrangement and avoid institutionalization. This premise includes administrative costs for completion of the emergency contact and back-up form. The DHCS is required to submit a Medicaid State Plan Amendment to the federal CMS to include a portion of the IHSS program as a covered service so that IHSS PCSP, IHSS Plus Option and CFCO cases are eligible to receive federal funds.

IMPLEMENTATION DATE:

This premise implemented on April 1, 1993. A reduction by five percent pursuant to the Budget Act of 2008 was implemented on July 1, 2008.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 12300 through 12314 and 14132.95.
- The FY 2015-16 funding is maintained at $322,255,000 total funds.
- The social worker unit cost is $60.55 per hour.
- The standard hours per case per year are 11.58 hours.
- The baseline Supportive Individual Provider cost from the 2007-08 Appropriation is adjusted to reflect the projected caseload growth. The projected Supportive Individual Provider is $10.3 million total funds for FY 2016-17.
- The average number of cases per month is projected to be 489,775 in FY 2016-17.
- The total administrative cost is reduced by $15 million total funds from the FY 2007-08 budget balancing adjustments.

METHODOLOGY:

The estimated cost is calculated by multiplying the average monthly caseload by the standard hours per case per year and the social worker unit cost. The projected Supportive Individual Provider expenditures are then added, and the sum of those two components is reduced by the FY 2007-08 budget balancing adjustments.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

IHSS Basic – Administration*

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects a higher average monthly caseload.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
IHSS Basic – Administration	$322,255	$0	$161,772	$0	$160,483

FY 2016-17

Item 111 – IHSS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
IHSS Basic – Administration	$338,701	$0	$170,028	$0	$168,673

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Universal Assessment Tool*

DESCRIPTION:

This premise reflects the costs of developing and implementing a universal assessment tool. Currently, a variety of different assessment methodologies and instruments are employed by IHSS, Community Based Adult Services and Multipurpose Senior Services Programs in conducting in-home assessments to determine the precise nature and amount of assistance required by applicants and program participants. However, these separate processes create administrative inefficiencies and inaccurate care plans.

In collaboration with the DHCS and the Department of Aging, CDSS will create a universal assessment tool that will streamline eligibility and level-of-need determinations for home and community-based services by utilizing only one assessment tool.

IMPLEMENTATION DATE:

This premise will implement on July 1, 2016.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 14186.36.
- The estimated total cost to conduct a major multi-system/multi-programs assessment pilot and evaluation using selected researchers in FY 2016-17 is $3 million.
- The pilot counties will be selected in July 2016.

METHODOLOGY:

The estimated costs are calculated by utilizing similar research testing efforts, including those undertaken by the states of Minnesota, Washington and New York. The design of each part of the tool will be geared toward improving the integration and person-centered focus of California's home and community based services (including personal, domestic and paramedical services). Items (direct questions asked of the applicant as well as observations of the assessor) will be selected based on a review of the academic literature and similar instruments adopted by other states. Adjustments will be made to ensure the reliability and validity of each item following stakeholder input, focus group feedback and pilot testing in a limited number of counties.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Universal Assessment Tool*

REASON FOR YEAR-TO-YEAR CHANGE:

This is a new premise.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS Administration	Total	Federal	State	County	Reimb.
Universal Assessment Tool	$0	$0	$0	$0	$0

FY 2016-17

Item 111 – IHSS Administration	Total	Federal	State	County	Reimb.
Universal Assessment Tool	$3,000	$0	$1,506	$0	$1,494

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Statewide Authority*

DESCRIPTION:

The California IHSS Statewide Authority will serve as the employer of record for IHSS providers, for collective bargaining purposes only, in the seven CCI demonstration counties. This premise reflects the costs of Statewide Authority operations, union representatives and Title XIX reimbursement costs for California Department of Human Resources positions. The CDSS and California Department of Human Resources are jointly providing support to the Statewide Authority. California Department of Human Resources, under the direction of the Statewide Authority, will be responsible for the day-to-day labor relations, contract administration and collective bargaining. As the single state agency to administer or oversee the administration of the Medicaid program, pursuant to Title XIX of the Social Security Act, DHCS has designated CDSS as the state department to implement the IHSS program and its component programs for the Medicaid Program. CDSS has the authority to draw down federal funds for the activities that support the IHSS Program and IHSS Employer-Employee Relations Act. Additionally, CDSS serves as the fiscal intermediary to draw down matching federal Title XIX funds on behalf of the California Department of Human Resources.

IMPLEMENTATION DATE:

This premise implemented on February 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Government Code sections 6531.5 and 110006 and W&IC sections 12300.7, 12301, 12302 and 14132.95.
- Title XIX funding for salaries at the California Department of Human Resources is $490,612 in both FY 2015-16 and FY 2016-17.
- Title XIX funding for staff benefits at the California Department of Human Resources is $270,388 in both FY 2015-16 and FY 2016-17.
- Title XIX funding for operating expenses at the California Department of Human Resources is $220,000 in both FY 2015-16 and in FY 2016-17.
- Two members will attend statewide authority meetings six times each year. The average cost per member is $600 per meeting.
- Thirteen members will attend stakeholder advisory committee meetings twice each year. The average cost per member is $600 per meeting.
- Six providers will attend stakeholder advisory committee meetings twice per year. The average cost per provider is $250 per meeting in FY 2015-16 and $500 in FY 2016-17.
- Consultant travel costs are $1,200 in both FY 2015-16 and FY 2016-17.
- Four operator assisted conference lines are needed in both FY 2015-16 and FY 2016-17. The average cost of each line is $1,000.
- Room rental and meeting materials costs are $3,300 in both FY 2015-16 and FY 2016-17.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Statewide Authority*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Reasonable accommodation costs are $10,000 in both FY 2015-16 and FY 2016-17.
- Research costs are $10,000 in both 2015-16 and FY 2016-17.
- Four meetings need consultation services in both FY 2015-16 and FY 2016-17. Fifteen hours of consultation are needed per meeting. The cost per hour for consultation is $185.
- Five counties need mediation or arbitration in FY 2015-16 and seven counties in FY 2016-17. The average cost for mediation or arbitration in each county is $2,500.
- Litigation costs are $150,000 in both FY 2015-16 and FY 2016-17.
- Seven counties will have six union representatives each to attend collective bargaining meetings. It takes 96 hours per year for each union representative to participate in the meetings. The average cost per hour is $14.
- Miscellaneous costs are $10,000 in both FY 2015-16 and FY 2016-17.

METHODOLOGY:

The total costs is the sum of: the Title XIX funds for salaries, staff benefits and operation expenses, as well as the costs of statewide authority and stakeholder advisory committee meetings, consultant travel, operator assisted conference lines, room rental and meeting materials, reasonable accommodation, research, consultation services, mediation and arbitration, litigation, union representative activities and other miscellaneous costs.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act. Funding for California Department of Human Resources staff costs is 100 percent federal. CDSS receives pass-through reimbursement from DHCS on behalf of the California Department of Human Resources. For the costs of statewide authority operations, the federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects the higher costs of statewide authority and stakeholder advisory committee meetings, mediation and arbitration activities, union representative activities and new litigation costs.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects additional counties utilizing mediation and arbitration and the higher cost of stakeholder advisory committee meetings.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Statewide Authority*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 111 – IHSS Administration	Total	Federal	State	County	Reimb.
Statewide Authority	$1,276	$0	$148	$0	$1,128

FY 2016-17

Item 111 – IHSS Administration	Total	Federal	State	County	Reimb.
Statewide Authority	$1,284	$0	$152	$0	$1,132

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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Quality Assurance (QA)*

DESCRIPTION:

This premise reflects the administrative costs of implementing the QA program and associated contract costs. The intent of the QA initiative is not only to improve the quality of services and enhance program integrity, but also to detect and prevent program fraud and abuse in the IHSS program. This initiative mandates ongoing staff training for county IHSS workers and requires CDSS to collaborate with DHCS on annual error rate studies and investigations of suspected fraud in the receipt or provision of services.

IMPLEMENTATION DATE:

This premise implemented on December 1, 2004.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 12305.7, 12305.71 and 12301.2.
- The QA procedures result in improved assessments and reassessments after social workers receive training.

County Staff

- There are 220 county QA staffs or additional IHSS social workers anticipated to work on the QA Initiative in FY 2015-16 and FY 2016-17.
- The annual cost per social worker is $129,083 in FY 2015-16 and FY 2016-17.

Contracts

- The contract costs include social worker training ($2,776,140 for FY 2015-16 and FY 2016-17) and other miscellaneous activities ($923,236 for FY 2015-16 and FY 2016-17).

METHODOLOGY:

The estimated costs are calculated by multiplying the number of QA positions by the annual social worker cost and adding the costs of social worker training and associated contracts.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to the implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Quality Assurance (QA)*

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 111 – IHSS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
QA	$32,098	$0	$16,113	$0	$15,985

	FY 2016-17				
Item 111 – IHSS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
QA	$32,098	$0	$16,113	$0	$15,985

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Public Authority Administration*

DESCRIPTION:

This premise reflects Public Authority administrative costs for the IHSS PCSP, IHSS Plus Option, CFCO and non-Title XIX eligible IHSS recipients in the Residual program. State law defines the make-up and functions of the Public Authorities. The Public Authorities are the employers of IHSS providers for purposes of collective bargaining over wages, hours and other terms of employment. The IHSS recipients retain the right to hire, fire and supervise the work of any IHSS worker providing services to them. A county board of supervisors may elect to establish a Public Authority to provide for the delivery of IHSS. The Public Authorities are separate entities from the county in which they operate. Employees of Public Authorities shall not be employees of the county for any reason.

The Public Authorities shall, at a minimum, assist recipients in finding IHSS providers through the establishment of a registry, investigate the qualifications and background of potential providers, establish a referral system under which IHSS providers shall be referred to recipients, train providers and recipients and perform other functions related to the delivery of IHSS.

Each Public Authority's rate includes hourly costs for wages, employer taxes, benefits and administrative costs. The Public Authority must submit a rate approval request to CDSS. Once CDSS approves the request, it is submitted to DHCS for final approval. After DHCS approves the rate, the Public Authority is notified of the new rate at which it can claim costs.

IMPLEMENTATION DATE:

This premise implemented on July 1, 1997.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 12301 and ABX4 1 (Chapter 1, Fourth Extraordinary Session, Statutes of 2009).
- The estimated non-federal shares are held to the Budget Act of 2012 for both FY 2015-16 and FY 2016-17. The federal share is computed based on the updated Title XIX reimbursement rate.

METHODOLOGY:

The estimated cost is computed by dividing the non-federal shares by the non-federal share ratio.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Public Authority Administration*

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 111 – IHSS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Public Authority Administration	$27,121	$0	$13,615	$0	$13,506

	FY 2016-17				
Item 111 – IHSS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Public Authority Administration	$27,121	$0	$13,615	$0	$13,506

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Advisory Committees*

DESCRIPTION:

This premise reflects the costs of establishing and operating IHSS advisory committees. The purpose of advisory committees is to submit recommendations to their respective county boards of supervisors on the preferred mode of IHSS service to be utilized in their counties.

The W&IC sections 12301.3, 12301.4 and 12302.25 eliminated the mandate that the state participate in IHSS advisory committees.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2000. The elimination of the mandate that the state participate in IHSS advisory committees implemented on July 1, 2011.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 12300 through 12314.
- All counties have established and operated advisory committees in FY 2015-16 and FY 2016-17.
- The state will fund $3,000 GF for each of the 58 counties.

METHODOLOGY:

The estimated GF cost is computed by multiplying $3,000 by the 58 counties. The total is calculated by dividing the GF amount by the GF percent-to-total.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. Remaining costs are funded 100 percent GF. The federal share is reflected as a reimbursement, consistent with actual cash flow.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Advisory Committees*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 111 – IHSS Administration	Total	Federal	State	County	Reimb.
Advisory Committees	$347	$0	$174	$0	$173

FY 2016-17

Item 111 – IHSS Administration	Total	Federal	State	County	Reimb.
Advisory Committees	$347	$0	$174	$0	$173

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

County Employer of Record*

DESCRIPTION:

This premise reflects the cost of administrative activities necessary for counties to act as the employer of record for IHSS providers. Counties may choose to act as the employer of record for IHSS Individual Providers to achieve compliance with state law.

State law requires any county that is not in compliance with the mandates to act as the employer of record (within a specified timeframe) for collective bargaining purposes. To comply, counties had to provide documentation no later than January 15, 2003 in support of compliance, or detailed information in support of delayed compliance by March 31, 2003. Counties that did not provide the required documentation or meet the delayed compliance deadline automatically defaulted to act as the employer of record.

IMPLEMENTATION DATE:

This premise implemented on January 1, 2003.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 12300 through 12314 and 14132.95.
- Alpine and Tuolumne Counties will act as employer of record for both FY 2015-16 and FY 2016-17. Annual costs are projected to be $182,071 and $178,500, respectively.

METHODOLOGY:

The estimated costs are the sum of the projected annual costs for each county.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

County Employer of Record*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 111 – IHSS Administration	Total	Federal	State	County	Reimb.
County Employer of Record	$361	$0	$181	$0	$180

FY 2016-17

Item 111 – IHSS Administration	Total	Federal	State	County	Reimb.
County Employer of Record	$361	$0	$181	$0	$180

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Program Integrity – Administrative Activities*

DESCRIPTION:

This premise reflects the administrative costs of various program activities that form part of the IHSS program integrity efforts. These program integrity efforts measure the following: enhancing state and county efforts to prevent fraud; identifying errors and overpayments; pursuing collections; and detecting and referring suspected incidences of fraud in the IHSS program. Savings created by the following program integrity administrative activities are captured in the IHSS Basic services premise.

County District Attorney Activities:

The county district attorney activities portion of the premise reflects the costs associated with fraud prevention, detection, referral and investigation and additional program integrity efforts to enhance the IHSS program. Before participating in this fraud program, counties must receive annual approval from CDSS of their proposed fraud plans for using the federal funding to enhance IHSS integrity.

County Investigations:

The county investigations portion of the premise reflects the costs associated with 78 county program integrity positions. These positions have the authority to monitor a recipient's receipt of services and investigate fraud in the IHSS program pursuant to the protocols of the IHSS program integrity measures. Activities intended to protect program integrity include: unannounced home visits; directed mailings; the review, analysis and actions related to the Criminal Offender Record Information for provider enrollment; facilitation of orientations for new and existing providers; and tracking and reporting fraud data. All coordinated activities to detect and prevent fraud by IHSS providers and recipients will be performed in accordance with federal and state laws and regulations.

Related Activities:

The related activities portion of the premise reflects funding for reviewing and processing of Criminal Offender Record Information and Subsequent Arrest Notifications, handling appeals for ineligible providers and mailing to providers. It also reflects funding for mandatory orientation for all providers and other related activities.

Provider Exclusions:

The provider exclusions portion of the premise reflects the cost of reviewing and processing individual waivers and general exception requests from providers who have committed a violent or serious felony, as specified in Penal Code section 667.5, subdivision (c) and section 1192.7, subdivision (c). The W&IC sections 12301.6, 12305.86 and 12305.87 established that providers subject to criminal conviction exclusions may request an individual waiver or general exception. An approved individual waiver allows a provider to serve the recipient associated with the individual waiver. A general exception handled through CDSS's CCL allows a provider to provide services for multiple recipients.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Program Integrity – Administrative Activities*

IMPLEMENTATION DATE:

The activities included in this premise implemented on November 1, 2009, with the following exceptions: individual waivers and general exceptions to provider exclusions implemented on February 1, 2011; program integrity training for social workers implemented in May 2011; and direct mailings and unannounced home visits implemented in FY 2012-13.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 12301.22, 12301.24, 12301.25, 12301.6, 12305.71, 12305.82, 12305.86 and 12305.87.

County District Attorney Activities:

- On December 13, 2011, Governor Brown announced the trigger reduction of $10.0 million GF for these activities. Therefore, beginning FY 2011-12, the nonfederal share of funding must come from the counties to the extent they opt to participate with an approved plan.

County Investigations:

- Seventy-eight county investigators will be conducting program integrity activities at the social worker rate of $129,083 per year.

Related Activities:

- The new providers that will participate in and require the review and processing of Criminal Offender Record Information is 106,283 in FY 2015-16 and 127,351 in FY 2016-17.
- The existing providers that will participate in and require the review and processing of Subsequent Arrest Notification is 436,001 in FY 2015-16 and 460,976 in FY 2016-17.
- The social worker unit cost is $60.55 per hour.
- Twenty percent of the new providers will have Criminal Offender Record Information that will require ten minutes of social worker time for review. Of the 20 percent of providers, 2.56 percent will have a non-exemptible crime for which eight minutes of social worker time will be needed to generate a notice to the provider.
- Of the existing providers, 4.10 percent will have a Subsequent Arrest Notification review that will require ten minutes of social worker time for review. Of the 4.10 percent of providers, 0.22 percent will have a non-exemptible crime for which eight minutes of social worker time will be needed to generate a notice to the provider.
- One hour of social worker time is needed for the review of 4.24 percent of the providers with non-exemptible crimes who will file an appeal.
- The costs to develop and translate a revised digital video disc and associated handouts for provider orientation are $133,000.
- The handout materials costs are $0.40 per new provider.
- Translation costs for the materials are $0.70 per provider. Of the existing and new providers, ten percent will require translated materials.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Program Integrity – Administrative Activities*

KEY/DATA ASSUMPTIONS (CONTINUED):

- Other related activities have an annual cost of $384,178 GF.

Provider Exclusions:

- In FY 2015-16 and FY 2016-17, 420 recipients will request individual waivers for providers who have exemptible crimes. It will take 60 minutes for the county social workers to prepare and mail waiver notices and respond to questions for each individual waiver request. The postage rate is $0.47 per waiver notice.
- Sixty providers in FY 2015-16 and FY 2016-17 will have exemptible crimes and request a general exception. It will take five minutes for the county social workers to electronically send Criminal Offender Record Information to CDSS for each of these providers.

METHODOLOGY:

County District Attorney Activities:

Federal and county shares related to the previous $10.0 million GF allocation are first calculated using FFP, state and county share rates. The GF funding share, which has been eliminated, is then shifted to the counties.

County Investigations:

The assumed number of county investigators is multiplied by the annual social worker rate.

Related Activities:

The estimated costs for related activities are calculated by adding the total costs associated with mandatory orientations for providers, the review and processing of Criminal Offender Record Information and Subsequent Arrest Notifications, provider appeals of terminations and other related activities.

Provider Exclusions:

The estimated cost of processing individual waivers is computed by multiplying the number of impacted providers by the cost of social worker time to respond to the requests and adding mailing costs. The estimated cost of processing general exceptions is computed by multiplying the number of impacted providers by the cost of social worker time to respond to the requests.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

The costs for processing provider exclusions are ineligible to receive FFP.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Program Integrity – Administrative Activities*

CURRENT YEAR CHANGE FROM APPROPRIATION:

The net increase reflects a higher new provider count, partially offset by a slower total provider count growth than projected in the 2015-16 Appropriation.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects a higher new provider and total provider count.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Program Integrity – Administrative Activities	$39,550	$0	$19,866	$0	$19,684

FY 2016-17

Item 111 – IHSS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Program Integrity – Administrative Activities	$39,616	$0	$19,899	$0	$19,717

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Provider Enrollment Statement Form/Process*

DESCRIPTION:

This premise reflects the costs associated with revising the IHSS Provider Enrollment Statement Form (Social Services Programs 426) to bring it into compliance with the requirements of state statute. The new compliance form indicates that if a person has been convicted of, or incarcerated following a conviction for, certain exclusionary crimes within the past ten years, he/she is not eligible to be enrolled as a provider or to receive payment for providing supportive services.

In accordance with the ruling of the Alameda County Superior Court in the *Beckwith v. Wagner* court case, which challenged the legality of the offenses originally identified as disqualifiers for provider eligibility, only three of the aforementioned offenses could be used to prevent eligibility of a person as an IHSS provider.

IMPLEMENTATION DATE:

This premise implemented on November 1, 2009.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 12305.81.
- The new number of IHSS providers that will be enrolled to provide IHSS basic services and IHSS services under ACA, CCI and FLSA is 106,283 in FY 2015-16 and 127,351 in FY 2016-17.
- The recipients that receive IHSS basic services and IHSS services under ACA, CCI and FLSA are 471,191 in FY 2015-16 and 502,586 in FY 2016-17.
- The social worker unit cost is $60.55 per hour.
- To comply with statute, counties will have additional responsibilities for associated tasks, including:
    - Fifteen minutes to mail and verify forms, copy documents/identifications and schedule appointments for new providers.
    - Ten minutes to resolve errors on forms, reschedule appointments and send reminders for appointments; this applies to 20 percent of new providers.
    - Fifteen minutes to resolve issues for recipients when a particular provider is ineligible; this applies to 20 percent of all recipients.
    - Five minutes to cross reference applicants with the ineligible provider list and place applicants on the ineligible list; this applies to three percent of new providers.

METHODOLOGY:

For each activity, the applicable portion of the providers or recipients is multiplied by the social worker unit cost per hour and the applicable time per activity.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Provider Enrollment Statement Form/Process*

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The net increase reflects a higher new provider count, partially offset by a slower growth in caseload and total providers than projected in the 2015-16 Appropriation.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects a higher caseload and provider count.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Provider Enrollment Statement Form/Process	$3,266	$0	$1,640	$0	$1,626

FY 2016-17

Item 111 – IHSS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Provider Enrollment Statement Form/Process	$3,725	$0	$1,870	$0	$1,855

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

IHSS Plus Option - Administration*

DESCRIPTION:

This premise reflects the costs for activities necessary to maintain compliance with Social Security Act section 1915(j) requirements. Implementation of the IHSS Plus Option - Administration requires social workers to be trained in the concepts and methods of being support-brokers. The social workers must also complete risk management assessments for all IHSS Plus Option recipients to be able to identify, mitigate and assess risks. The IHSS Plus Option service costs are included under the IHSS Basic services cost.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2010.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 14132.952.
- The FY 2015-16 funding is maintained at $176,000 total funds.
- Fifteen minutes of social worker time is needed to complete the initial assessments or reassessments of the risk management process for 11,994 IHSS Plus Option recipients in FY 2016-17.
- The social worker unit cost is $60.55 per hour.

METHODOLOGY:

The cost for implementing the risk management process is determined by multiplying the amount of social worker time required by the total number of IHSS Plus Option recipients and the social worker unit cost.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects an increase in the IHSS Plus Option caseload.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

IHSS Plus Option - Administration*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 111 – IHSS Administration	Total	Federal	State	County	Reimb.
IHSS Plus Option – Administration	$176	$0	$88	$0	$88

FY 2016-17

Item 111 – IHSS Administration	Total	Federal	State	County	Reimb.
IHSS Plus Option – Administration	$182	$0	$91	$0	$91

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Case Management Information and Payrolling System (CMIPS) Support Contracts*

DESCRIPTION:

This premise reflects the consolidation of all the interagency contract costs related to the CMIPS system.

IMPLEMENTATION DATE:

This premise reflects contract costs anticipated to be paid in FY 2015-16 and FY 2016-17.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 12302.2, 12304.4 and 12317.
- The following contracts are included:
  - The Client Index Number transaction contract ($8,307 for both FY 2015-16 and FY 2016-17) is based on the amount of time the CMIPS Legacy system accesses the State Client Index.
  - The SCO contract ($8,974,087 for both FY 2015-16 and FY 2016-17) is for issuing payroll checks to individual provider mode providers on behalf of IHSS recipients. The SCO also issues replacement checks and handles checks returned as undeliverable.
  - The State Treasurer's Office contract ($579,744 for both FY 2015-16 and FY 2016-17) performs bank reconciliation of IHSS warrants and redeems all valid warrants issued for IHSS providers.
  - The CDPH contract ($12,332 for both FY 2015-16 and FY 2016-17) shares information pertaining to providers and recipients of IHSS Services.
  - The DHCS interagency agreement ($130,473 for both FY 2015-16 and FY 2016-17) performs CMIPS II data processing.
  - The EDD contract ($10 million in both FY 2015-16 and FY 2016-17) is for printing and mailing timesheets and other anticipated costs.
  - The Technology Management Solutions contract ($52,700 in FY 2015-16) is for CMIPS-II Reports IT Consulting Services.

METHODOLOGY:

The estimated costs for each contract are summed.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The federal share is reflected as a reimbursement, consistent with actual cash flow. Funding for non-federal costs is 100 percent GF due to implementation of the IHSS county MOE. For more information on the IHSS county MOE, please refer to the IHSS County MOE premise.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Case Management Information and Payrolling System (CMIPS) Support Contracts*

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects the end of the Technology Management Solutions contract.

EXPENDITURES:

(in 000s)

			FY 2015-16		
Item 111 – CMIPS	**Total**	**Federal**	**State**	**County**	**Reimb.**
CMIPS Support Contracts	$19,757	$0	$9,918	$0	$9,839

			FY 2016-17		
Item 111 – CMIPS	**Total**	**Federal**	**State**	**County**	**Reimb.**
CMIPS Support Contracts	$19,705	$0	$9,892	$0	$9,813

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Case Management, Information and Payrolling System (CMIPS) II

DESCRIPTION:

This premise reflects the ongoing costs for contracting with the OSI for the M&O of the IHSS CMIPS II. This system provides system access for all IHSS county workers and a communication network between state and county IHSS offices. The CMIPS II launched in pilot counties in July 2012 and became active in all 58 counties in November 2013. The CMIPS II transitioned into the M&O phase effective January 2014.

IMPLEMENTATION DATE:

This premise implemented on April 1, 2008.

KEY DATA/ASSUMPTIONS:

Authorizing statute: W&IC section 12302.2.

METHODOLOGY:

Costs are based on the CMIPS II Special Project Report #7 approved in October 2014.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act, with the amount of FFP based on the FMAP of 50 percent for eligible cases. The nonfederal share is funded 100 percent GF. Costs associated with the Residual Program are funded at 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects the costs of schedule shifts, a delay in implementing changes related to the federal FLSA and base operational costs, as well as baseline budget adjustments. The cost increases are consistent with the revised project schedule in Special Project Report #7.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects the one-time nature of various activities, which is partially offset by higher costs for OSI salary and wages, base operational costs and data center services, as requested in the Budget Change Proposal.

Case Management, Information and Payrolling System (CMIPS) II

EXPENDITURES:
(in 000s)

FY 2015-16

Item 111 – CMIPS	Total	Federal	State	County	Reimb.
CMIPS II	$70,203	$0	$35,530	$0	$34,673
CMIPS II FLSA System Changes	10,940	0	5,537	0	5,403
Total	$81,143	$0	$41,067	$0	$40,076

FY 2016-17

Item 111 – CMIPS	Total	Federal	State	County	Reimb.
CMIPS II	$66,136	$0	$33,471	$0	$32,665
CMIPS II FLSA System Changes	4,036	0	2,043	0	1,993
Total	$70,172	$0	$35,514	$0	$34,658

CDSS/OSI PARTNERSHIP	Total	CDSS	OSI
FY 2015-16	$81,143	$17,015	$64,128
FY 2016-17	$70,172	$18,704	$51,468

CalFresh Administration*

DESCRIPTION:

This premise reflects administrative costs for non-assistance CalFresh. Historically, the budget for county administration was based on counties' administrative budget requests made through a PCAB process, modified by a cost containment system, consistent with W&IC section 14154. Beginning with FY 2001-02, the PCAB process was suspended and the last PCAB process, FY 2000-01, established the base from which future costs are determined. The base has been adjusted each successive Governor's Budget and May Revision process for caseload changes and other factors (such as staff development costs). This premise has been consolidated to include historical adjustments from the CalFresh Administration Reduction (PL 105-185) and the Non-Assistance CalFresh Reduction.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 14154.
- The non-assistance CalFresh administrative costs base is $1,585.6 million for FY 2015-16 and $1,678.1 million for FY 2016-17.
- The non-assistance CalFresh caseload growth projection is 5.8 percent in FY 2015-16 and 5.4 percent in FY 2016-17.
- Staff development costs for non-assistance CalFresh are $24.5 million for both FY 2015-16 and FY 2016-17, based on FY 2014-15 actual expenditures.
- The SAWS development and testing interface costs for non-assistance CalFresh are approximately $230,000 for both FY 2015-16 and FY 2016-17.
- The Merced Automated Global Information Control system administrative costs for non-assistance CalFresh are approximately $97,000 for both FY 2015-16 and FY 2016-17.
- Contract costs for non-assistance CalFresh are $3.3 million for both FY 2015-16 and FY 2016-17. Savings from legacy system data collection and quality control systems for non-assistance CalFresh are $3.9 million for both FY 2015-16 and FY 2016-17.
- The Non-Assistance CalFresh Reduction is $21.0 million for both FY 2015-16 and FY 2016-17 and the CalFresh Administration Reduction shifts $58.8 million in funding from federal to state funding for both FY 2015-16 and FY 2016-17.
- The *Be Vu v. Mitchell* funding is $127,080 in FY 2015-16 and $133,984 in FY 2016-17.

METHODOLOGY:

- The non-assistance CalFresh base funding is adjusted for caseload growth, staff development expenditures, SAWS development and implementation, Merced Automated Global Information Control system costs, contract costs and legacy systems savings.
- The base funding is further adjusted for the Non-Assistance CalFresh Reduction, CalFresh Administration Reduction shift and *Be Vu v. Mitchell* costs.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalFresh Administration*

FUNDING:

The FY 2015-16 CalFresh Administration costs are funded 45.9 percent SNAP, 39.9 percent GF and 14.2 percent county. The FY 2016-17 CalFresh Administration costs are funded 46.1 percent SNAP, 39.7 percent GF and 14.2 percent county.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects the funding for premises that are now in trend, such as the CalFresh and CFAP Caseload Impact of the ACA, which is no longer separately premised, and Modified Categorical Eligibility, which is partially in trend, as well as a projected increase in caseload.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects the projected growth in the non-assistance CalFresh caseload.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 141 – CalFresh Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
CalFresh Admin	$1,680,947	$771,798	$670,418	$238,731	$0

FY 2016-17

Item 141 – CalFresh Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
CalFresh Admin	$1,772,125	$816,944	$703,645	$251,536	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

County Maintenance of Effort Requirement/County Match Waiver*

DESCRIPTION:

This premise reflects the reduction in funding match for CalFresh administration costs as a result of the County Match Waiver. Historically, counties had been responsible for funding 15 percent of CalFresh administrative costs, including expenditures above the county MOE requirement. However, the unprecedented and unanticipated CalFresh caseload growth associated with the economic decline beginning in FY 2008-09 created substantial fiscal pressures on the counties. To provide fiscal relief, pursuant to W&IC section 18906.55, a county that meets its CalWORKs MOE requirement entirely through expenditures for the administration of the CalFresh program shall receive the full GF allocation, but will not need to pay the county's share of administrative costs above the CalWORKs MOE unless expenditures exceed the GF allocation. Counties are still required to meet the CalWORKs MOE requirements pursuant to W&IC section 15204.4. Failure to meet this required level of spending will result in a proportionate reduction of the funds provided under W&IC section 15204.2.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2010. The Budget Act of 2014 extended the County Match Waiver through FY 2014-15 and requires a four year incremental phase out beginning in FY 2015-16.

KEY DATA/ASSUMPTIONS:

- Authorizing Statute: W&IC sections 15204.4 and 18906.55.
- Beginning in FY 2015-16, the County Match Waiver will begin phasing out in 25 percent increments. By FY 2018-19, the County Match Waiver will be completely phased out and counties will be required to contribute their standard 15 percent share of CalFresh administrative costs to fully access their individual CalFresh administrative GF allocation.
- Under state law, the waived portion of the county's share shall be 75 percent in FY 2015-16 and 50 percent in FY 2016-17. Therefore, a county is not required to contribute that percentage (75 percent and 50 percent, respectively) of the county's share of the CalFresh administrative costs that are above their required CalWORKs MOE, unless CalFresh county expenditures exceed the CalFresh administrative GF allocation.
- The statewide county CalWORKs MOE requirement is $140 million.
- The decrease in the county share of CalFresh administrative costs due to the County Match Waiver results in a corresponding decrease in federal matching funds.
- For illustrative purposes, this premise reflects all counties fully utilizing the County Match Waiver flexibility as a non-add budget line.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

County Maintenance of Effort Requirement/County Match Waiver*

METHODOLOGY:

The decrease in county funds and federal matching funds for CalFresh administrative services is calculated by taking the difference between what the counties would have been required to pay under the historical CalFresh administrative allocation methodology and how much the counties will pay if they fully utilize the County Match Waiver.

FUNDING:

The funding is 50 percent SNAP and 50 percent county share.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects an increase in savings from the CalFresh Reporting Premise.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects the increase in the percentage of the County Match Waiver phase out from 25 percent to 50 percent.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 141 – CalFresh Administration	Total	Federal	State	County	Reimb.
County MOE Requirement**	-$181,800	-$90,900	$0	-$90,900	$0

FY 2016-17

Item 141 – CalFresh Administration	Total	Federal	State	County	Reimb.
County MOE Requirement**	-$133,262	-$66,631	$0	-$66,631	$0

** This is a non-add line.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

CalFresh Employment and Training Program*

DESCRIPTION:

This premise reflects funding for the CalFresh Employment and Training Program, which provides job search assistance, work experience and supportive services to eligible non-assistance CalFresh recipients. The Employment and Training Program provides recipients with opportunities to become self-sufficient and reduce their need for food benefits. Individual county and community college plans are developed to specify the job services, training and supportive services available to participants. Providing an Employment and Training Program is optional for counties and community colleges.

This premise also includes funding for the Fresno County Pilot employment and training program. The Fresno County Pilot is one of ten pilots selected by the FNS to give the USDA and states the opportunity to build on existing SNAP employment and training programs. These pilots allow new strategies to be tested to determine the most effective ways to help SNAP recipients gain and retain employment that leads to self-sufficiency.

IMPLEMENTATION DATE:

This premise implemented on April 1, 1987.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 18901.11 and 18926.5.
- The CalFresh Employment and Training Program is made up of three distinct efforts: county based programs, community college based programs and the Fresno County Pilot program.
- Each effort is supported through one or more of three funding streams. These are: enhanced funding, normal funding and participant reimbursement funds. Enhanced funding is 100 percent federally funded with no match requirement. Normal funding and participant reimbursement funds require a dollar-for-dollar match to federal funds.

County Programs:

- There are 24 counties offering an Employment and Training Program in FFY 2015 and 25 counties in FFY 2016.
- The total funding for the county programs is $106,442,757 in FFY 2015 and $108,034,537 in FFY 2016.
- The total funding includes enhanced funding for the county programs of $7,820,767 in FFY 2015 and $8,322,113 in FFY 2016.
    - The enhanced funding includes worker's compensation costs of $400,000 in both FFY 2015 and FFY 2016.
    - The enhanced funding also includes $400,000 in state operations costs in both FFY 2015 and FFY 2016. However, these costs are not displayed in the local assistance estimate.
- In FFY 2015, the county programs have $75,087,820 in normal funding and $23,534,170 in participant reimbursement funds. In FFY 2016, the funding is $73,747,704 in normal funding and $25,964,720 in participant reimbursement funds.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

CalFresh Employment and Training Program*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The FFY funding levels are adjusted to FY funding needs. The corresponding FY 2015-16 funding represents 25 percent of the total amount approved for FFY 2015 and 75 percent of the total amount approved for FFY 2016 after the costs for state operations are deducted.
- The FFY 2017 proposed funding is not available at this time; therefore, the FY 2016-17 funding represents the total amount approved for FFY 2016 after the costs for state operations are deducted.

Community College Programs:

- The community college programs received federal funding beginning in FFY 2016. The total FFY 2016 funding for these programs is $500,000 in normal funding and $100,000 in participant reimbursement funds. The community colleges must match these funds from other, non-federal sources. These matching funds are not displayed in the CDSS local assistance estimate.
- The FFY funding levels are adjusted to FY funding needs. The budgeted amounts in FY 2015-16 reflect 75 percent of FFY 2016 funding.
- Funding for FFY 2017 is not available at this time; therefore, the FY 2016-17 funding represents the total amount approved for FFY 2016.

Fresno County Pilot Program:

- The Fresno County Pilot program is budgeted at $2,000,000 in FY 2015-16 and $5,000,000 in FY 2016-17.
- The Fresno County Pilot program is 100 percent enhanced funding.

METHODOLOGY:

The total costs for the county programs reflect the quarterly federal grant and county match amounts, less state operations costs, for the applicable FY. The total costs for the community college programs reflect the quarterly federal grant amount for the applicable FY. Costs for the Fresno County Pilot program reflect the portion of the federal grant budgeted for each FY. Costs for all programs are added together into the three funding types – enhanced, normal and participant reimbursement.

FUNDING:

Enhanced funding is 100 percent federal. Normal funding and participant reimbursement funds are 50 percent federal and 50 percent matching funds from the county or community college.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalFresh Employment and Training Program*

CURRENT YEAR CHANGE FROM APPROPRIATION:

The net decrease in enhanced funding reflects a change for the Fresno County Pilot program from $11.2 million to $2.0 million to better reflect estimated expenditures through FY 2018-19. This decrease is slightly offset by a FFY 2016 increase in county based program funding.

The net decrease in normal funding reflects a FFY 2016 reduction for the county based program, which is partially offset by funding for the community college based program.

The change in participant reimbursement funds reflect an increase in funding for the county based program and the addition of the community college based program.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase in enhanced funding reflects a higher allocation for the Fresno County Pilot program and an increase for the county based program funding.

The decrease in normal funding reflects a decrease for the county programs, which is partially offset by a full year of the community college based program.

The increase in participant reimbursement reflects an increase for the county based program and a full year of the community college based program.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 141 – CalFresh Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Enhanced Funding	$9,797	$9,797	$0	$0	$0
Normal Funding	74,458	37,417	0	37,041	0
Participant Reimbursement	25,432	12,753	0	12,679	0
Total	$109,687	$59,967	$0	$49,720	$0

FY 2016-17

Item 141 – CalFresh Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Enhanced Funding	$12,922	$12,922	$0	$0	$0
Normal Funding	74,248	37,374	0	36,874	0
Participant Reimbursement	26,065	13,083	0	12,982	0
Total	$113,235	$63,379	$0	$49,856	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Outreach*

DESCRIPTION:

This premise reflects the funding to execute the CalFresh Outreach Plan. The CalFresh Outreach Plan increases program participation and awareness. The CDSS serves as the oversight agency and operates CalFresh outreach efforts through contracts with other state and local entities.

IMPLEMENTATION DATE:

This premise implemented on October 1, 2004.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 18904.2 and 18904.3.
- Funding is based on a two-year plan approved by FNS.
- The approved federal funding for FFY 2016 is used to estimate the funding for FY 2015-16 and FY 2016-17.

METHODOLOGY:

The cost reflects the approved federal funding for the plan.

FUNDING:

The funding is 100 percent federal.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease largely reflects a technical adjustment to remove state operation costs as well as a small decrease in the final approved grant amount.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

		FY 2015-16			
Item 141 – CalFresh Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Outreach	$10,472	$10,472	$0	$0	$0

		FY 2016-17			
Item 141 – CalFresh Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Outreach	$10,472	$10,472	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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Nutrition Education*

DESCRIPTION:

CDSS serves as the SNAP-Ed oversight agency to distribute the federal grants. The purpose of these grants is to administer nutrition education and physical activity promotion programs. Each program targets CalFresh participants and low-income Californians who are potentially eligible for CalFresh.

The CDPH Nutrition Education and Obesity Prevention Branch portion of the premise reflects funding CDSS passes through to CDPH Nutrition Education and Obesity Prevention Branch. The CDPH Nutrition Education and Obesity Prevention Branch is a statewide collaboration of public and non-profit agencies. These agencies work together to promote healthy eating and physical activity among the targeted population.

The UC CalFresh portion of the premise reflects funding CDSS passes through to UC CalFresh. The UC CalFresh provides nutrition education services to the targeted population. Services are primarily provided to schools where at least half the students receive free or reduced-priced meals and to low-income adults in classroom settings.

The CDSS Nutrition Education Projects portion of the premise includes funding for several SNAP-Ed projects. These projects include the CWD Local Health Department Expansion for Community Nutrition Pilot, CalFresh Innovative Projects, Get Fresh and CDSS partnerships with the California Department of Aging, Catholic Charities and the California Department of Food and Agriculture.

IMPLEMENTATION DATE:

The UC CalFresh implemented on January 1, 1995. The CDPH Nutrition Education and Obesity Prevention Branch implemented on October 1, 1996. The CWD Local Health Department Expansion implemented on November 9, 2011. The Innovative Projects implemented on March 1, 2012. The California Department of Food and Agriculture project implemented in FFY 2013. The California Department of Aging partnership, Get Fresh and the partnership with Catholic Charities implemented in FFY 2014.

KEY DATA/ASSUMPTIONS:

- The FY 2015-16 funding for the nutrition education programs is based on FFY 2016 allocation of $116,529,713.
- The FY 2016-17 funding is estimated using the FFY 2016 allocation.
- The FNS has adopted a new allocation methodology. Beginning in FFY 2014, 90 percent of SNAP-Ed funds were allocated based on each state's share of national SNAP expenditures and ten percent were allocated based on each state's share of national SNAP participation. This ratio moves in ten percent increments until it reaches a 50/50 ratio in FFY 2018.
- The FFY 2017 funding is expected to be 8.3 percent lower than FFY 2016.

METHODOLOGY:

The federal funding received is distributed to the three programs based on agreements between CDSS and the state or local entities.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Nutrition Education*

FUNDING:

The funding is 100 percent SNAP.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects approved FFY 2016 SNAP-Ed funding.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects approved FFY 2016 SNAP-Ed funding adjusted for an anticipated reduction in FFY 2017.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 141 – CalFresh Administration	Total	Federal	State	County	Reimb.
Nutrition Education	$116,530	$116,530	$0	$0	$0

FY 2016-17

Item 141 – CalFresh Administration	Total	Federal	State	County	Reimb.
Nutrition Education	$106,858	$106,858	$0	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Fleeing Felon Eligibility*

DESCRIPTION:

This premise reflects the costs of providing CalFresh benefits to adults previously ineligible for benefits due to their status as fleeing felons. In September 2015, FNS published new rules clarifying and narrowing the definition of fleeing felons. The new rules allow a majority of adults previously ineligible, solely due to their fleeing felon status, to become eligible for CalFresh benefits.

Fleeing felons are categorized into three different groups: Flight Escape (National Crime Information Center Uniform Offense Classification Codes 4901, 4902 and 4999), Parole and Probation Violators (National Crime Information Center Uniform Offense Classification Codes 5011 and 5022), and All Others. Determination of CalFresh eligibility related to fleeing felon status is different for each group.

- Flight Escape felons remain ineligible for CalFresh even with this rule change.
- Parole and Probation Violators are eligible if it is determined that they are not being actively sought by law enforcement.
- All Others are immediately eligible with no further evaluation by the county.

IMPLEMENTATION DATE:

This premise implemented on December 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: PL 110-246 as implemented in 80 Federal Register 54410.
- This policy change will result in different cost and saving impacts depending on the change being made. The following caseload impacts are included: 1) the cost to add a fleeing felon to an existing CalFresh household; 2) the cost or savings for cases no longer discontinued or that no longer have benefits reduced when a member of the CalFresh household becomes a fleeing felon; 3) the cost for cases with a Parole or Probation Violators who receive benefits prior to a final determination of their actively sought status.
- To be actively sought, the relevant law enforcement agency must verify its intent to arrest the violator within 30 days. If law enforcement indicates that they do not intend to arrest the violator within 30 days, the individual will no longer be considered a violator and is eligible for CalFresh benefits. If law enforcement indicates that they do intend to arrest the violator but no arrest is made within 30 days, the individual also becomes eligible.
- If the amount of time to receive a response from law enforcement as to their intent to arrest or not arrest a Parole or Probation Violator exceeds the 30 day application processing time standard, the violator will be considered eligible for benefits. If it is later determined that the violator is being actively sought, the benefits issued will be considered an over issuance and subject to overpayment collections by the county.
- Caseload impacts are based on the September 2015 MEDS/DOJ Fleeing Felon Match, the July 2015 CA 237 CW report and the Fraud Investigation Activity Report (DFA 266).

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Fleeing Felon Eligibility*

KEY DATA/ASSUMPTIONS (CONTINUED):

- In FY 2015-16, a monthly average of 40 current CalFresh households will experience a benefit increase as the fleeing felon will now be included in the eligibility determination. These households will require a one-time administrative cost to add the previously-excluded fleeing felon to the household.
- The following caseload impacts are anticipated in both FY 2015-16 and FY 2016-17:
  - A monthly average of four households will experience a benefit decrease as a result of an actively sought determination being made after receiving one month of increased benefits. These households will require the one-time administrative costs to exclude the fleeing felon from the household and to recover an over issuance.
  - A monthly average of 359 households will no longer be discontinued that, under the previous policy, would have been discontinued. Since these households will no longer need to be discontinued, they will generate a one-time administrative savings. They will, however, now require the ongoing monthly administrative cost per case.
  - A monthly average of 97 households will not experience a benefit decrease that, under the previous policy, would have had benefits decreased. Since these households will no longer need to have a benefit adjustment, they will each generate a one-time administrative savings.
  - A monthly average of 14 households will be discontinued as a result of an actively sought determination being made after receiving one month of benefits. These households will require the one-time administrative costs to discontinue the case and to recover an over issuance. They will, however, no longer require the monthly administrative cost per case.
- The cumulative monthly average number of households that will no longer be discontinued, less those that will be discontinued, is 1,372 in FY 2015-16 and 4,652 in FY 2016-17.
- A CalFresh eligibility worker cost is $58.27 per hour.
- Based on a 2005 county time study, the following administrative costs are used:
  - The cost to make a mid-period change in a CalFresh case is $28.23. This cost is required when any change is made to the case and is reflected as a savings when this policy eliminates the need to exclude the fleeing felon from the household.
  - The ongoing CalFresh administrative cost per case is $13.11 per month.
  - The cost to recover an over issuance is $19.42.
- CFAP costs are anticipated to be negligible and therefore not included.
- One-time SAWS Consortia automation costs are $270,000 in FY 2015-16.
- For each of the caseload impacts, the monthly average number of households is multiplied by the applicable one-time administrative costs or savings and then by the relevant number of months in the FY. The caseload impacts are those that will: 1) experience a benefit increase; 2) experience a benefit decrease; 3) not be discontinued; 4) not experience a benefit decrease; and 5) be discontinued.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Fleeing Felon Eligibility*

METHODOLOGY (CONTINUED):

- The cumulative monthly average number of households that will no longer be discontinued, less those that will be discontinued, is multiplied by the monthly administrative cost per case and by relevant number of months in the FY.
- The total administrative costs are the sum of the one-time and ongoing costs, less savings.

FUNDING:

Costs are funded 50 percent federal, 35 percent GF and 15 percent county.

CURRENT YEAR CHANGE FROM APPROPRIATION:

This is a new premise.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase in CalFresh Administration costs reflects a full year of implementation. The decrease in automation costs reflects the completion of automation in FY 2015-16.

EXPENDITURES:

(in 000s)

FY 2015-16

141 – CalFresh Admin	**Total**	**Federal**	**State**	**County**	**Reimb.**
Fleeing Felon Eligibility	$50	$26	$17	$7	$0
141 – Automation M&O and Updates					
Fleeing Felon Eligibility	270	135	95	40	0
Total	$320	$161	$112	$47	$0

FY 2016-17

141 – CalFresh Admin	**Total**	**Federal**	**State**	**County**	**Reimb.**
Fleeing Felon Eligibility	$588	$294	$206	$88	$0
141 – Automation M&O and Updates					
Fleeing Felon Eligibility	0	0	0	0	0
Total	$588	$294	$206	$88	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Eliminate Change Reporting*

DESCRIPTION:

This premise reflects the impact of eliminating Change Reporting and streamlining CalFresh reporting to one household reporting system in the ongoing effort to gain administrative simplicity and increased program access in CalFresh. All households would be converted to SAR.

Under QR (California's reporting system prior to SAR), federal rules excluded migrant and seasonal farmworker households, homeless households, and households in which all adults are elderly/disabled from reporting quarterly and required these households to be assigned to Change Reporting. Change Reporting requires households to report changes to certain eligibility factors (e.g., employment, income, residency, etc.) within 10 days of the change. Change Reporting was maintained for these households under California's implementation of SAR. Federal rules allow states to assign all households to SAR. California is taking advantage of this federal option to create administrative simplicity for CWDs and CalFresh households. Under SAR, households are required to submit one report at six months during the household's certification period. If the household exceeds the Income Reporting Threshold, a mid-period report must be submitted.

IMPLEMENTATION DATE:

Automation programming implemented in FY 2014-15 and is assumed to be complete in FY 2015-16. The elimination of Change Reporting will implement in CalWIN counties on June 1, 2016, and in LEADER and C-IV counties on July 1, 2016.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 11265.1, 11265.2, 11265.3 and 18910.
- California transitioned CalFresh cases from Monthly Reporting to QR in November 2003. Federal SNAP regulations mandate that states using QR must exclude certain households from QR requirements: migrant or seasonal farmworkers households, households that have no earned income and in which all adult members are elderly or disabled, households where all members are homeless and Able Bodied Adults Without Dependents subject to the time limit rules. These households remained Change Reporters when CalFresh transitioned from QR to SAR in October 2013.
- Federal Simplified Reporting regulations (SAR in California) do not require that these households be excluded from SAR.
- The non-assistance CalFresh caseload is estimated to be approximately 1,886,929 in FY 2015-16 and 1,989,447 in FY 2016-17.
- Based on FY 2014-15 data, 40.64 percent of CalFresh households are in CalWIN counties.
- Based on FFY 2014 RADEP data, 0.32 percent of CalFresh households are change reporters with a six-month recertification period, 13.08 percent are change reporters with a 12-month recertification and 3.63 percent are change reporters with a 24-month recertification period. In total, 17.03 percent of CalFresh households are impacted by this premise.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Eliminate Change Reporting*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The elimination of Change Reporting will implement over the same number of months as the recipient's recertification periods.
- Approximately 25 percent of change reporters receive an over issuance at some point in the year and it takes 30 minutes of administrative time to resolve. The CalFresh and CFAP eligibility worker cost is $58.27 per hour. These over issuances will no longer occur, resulting in a savings of $29.14 per over issuance per year.
- Change Reporting requirements resulted in an average of two change reports per year. These reports will no longer be required under SAR, resulting in a savings of $21.74 per report per year for the eligibility worker time required to process change reports.
- Under SAR, one additional SAR 7 Eligibility Status Report is required for CalFresh households with no earned income that have 12-month or 24-month recertification periods. For 24-month recertification households with no earned income, the additional SAR 7 occurs at 12 months. Based on 2005 county time study data, the eligibility worker time required to process each report costs $15.25.
- Based on 2005 county time study data, 7.2 percent of the caseload would be subject to mid-period reporting and the cost to process a mid-period report is $28.23.
- The impact to CFAP is approximately one percent of the CalFresh impact.
- Mailing costs of $270,000 are included in FY 2015-16 to inform change reporting households of their transition to SAR.

METHODOLOGY:

- The administrative savings resulting from fewer over issuances is calculated by multiplying the impacted cases by 25 percent and then by the savings for the administrative time for an eligibility worker to resolve the over issuance.
- The administrative savings for eliminating change reports is calculated by multiplying the impacted cases by the savings of the eligibility worker time required to process two change reports per year.
- The administrative cost resulting from an additional SAR 7 Eligibility Status Report is calculated by multiplying the impacted cases by the cost of eligibility worker time required to process one SAR 7 Eligibility Status Report.
- The administrative cost resulting from mid-period reporting is calculated by multiplying the impacted cases by 7.2 percent and then by the cost of the eligibility worker time required to process the mid-period report.
- The total CalFresh Administration Eliminate Change Reporting savings is the value of the over issuance and change report savings netted against the cost for the additional SAR 7 report and mid-period change costs, plus the mailing costs.
- The CFAP Administration savings reflects one percent of the CalFresh Administration savings.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Eliminate Change Reporting*

FUNDING:

The CalFresh funding for administrative costs is 50 percent SNAP, 35 percent GF and 15 percent county funds. The CFAP funding is 100 percent GF. The automation funding is 50 percent SNAP and 50 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease in administration savings reflects delayed implementation and a lower percentage of CalFresh households that are change reporters. The increase in automation cost reflects updated projections from the SAWS Consortia.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase in administration savings reflects additional months of implementation. The decrease in automation cost reflects automation being completed in FY 2015-16.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 141 – CalFresh Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Eliminate Change Reporting	-$107	-$53	-$38	-$16	$0
Item 141 – CFAP Administration					
Eliminate Change Reporting	-1	0	-1	0	0
Item 141 – Automation Updates					
Eliminate Change Reporting	1,344	672	672	0	0
Total	$1,236	$619	$633	-$16	$0

	FY 2016-17				
Item 141 – CalFresh Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Eliminate Change Reporting	-$7,402	-$3,701	-$2,591	-$1,110	$0
Item 141 – CFAP Administration					
Eliminate Change Reporting	-74	0	-74	0	0
Item 141 – Automation Updates					
Eliminate Change Reporting	0	0	0	0	0
Total	-$7,476	-$3,701	-$2,665	-$1,110	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Statewide Automated Welfare System (SAWS)*

DESCRIPTION:

This premise reflects costs for SAWS Statewide Project Management and the SAWS Consortia. The Consortia includes LEADER, WCDS-CalWIN and C-IV, which are managed by OSI. The LEADER system only supports Los Angeles County; the WCDS-CalWIN system supports 18 counties and the C-IV system supports 39 counties.

IMPLEMENTATION DATE:

The LEADER implemented on July 1, 1994. The Statewide Project Management implemented on July 1, 1995. The WCDS-CalWIN implemented on July 1, 1997. The C-IV implemented on July 1, 1997.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 10823(a)
- The SAWS premise includes costs in FY 2015-16 for the Insurance Affordability Programs 24-Month Roadmap project, whose objective is to balance DHCS, Covered California, and county priorities with the capacity of automation partners CalHEERS, SAWS, and MEDS. Cost estimates are based on an analysis of the work completed in FY 2014-15 and the workload currently identified for inclusion on the 24-Month Roadmap.

Statewide Project Management

- The implementation advance planning document update occurred in December 2001 and was revised in May 2002.

LEADER

- The LEADER estimate reflects ongoing M&O costs.
- The FY 2015-16 estimate includes $4.4 million for LEADER to cover additional funding needed to support change requests identified on the 24-Month Roadmap.
- The county extended its contract in May 2007 to continue M&O services until the system designated to replace LEADER is implemented.
- A post-implementation evaluation report was approved in November 2006.
- The implementation advance planning document update occurred in June 2014.

WCDS - CalWIN

- The WCDS-CalWIN estimate reflects ongoing M&O costs.
- The FY 2015-16 estimate includes $7.0 million for WCDS-CalWIN to cover additional funding needed to support change requests identified on the 24-Month Roadmap.
- A post-implementation evaluation report was approved in August 2008.
- The implementation advance planning document update occurred in June 2014.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Statewide Automated Welfare System (SAWS)*

KEY DATA/ASSUMPTIONS (CONTINUED):

C-IV

- The C-IV estimate reflects ongoing M&O costs.
- The FY 2015-16 estimate includes $3.3 million for C-IV to cover additional funding needed to support change requests identified on the 24-Month Roadmap.
- The implementation advance planning document update occurred in June 2014.

METHODOLOGY:

Costs are based on implementation advance planning document updates and subsequent baseline adjustments.

FUNDING:

Funding for Statewide Project Management and the three consortia comes from various sources, which is determined by the sharing ratios of the benefitting programs. Federal funds include the standard shares of SNAP, Title IV-E and Refugee Resettlement Program funding. The Medi-Cal costs are eligible for Title XIX federal funding, which is disbursed through the DHCS' budget. Based on the cost allocation plan, the federal share of the CalWORKs program is funded entirely by TANF. The non-federal funding is GF and the county share of the CalFresh, FC and General Assistance/General Relief costs. The SAWS-related TANF funds are identified in the TANF Detail Table in the "Additional TANF/MOE Expenditures in CDSS" section.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase to Statewide Project Management reflects a baseline adjustment for retirement, salary and health benefit costs.

There is no change to LEADER.

The decrease to WCDS-CalWIN reflects a shift in Approved Relative Caregiver funding from FY 2015-16 to FY 2016-17.

The decrease to C-IV reflects a slight reduction in costs for the Covered California Customer Service Center M&O.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase to Statewide Project Management reflects a full year of baseline adjustments for retirement, salary and health benefits cost.

The decrease to LEADER reflects a reduction in production, operations and QA costs.

The increase to WCDS-CalWIN reflects a shift in Approved Relative Caregiver funding from FY 2015-16 to FY 2016-17.

The increase to C-IV reflects new and expanded county offices, text message functionality updates and an increase in the CalHEERS interface M&O costs.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Statewide Automated Welfare System (SAWS)*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 141 - Automation M&O and Updates	Total	Federal	State	County	Reimb.
Statewide Project Management	$6,958	$1,876	$3,194	$0	$1,888
LEADER	14,382	8,132	3,772	2,478	0
WCDS-CalWIN	116,232	25,394	45,247	6,180	39,411
C-IV	102,527	25,899	37,290	5,154	34,184

FY 2016-17

Item 141 - Automation M&O and Updates	Total	Federal	State	County	Reimb.
Statewide Project Management	$6,967	$1,879	$3,198	$0	$1,890
LEADER	11,770	6,655	3,087	2,028	0
WCDS-CalWIN	117,022	27,551	44,498	6,068	38,905
C-IV	103,462	25,594	38,995	5,381	33,492

CDSS/OSI PARTNERSHIP[1]	Total	CDSS	OSI
FY 2015-16	$240,099	$233,141	$6,958
FY 2016-17	$239,221	$232,254	$6,967

[1] The CDSS share reflects costs for the SAWS Consortia and the OSI share reflects State Project Management costs.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Welfare Data Tracking Implementation Project*

DESCRIPTION:

This premise reflects costs for the SAWS WDTIP. The WDTIP provides counties with the automated functionality required to conform to statewide tracking of time-on-aid requirements mandated by welfare reform in AB 1542 (Chapter 270, Statutes of 1997). The WDTIP tracks the 48 and 60 month assistance clocks, the 24 month services clock, WTW exemptions and sanctions. Project management for WDTIP is provided by OSI.

IMPLEMENTATION DATE:

This premise implemented on July 1, 1999.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 10851.5(b).
- A post-implementation evaluation report was approved in August 2008.

METHODOLOGY:

Costs are based on the January 2003 SAWS WDTIP implementation advance planning document update and subsequent baseline adjustments.

FUNDING:

The SAWS WDTIP funding is 100 percent TANF Block Grant. The SAWS related TANF funds are identified in the TANF detail table in the "Additional TANF/MOE Expenditures in CDSS" section.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects a baseline adjustment for retirement, salary and health benefit costs.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects a full year of a baseline adjustment for retirement, salary and health benefit costs.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Welfare Data Tracking Implementation Project *

EXPENDITURES:
(in 000s)

	FY 2015-16				
Item 141 – Automation M&O Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
WDTIP	$4,074	$4,074	$0	$0	$0

	FY 2016-17				
Item 141 – Automation M&O Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
WDTIP	$4,075	$4,075	$0	$0	$0

CDSS/OSI PARTNERSHIP	**Total**	**CDSS**	**OSI**
FY 2015-16	$4,074	$2,252	$1,822
FY 2016-17	$4,075	$2,252	$1,823

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Statewide Fingerprint Imaging System (SFIS)*

DESCRIPTION:

This premise reflects the costs for the SFIS. The W&IC section 10830 requires applicants and recipients of CalWORKs benefits to provide fingerprint images as a condition of eligibility.

The following persons must provide fingerprint images and a photo image: 1) each parent and/or caretaker relative of an aided or applicant child when living in the home of the child; 2) each parent and/or caretaker relative receiving or applying for aid on the basis of an unaided excluded child; 3) each aided or applicant adult; and 4) the aided or applicant pregnant woman in an AU consisting of the woman only. Failure to provide the required images will result in ineligibility for the entire AU.

The counties have the option to image applicants for county General Assistance or General Relief.

IMPLEMENTATION DATE:

Counties began implementation on March 14, 2000. The statewide implementation of SFIS was completed on December 7, 2000.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 10830.
- The FFP for CalWORKs was secured beginning in September 2009.
- The OSI cost estimates are based on the executed contract with the SFIS development contractor. Cost estimates are based on the following:
  - M&O vendor – The M&O vendor contract estimate is based on structured monthly M&O costs for state and county-operated workstations. This cost includes: vendor project staff; help desk; fingerprint examiners; system operators; lease/maintenance costs for host computer(s) (i.e., central site) and software development and maintenance.
  - Change control – Change control is necessary since there are always items not addressed in the request for proposal, which require changes in the program(s). These can be legislative, interface, capacity or workload changes that affect the new system.

METHODOLOGY:

The estimated costs are based on the executed contract for ongoing M&O services.

FUNDING:

The M&O automation project costs are funded with TANF and the General Assistance/General Relief costs are 100 percent county.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Statewide Fingerprint Imaging System (SFIS)*

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects baseline budget adjustments for retirement, salary and health care costs.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects a full year of baseline budget adjustments for retirement, salary and health care costs.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 141 – Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
SFIS	$12,313	$10,788	$0	$1,525	$0

	FY 2016-17				
Item 141 – Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
SFIS	$12,315	$10,790	$0	$1,525	$0

CDSS/OSI PARTNERSHIP	**Total**	**CDSS**	**OSI**
FY 2015-16	$12,313	$3,420	$8,893
FY 2016-17	$12,315	$3,420	$8,895

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Electronic Benefit Transfer (EBT) 3 Transition*

DESCRIPTION:

This premise reflects the costs associated with the EBT system transition to a new EBT service provider contract (known as EBT 3). The EBT system automates the issuance, delivery, redemption, settlement and reconciliation of California's food and cash assistance program benefits.

A new EBT services contract must be in place prior to the expiration of the current contract on March 27, 2018. The EBT 3 Request for Proposal was released in the summer of 2015 and a new EBT services contract will be awarded by early 2016. The transition to the new EBT system and other EBT-related services is scheduled to start in early 2016 (upon execution of the new contract) and will be completed no later than October 2017.

This is a joint effort with CDPH, who is federally required to transition the Women, Infants and Children Program food benefits from the current paper-based issuance to an automated EBT solution by October 1, 2020. The CDPH is contracting with OSI for EBT transaction processing and cardholder services. CDSS will serve as the EBT program sponsor. The Women, Infants and Children EBT implementation, which is dependent on both the replacement of CDPH's Women, Infants and Children management information system and the new EBT system, will be managed on a separate but parallel track.

This premise includes funds for the EBT 3 food and cash transition effort only, which includes a dedicated transition team (consultant resources) and one-time transition costs, if needed (paid to the selected EBT service provider). The CDPH is responsible for securing the federal funding and resources for the Women, Infants and Children EBT implementation component.

IMPLEMENTATION DATE:

This premise implements in FY 2015-16.

KEY DATA/ASSUMPTIONS:

Authorizing statute: W&IC section 10069.

METHODOLOGY:

Cost projections are based on the March 2014 Feasibility Study Report Reporting Exemption Request. Cost projections will be updated after the EBT 3 Intent to Award is announced.

FUNDING:

The EBT 3 transition is funded with federal SNAP and TANF program funds. Federal funds and GF are provided for CalFresh. Based on the cost allocation plan for the project, the federal share of the CalWORKs Program is 100 percent TANF-eligible. Project-related TANF funds are identified under the "Additional TANF/ MOE Expenditures in CDSS" section of the TANF detail table.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Electronic Benefit Transfer (EBT) 3 Transition*

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects updated one-time CDSS costs for independent verification and validation.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects a full year of consultant costs, milestone payments to the EBT 3 service provider and one-time CDSS costs for independent verification and validation and county transition efforts.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 141 – Automation M&O and Updates	Total	Federal	State	County	Reimb.
EBT 3 Transition	$1,612	$932	$680	$0	$0

FY 2016-17

Item 141 – Automation M&O and Updates	Total	Federal	State	County	Reimb.
EBT 3 Transition	$7,931	$4,587	$3,344	$0	$0

CDSS/OSI PARTNERSHIP	Total	CDSS	OSI
FY 2015-16	$1,612	$28	$1,584
FY 2016-17	$7,931	$3,769	$4,162

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Electronic Benefit Transfer (EBT) System*

DESCRIPTION:

This premise reflects the costs for the California EBT system, which is responsible for the automated issuance, delivery, redemption, settlement and reconciliation of California's food and cash aid program benefits. The California EBT system provides recipients with electronic access to food and cash aid benefits through the use of magnetic-stripe cards at point-of-sale terminals and automated teller machines.

IMPLEMENTATION DATE:

This premise implemented in FY 2005-06.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 10069.
- The benefiting programs under the EBT Project include the CalWORKs Program, CalFresh, CFAP, RCA, SUAS**,** CAPI and General Assistance/General Relief.

METHODOLOGY:

Cost projections are based on the November 2007 EBT Implementation Advance Planning Document and Amendment Number 3 of the Xerox State & Local Solutions, Inc. contract, which was executed on November 20, 2014.

FUNDING:

The EBT system is funded with federal funds, GF and county funds. Federal funds are provided for CalWORKs and RCA. Federal funds, GF and county funds are provided for CalFresh. GF is provided for CFAP, CAPI, SUAS and RCA. GF and county funds are provided for General Assistance/General Relief. Based on the cost allocation plan for the project, the federal share of the CalWORKs program is 100 percent TANF-eligible. Project-related TANF funds are identified in the TANF detail table in the "Additional TANF/ MOE Expenditures in CDSS" section.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects baseline budget adjustments for retirement, salary and health care costs.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects a full year of baseline budget adjustments for retirement, salary and health care costs and projected caseload increases.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Electronic Benefit Transfer (EBT) System*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 141 – Automation M&O and Updates	Total	Federal	State	County	Reimb.
EBT M&O	$32,323	$18,377	$9,966	$3,980	$0

FY 2016-17

Item 141 – Automation M&O and Updates	Total	Federal	State	County	Reimb.
EBT M&O	$32,371	$18,403	$9,981	$3,987	$0

CDSS/OSI PARTNERSHIP	Total	CDSS	OSI
FY 2015-16	$32,323	$0	$32,323
FY 2016-17	$32,371	$0	$32,371

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

SAWS/CalHEERS Interface Development*

DESCRIPTION:

This premise reflects costs for modifications to the SAWS Consortia systems to establish interfaces between CalHEERS and SAWS. The development of CalHEERS was authorized by the California Health Benefit Exchange under the ACA, PL 111-148. These interfaces are necessary as SAWS is the system of record for case management purposes for all cases determined to be eligible for modified adjusted gross income Medi-Cal. The interface between CalHEERS and SAWS provides real-time data sharing between the systems, including sharing Medi-Cal eligibility determination results from CalHEERS to SAWS. It also provides the ability to collect and share data elements necessary to perform Medi-Cal case management activities. The approved CalHEERS design requires that modifications be made to SAWS to accommodate successful implementation of the ACA.

IMPLEMENTATION DATE:

This premise implemented modifications to the SAWS Consortia systems beginning in FY 2012-13.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Government Code sections 100502 and 100503 and 42 United States Code section 18031.
- This estimate reflects development, implementation and M&O costs.
- In FY 2015-16 the CalHEERS interface development will be completed and ongoing costs for M&O will transition to the SAWS project budgets in FY 2016-17.

METHODOLOGY:

Costs are based on the March 2014 as-needed SAWS/CalHEERS implementation advance planning document update and subsequent updates from the SAWS Consortia.

FUNDING:

For development and implementation activities related to SAWS staffing, 86.27 percent of the costs are Title XIX eligible (90 percent federal funds and ten percent GF). The remaining 13.73 percent is Title XXI eligible (65 percent federal funds and 35 percent GF).

For development and implementation activities and M&O related to the actual interface, ten percent of the costs are funded by the California Health Benefit Exchange (100 percent federal funds). Title XIX eligible costs are 77.64 percent (90 percent federal funds and ten percent GF during development and implementation and 75 percent federal funds and 25 percent GF during M&O). The remaining 12.36 percent is Title XXI eligible (65 percent federal funds and 35 percent GF). With the exception of the GF portion of Title XIX, which is budgeted at CDSS, the remaining funds will be reimbursed to CDSS by DHCS.

Medi-Cal enhancements due to the ACA are funded by Medi-Cal (90 percent federal funds and ten percent GF).

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

SAWS/CalHEERS Interface Development*

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects a shift in funding for C-IV automation from FY 2014-15 to FY 2015-16.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects the ongoing costs of CalHEERS M&O activities transitioning to the SAWS budgets.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 141 - Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
SAWS/CalHEERS Interface Development.	$1,998	$0	$201	$0	$1,797

	FY 2016-17				
Item 141 - Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
SAWS/CalHEERS Interface Development	$0	$0	$0	$0	$0

CDSS/OSI PARTNERSHIP	**Total**	**CDSS**	**OSI**
FY 2015-16	$1,998	$1,998	$0
FY 2016-17	$0	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

SAWS Customer Service Centers Expansion*

DESCRIPTION:

This premise reflects the cost for expansion of CWD customer service centers under the three SAWS Consortia to provide increased services for Medi-Cal eligibility and enrollment. These expansions will leverage the current county call center infrastructure to interface with Covered California/CalHEERS centralized customer service centers. This will fulfill requirements of the Patient Protection and ACA, PL 111-148, including the ability to transfer potentially Medi-Cal-eligible clients' enrollment and eligibility information from Covered California to the consortia/counties. The OSI provides state-level project management for SAWS. Costs for staff planning, implementation and training activities are provided through DHCS.

IMPLEMENTATION DATE:

This premise implemented in June 2013.

KEY DATA/ASSUMPTIONS:

- Funding for the SAWS Consortia's support of the Covered California centralized service center model is not included in the California Health Benefit Exchange/CalHEERS Implementation Advanced Planning Document.
- The scope of the expansion will consist of development and implementation.

METHODOLOGY:

The total costs reflect expansion costs of CWD customer service centers for all three SAWS Consortia and their counties.

FUNDING:

Funding for the expansion cost is 90 percent federal funds and ten percent GF during development and implementation.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects the completion of development and implementation. The M&O is reflected in the SAWS premise.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

SAWS Customer Service Centers Expansion*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 141 - Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
SAWS Customer Service Centers	$1,376	$0	$138	$0	$1,238

FY 2016-17

Item 141 - Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
SAWS Customer Service Centers	$0	$0	$0	$0	$0

CDSS/OSI PARTNERSHIP	**Total**	**CDSS**	**OSI**
FY 2015-16	$1,376	$1,376	$0
FY 2016-17	$0	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Horizontal Integration*

DESCRIPTION:

This premise will fund the SAWS Consortia for the necessary programming changes to allow individuals transferred from the Covered California health application to complete a streamlined application for CalFresh and CalWORKs through the SAWS online system portals.

IMPLEMENTATION DATE:

This premise implemented in July 2015.

KEY DATA/ASSUMPTIONS:

- Covered California and DHCS are utilizing a Change Request for the CalHEERS system to make necessary changes to:
  - Screen applicants after completion of their health application for potential eligibility for CalFresh and CalWORKs.
  - Present a screen for the applicants based on the screening results that either passively offers the option to apply for other social service programs or actively encourages them to complete the application process.
  - Applicants who select the option to apply will be transferred to www.benefitscal.com where they can select their county and immediately move forward with their CalFresh or CalWORKs application on the spot through the SAWS Consortia.
- The ACA requires that individuals using the streamlined application will not need to provide additional information unless required to apply for additional programs. The cost includes functionality that would allow questions to be "dynamically" displayed to the customer to meet the requirement that they are only providing information for the specific programs for which they chose to apply. Adding dynamic questioning will provide a consistent consumer experience across all counties. The LEADER and WCDS-CalWIN already have the dynamic questioning functionality. The cost for this functionality is included for C-IV.
- This proposal is tracked on the 24-Month Roadmap for completion in June of 2016. Horizontal Integration funding, however, is separately identified and not included in the SAWS requests for funding through each consortium project.

METHODOLOGY:

The total costs reflect the SAWS Consortia programming efforts to complete a streamlined application for CalFresh and CalWORKs from the CalHEERS.

FUNDING:

The funding comes from CalFresh and CalWORKs programs and is determined by the sharing ratios of each benefitting program. Based on the cost allocation plan, the federal share of the CalWORKs program is funded entirely by the TANF Program Block Grant. The SAWS-related TANF funds are identified in the TANF detail table in the "Additional TANF/MOE Expenditures in CDSS" section.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Horizontal Integration*

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects the completion of this effort in FY 2015-16.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 141 – Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
Horizontal Integration	$3,021	$1,810	$1,211	$0	$0

	FY 2016-17				
Item 141 – Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
Horizontal Integration	$0	$0	$0	$0	$0

CDSS/OSI PARTNERSHIP	**Total**	**CDSS**	**OSI**
FY 2015-16	$3,021	$3,021	$0
FY 2016-17	$0	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

CalWORKs SB 1041 Automation*

DESCRIPTION:

This premise reflects the implementation of policy changes reflected in SB 1041 (Chapter 47, Statutes of 2012). SB 1041 redesigned the CalWORKs program by creating a WTW 24-Month Time Clock with the possibility of grant extensions and created a new CalWORKs exemption for a parent or caretaker relative personally providing care to a child from birth through 23 months of age. SB 1041 also restored the $225 EID and implemented reporting changes for a subset of CalWORKs cases.

IMPLEMENTATION DATE:

This premise implemented in FY 2012-13.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 11322.85 through 11322.87.
- This premise reflects automation costs only.
- Automation changes will be completed in FY 2015-16.
- The FY 2015-16 funding within this premise relates to funding needed to reimburse the SAWS Consortia for work completed for the RAND Study; other program changes were completed in previous FYs.

METHODOLOGY:

The total cost is based on cost estimates from the WCDS-CalWIN, C-IV and the LEADER system (the SAWS Consortia).

FUNDING:

Funding for CalWORKs automation changes is 100 percent TANF funds.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects a reduction in the funds needed to reimburse the SAWS Consortia for unexpected costs required for the RAND Study.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 decrease reflects automation changes being completed in FY 2015-16.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs SB 1041 Automation*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 141 – Automation M&O Updates	Total	Federal	State	County	Reimb.
CalWORKs SB 1041 Automation	$582	$582	$0	$0	$0

FY 2016-17

Item 141 – Automation M&O Updates	Total	Federal	State	County	Reimb.
CalWORKs SB 1041 Automation	$0	$0	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

SB 1341 Automation*

DESCRIPTION:

This premise reflects the costs of automation required to allow the SAWS Consortia to be the system of record for Medi-Cal. This automation will allow SAWS to generate NOAs for households with Medi-Cal-only or households with combined Medi-Cal and Applied Income Premium Tax Credit programs. Integrating additional programming into SAWS will allow county Medi-Cal eligibility staff to reject and correct erroneous CalHEERS eligibility decisions. This will ensure that beneficiaries are correctly notified of actions taken on their public assistance applications and/or cases. This will result in greater ease-of-use for recipients and less administrative burden on counties.

IMPLEMENTATION DATE:

This premise implemented on January 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing Statute: W&IC section 10823.
- Development/modification of notice-generation functionality within SAWS and CalHEERS is anticipated to occur in two phases:
  - Phase I - Notice generation of Modified Adjusted Gross Income Medi-Cal notices in SAWS:
    - Obtain and interpret Modified Adjusted Gross Income Medi-Cal eligibility determination result/reason codes from CalHEERS
    - Generate and send Modified Adjusted Gross Income Medi-Cal notices
    - Anticipated to be complete January 2016
  - Phase II - Notice generation of Mixed Household Notices in SAWS:
    - Obtain and interpret Modified Adjusted Gross Income Medi-Cal and Applied Income Premium Tax Credit eligibility determination result/reason codes from CalHEERS
    - Generate and send notices for mixed households receiving a combination of Modified Adjusted Gross Income Medi-Cal, non- Modified Adjusted Gross Income Medi-Cal, and/or Applied Income Premium Tax Credit subsidies
    - Anticipated to be complete June 2017
- The FY 2015-16 automation cost reflects $2.95 million to C-IV, $2.21 million to WCDS-CalWIN, $1.47 million to LEADER and $2.17 million to LRS.
- The FY 2016-17 automation cost reflects $8.01 million to C-IV, $3.03 million to WCDS-CalWIN and $4.78 million to LRS. No funding is required for LEADER.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

SB 1341 Automation*

METHODOLOGY:

Costs are provided for each consortium's programming effort to function as the system of record for Medi-Cal and to program NOAs for Medi-Cal into their systems.

FUNDING:

The funding is 50 percent GF and 50 percent reimbursement.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects the transition to Phase II which requires more resources to support the detailed design phase. This funding is consistent with Table 2-1 of the Advanced Planning Document.

EXPENDITURES:

(in 000s)

			FY 2015-16		
Item 141 – Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
SB 1341 Automation	$8,805	$0	$4,403	$0	$4,402

			FY 2016-17		
Item 141 – Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
SB 1341 Automation	$15,820	$0	$7,910	$0	$7,910

CDSS/OSI PARTNERSHIP	**Total**	**CDSS**	**OSI**
FY 2015-16	$8,805	$8,805	$0
FY 2016-17	$15,820	$15,820	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

CalFresh Outreach Automated Reports*

DESCRIPTION:

This premise reflects the automation costs for SAWS Consortia to produce monthly, automated reports for the CalFresh Outreach program. The reports are the result of a CDSS effort to monitor contract compliance and program deliverables for this program.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2015.

KEY DATA/ASSUMPTIONS:

- Funding is based on a one-time funding shift approved by the FNS from the CalFresh Outreach Program in FY 2014-15.
- The FY 2015-16 funding is for WCDS-CalWIN automation costs. The C-IV and LEADER automation was completed in FY 2014-15.

METHODOLOGY:

The cost reflects the approved federal funding for the CalFresh Outreach Automated Reports automation, based on cost estimates provided by each SAWS consortium.

FUNDING:

The funding is 100 percent SNAP.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects the completion of automation in FY 2015-16.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 141 – Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
CalFresh Outreach Automated Reports	$130	$130	$0	$0	$0

	FY 2016-17				
Item 141 – Automation M&O and Updates	**Total**	**Federal**	**State**	**County**	**Reimb.**
CalFresh Outreach Automated Reports	$0	$0	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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Income Eligibility Verification System (IEVS) Automation*

DESCRIPTION:

This premise reflects costs to research off-the-shelf systems that could be used for enhancements to IEVS, which is used to verify eligibility for individuals receiving aid and reduce the incidence of fraud in CalWORKs and CalFresh. The current paper intensive process requires significant time to manually review reports, resulting in high administrative workload and security risks.

IMPLEMENTATION DATE:

This premise implemented in July 2013.

KEY DATA/ASSUMPTIONS:

The upfront planning of the IEVS enhancements is $50,000 in FY 2015-16.

METHODOLOGY:

The total cost is the held amount for upfront planning of the IEVS enhancements.

FUNDING:

This program is funded 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects the completion of planning for this delegated project in FY 2015-16.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 141 – Automation	**Total**	**Federal**	**State**	**County**	**Reimb.**
IEVS Automation	$50	$0	$50	$0	$0

	FY 2016-17				
Item 141 – Automation	**Total**	**Federal**	**State**	**County**	**Reimb.**
IEVS Automation	$0	$0	$0	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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LEADER Replacement System (LRS)*

DESCRIPTION:

This premise reflects costs for the LRS project. The LEADER consortium is one of three county consortia within SAWS and is composed solely of Los Angeles County. The OSI provides state-level project management for SAWS. The LRS project currently includes the design, development and implementation activities for a system to replace LEADER and the planning phase for the migration of the C-IV consortium to LRS.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2007.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 10823(a).
- Planning activities for the LRS project began in July 2005.
- The evaluation and selection process concluded in July 2009.
- Contract negotiations concluded in May 2010.
- Contract execution and design, development and implementation activities began in November 2012.
- The LRS premise includes costs in FY 2015-16 for the Insurance Affordability Programs 24-Month Roadmap project, whose objective is to balance DHCS, Covered California, and county priorities with the capacities of automation partners CalHEERS, SAWS and MEDS. Cost estimates are based on an analysis of the work completed in FY 2014-15 and the workload currently identified for inclusion on the 24-Month Roadmap.
- Planning for the C-IV migration to LRS began in FY 2015-16 and will continue through FY 2016-17.

METHODOLOGY:

Costs are calculated based on the timeframes outlined in the LRS Implementation Advance Planning Document Update/Special Project Reports.

FUNDING:

The LRS funding comes from various sources, determined by the sharing ratios of the benefitting programs. Federal funds include the standard shares of the SNAP and Refugee Assistance Program funding. Medi-Cal costs are eligible for Title XIX federal funding, which is disbursed through the DHCS budget. These costs are also eligible for an enhanced FMAP funding and cost allocation relief. This FFP provides funding for Medi-Cal technology investments, including eligibility systems, through a 90 percent federal/ten percent GF match for design, development and implementation work through December 2015.

The FY 2015-16 estimate includes $5.5 million for LRS to cover additional funding needed to support change requests identified on the 24-Month Roadmap.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

LEADER Replacement System (LRS)*

FUNDING (CONTINUED):

In addition, federal guidance provides for cost allocation relief for other programs utilizing system functionality developed for Medi-Cal. Based on the cost allocation plan, the federal share of the CalWORKs program is funded entirely by the TANF program block grant. The balance of the funding is GF and the county share of CalFresh, FC and General Assistance/General Relief costs. The SAWS-related TANF funds are identified in the TANF detail table in the "Additional TANF/MOE Expenditures in CDSS" section.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects updated payment schedules for fixed price deliverables and updated estimates for QA costs. The decrease is somewhat offset by a realignment of services payments and estimated travel costs for C-IV migration planning.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects the transition from design, development and implementation to M&O, as well as the completion of Approved Relative Caregiver automation.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 141 – Automation Projects	Total	Federal	State	County	Reimb.
LRS	$101,794	$13,938	$23,695	$5,770	$58,391

FY 2016-17

Item 141 – Automation Projects	Total	Federal	State	County	Reimb.
LRS	$87,463	$21,704	$26,472	$6,497	$32,790

CDSS/OSI PARTNERSHIP	Total	CDSS	OSI
FY 2015-16	$101,794	$101,269	$525
FY 2016-17	$87,463	$87,318	$145

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

County Expense Claim Reporting Information System*

DESCRIPTION:

This premise reflects the replacement of the existing County Expense Claim and CA-800 County Assistance Claim databases with one integrated system. The existing County Expense Claim and CA-800 County Assistance Claim and their supporting business processes have gone beyond their functional capacity and present a significant risk of system failure. The new CECRIS will improve data access, analysis and the accuracy of administrative and assistance expenditure data for all 58 counties in California. Automating these processes will also ensure that all costs are reimbursed in accordance with federal cost allocation requirements in order to maintain federal funding.

IMPLEMENTATION DATE:

This premise implemented on February 14, 2012.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC 10604.
- The total amount of projected funds needed to develop the new system is $426,790 in FY 2015-16 and $1,180,062 in FY 2016-17.
- The funded project activities include an interagency agreement with OSI, contracted services for procurement support, organizational change management, software purchase/license, and Statewide Technology Procurement Division procurement facilitation fees and Independent Validation and Verification costs.
- The new system will benefit most of the programs administered by CDSS and a subset of the Medi-Cal Program costs that are claimed through the County Expense Claim.
- The CECRIS was suspended in January 2015. The project remains in the initiation and planning phase and has not entered procurement. Development is projected to be complete in FY 2017-18. CDSS is working with the California Department of Technology on development, which will resume upon approval of an updated Special Project Report and receipt of federal approval. The California Department of Technology approval is expected in December 2015. Federal approval is expected in the spring of 2016.

METHODOLOGY:

The costs reflect the CECRIS Special Project Report which includes the contracted services for procurement support, the projected cost of the Business Change Management contract and the software development costs.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

County Expense Claim Reporting Information System*

FUNDING:

The funding comes from various sources, determined by the sharing ratios of the benefiting programs. Federal funds include the standard shares of SNAP, Title IV-E and Refugee Resettlement Program funding. The Medi-Cal costs are eligible for Title XIX federal funding, which is disbursed through DHCS' budget. Based on the cost allocation plan, the federal share of the CalWORKs program is funded entirely by the TANF block grant. The non-federal funding is 100 percent GF. The SAWS-related TANF funds are identified in the TANF detail table in the "Additional TANF/MOE Expenditures in CDSS" section. Because of the current suspension and lack of federal approval, FY 2015-16 funding is displayed as 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects shifting project costs from FY 2015-16 to FY 2016-17.

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects shifting project costs from FY 2015-16 to FY 2016-17.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 141 – Automation Projects	**Total**	**Federal**	**State**	**County**	**Reimb.**
County Expense Claim Reporting Information System	$427	$0	$427	$0	$0

	FY 2016-17				
Item 141 – Automation Projects	**Total**	**Federal**	**State**	**County**	**Reimb.**
County Expense Claim Reporting Information System	$1,180	$672	$437	$0	$71

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

State Hearings Division
Appeals Case Management System*

DESCRIPTION:

This premise reflects costs for a new Appeals Case Management System to replace the current compilation of mainframe database and ad-hoc applications which support the State Hearings process. A new Appeals Case Management System is essential to reduce processing errors, reduce case-processing time at the division and county levels and reduce state-paid penalties based upon the current State Hearings Division workload. The new system will also help mitigate penalties for untimely processing of appeal hearings.

IMPLEMENTATION DATE:

This premise implemented July 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 10950.
- Costs consist of IT project contract services costs and personnel costs for support staff at OSI.
- The IT project contract services costs include software license, software independent verification and validation services and other contract services.

METHODOLOGY:

Project contract costs are consistent with the Feasibility Study Report, which was approved by the California Department of Technology on January 10, 2014.

FUNDING:

The Appeals Case Management Systems funding comes from various resources determined by the sharing ratios of the benefiting programs. Federal funds include the standard shares of the TANF/CalWORKs and CalFresh SNAP funding. Medi-Cal and IHSS costs are eligible for Title XIX federal funding, which is disbursed through the DHCS budget. The Appeals Case Management Systems-related TANF funds are identified in the TANF detail table in the "Additional TANF/MOE Expenditures in CDSS" section.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects a project schedule shift that is offset by baseline budget adjustments (Retirement and Employee Compensation).

REASON FOR YEAR-TO-YEAR CHANGE:

The increase reflects baseline budget adjustments (Retirement and Employee Compensation).

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

State Hearings Division
Appeals Case Management System*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 141 – Automation Projects	Total	Federal	State	County	Reimb.
State Hearings Division Appeals Case Management Systems	$2,006	$477	$721	$0	$808
Appeals Case Management Systems – TANF**	263	263	0	0	0

FY 2016-17

Item 141 – Automation Projects	Total	Federal	State	County	Reimb.
State Hearing Division Appeals Case Management Systems	$4,286	$1,020	$1,539	$0	$1,727
Appeals Case Management Systems – TANF**	561	561	0	0	0

CDSS/OSI PARTNERSHIP	Total	CDSS	OSI
FY 2015-16	$2,006	$319	$1,687
FY 2016-17	$4,286	$360	$3,926

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**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

State Contracts County Reimbursement*

DESCRIPTION:

This premise reflects $32.7 million LRF reimbursement authority for statewide contracts, including the Private Agency Adoptions Reimbursement Program, the Chafee Post Secondary ETV Program and Health Care Oversight for Children in FC, among others that were realigned. Prior to 2011 Realignment, CDSS managed several CWS contracts that had a statewide benefit. Under 2011 Realignment, the GF for these contracts shifted to the LRF. Because these contracts have a statewide benefit, in conjunction with CWDA, CDSS continues to administer and manage the contracts and is reimbursed by counties.

In order for CDSS to receive reimbursement for these contract costs, a Contract Special Account was created within the LRF Protective Services Subaccount to reimburse funds for these contracts. The San Francisco County Social Services Agency is the designated county to administer this account.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2012.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Government Code section 30029.8.
- CDSS established an MOU with San Francisco County.
- CDSS' contract administration and oversight costs are reimbursed with LRF funds by the San Francisco County Social Services Agency.
- There is $32,721,000 in reimbursement authority for contract services and CDSS' administration and oversight costs.

METHODOLOGY:

The reimbursement authority is statutorily held at $32,721,000.

FUNDING:

The funding for this program is 100 percent reimbursement from the Contract Special Account, administered by San Francisco Social Services Agency, created within the LRF Protective Services Subaccount. On a monthly basis, the SCO deposits LRF in the Contract Special Account. CDSS invoices San Francisco County Social Services Agency for the reimbursement of the contracted services funded under this account.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

State Contracts County Reimbursement*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
State Contracts County Reimbursement	$32,721	$0	$0	$0	$32,721

FY 2016-17

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
State Contracts County Reimbursement	$32,721	$0	$0	$0	$32,721

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CWS Consolidated Federal Grants*

DESCRIPTION:

This premise reflects the following CWS federal grants: PSSF, PSSF Increased Funding for Caseworker Visits, Chafee ILP and Chafee ETV. These grants provide funding for services to support and preserve families, protect children, prevent child abuse and neglect, facilitate the transition of foster children to emancipated lifestyles and assist youth in the development of skills necessary to lead independent and productive lives.

IMPLEMENTATION DATE:

Each program within the CWS Consolidated Federal Grants has its own implementation date.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 106909.3 and 16600 through 16604.5, PL 107-133 and Social Security Act section 477.
- The PSSF grant amount is estimated to be $31.4 million annually.
- The PSSF Increased Funding for Caseworker Visits grant amount is estimated to be $2.0 million annually.
- The state operations costs utilizing PSSF funds are $1.2 million annually.
- The Chafee ILP grant amount is estimated to be $18.5 million annually.
- The state operations costs utilizing Chafee ILP funds are $1.6 million annually.
- The Chafee ILP grant hold-back amount for the California Youth Connection is $200,000 annually.
- The Chafee ETV grant amount is estimated to be $6.0 million annually.

METHODOLOGY:

The total costs are calculated by summing the federal grant awards, less state operations costs and grant hold-back amounts.

FUNDING:

Federal funding is provided by Title IV-B and Title IV-E of the Social Security Act. The grants require matching funds provided from a portion of 2011 Realignment. Funding is reflected as 100 percent federal funds because these grants use in-kind funds from the LRF as match funds.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The increase reflects increased PSSF and PSSF Increased Funding for Caseworker Visits grant amounts.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CWS Consolidated Federal Grants*

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
CWS Consolidated Federal Grants	$54,941	$54,941	$0	$0	$0

FY 2016-17

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
CWS Consolidated Federal Grants	$54,941	$54,941	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

California Partners for Permanency (CAPP)*

DESCRIPTION:

This premise reflects five grant awards distributed to California over five years from the federal ACF for a cumulative total of $14.5 million. The federal grants support the implementation of local demonstration projects that test the effectiveness of innovative intervention strategies to improve permanency outcomes for foster children in California, in particular African American and Native American youth who have been identified as having significant barriers to permanency. Projects funded by the grants address site-specific issues in order to help children move from FC to permanency in less than three years. Program and financial status reports are due 30 days after the end of the second and fourth quarters (six-month intervals) throughout the total approved project period.

IMPLEMENTATION DATE:

This premise implemented on October 1, 2010.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Social Security Act section 426.
- The participating counties are: Fresno, Humboldt, Los Angeles and Santa Clara.
- This premise is based on FFY grant amounts.
- The CAPP five-year project period ended September 30, 2015.
- For FY 2015-16, a 12-month no-cost extension period has been requested.
- The projected carryover funds from FY 2014-15 are $1.95 million which will be spent in FY 2015-16.
- The FY 2015-16 projected state operations costs are $101,962.

METHODOLOGY:

The total costs are calculated by subtracting the state operations costs from the carryover funds.

FUNDING:

Federal funding is provided by Title IV-B and Title IV-E of the Social Security Act. The grants require matching funds provided from a portion of 2011 Realignment. Funding is reflected as 100 percent federal funds because these grants use in-kind funds from the LRF as match funds

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects a reduction in the state operations hold back amount and the no-cost extension period in which new grants are not awarded, slightly offset by an increase in the projected carryover funds.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

California Partners for Permanency (CAPP)*

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17decrease reflects the end of the five-year program.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
CAPP	$1,848	$1,848	$0	$0	$0

	FY 2016-17				
Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
CAPP	$0	$0	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Child Welfare Training Program*

DESCRIPTION:

This premise reflects the costs of providing a statewide coordinated training program designed specifically to meet the needs of county social workers assigned to ER, FM, FR, PP and Adoption responsibilities. The Child Welfare Training Program includes training for other public agencies, including county probation departments, who provide child welfare case management services. The training is provided through contracts entered into by CDSS with the California Social Work Education Center, UC Berkeley and Judicial Resources and Technical Assistance, among many others. The training includes crisis intervention, investigative techniques, rules of evidence, indicators of abuse and neglect, assessment criteria, intervention strategies, family-based services, legal requirements of child protection, indicators of mental health needs, case management and the use of community resources.

IMPLEMENTATION DATE:

This premise implemented on July 1, 1988. Regional training academies implemented in 1996.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 16200 through 16215.
- In-kind match from university contributions is used to draw down a portion of the federal Title IV-E funds.
- The percent of federally eligible costs is 66 percent for the 58-county estimate.

METHODOLOGY:

The estimate is based on contract costs.

FUNDING:

Federal funding is provided by Title IV-E of the Social Security Act, with the amount of FFP based on 75 percent for direct training and curriculum development and 50 percent for administration costs associated with the training. Funding for nonfederal costs is 100 percent GF, with the exception of various contracts which utilize in-kind match from university contributions.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The net increase reflects increased federal Title IV-E match and university contributions.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 increase reflects increases to the tribal, psychotropic medications and Resource Family Approval training contracts.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Child Welfare Training Program*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
Child Welfare Training Program	$28,548	$17,286	$11,262	$0	$0

FY 2016-17

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
Child Welfare Training Program	$29,047	$17,526	$11,521	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Pass-Through Title IV-E*

DESCRIPTION:

This premise reflects the pass-through of federal Title IV-E funds for eligible probation administrative costs, other public agencies' administrative costs, Title IV-E University Stipend program for social worker training, Administrative Office of Courts training costs for county counsel/court appointed special advocates and Foster and Kinship Care Education Program costs.

The state received federal approval to pass-through Title IV-E administrative funds for county probation staff activities that are similar to the Title IV-E eligible tasks of county child welfare social workers. The federal funds are passed through to the county probation departments for federally-eligible activities related to probation supervised cases in FC and for Title IV-E eligible training of probation staff completing case management activities on behalf of these children.

The federal government allows Title IV-E reimbursement for administrative activities associated with pre-placement prevention. Under current CDSS regulations and specified conditions, counties may pass-through Title IV-E funds to other public agencies, such as those responsible for education or mental health when they perform eligible administrative activities for children at risk of or currently placed in FC. This pass-through provision does not apply to similar activities performed by private non-profit organizations.

The Title IV-E University Stipend Program is a statewide training program to increase the number of social workers employed in CWDs with a Master of Social Work degree. This effort was initiated since regulations require at least 50 percent of a county's staff who provide ER and FM services to possess either a Master of Social Work or equivalent. Currently, there are 20 schools of social work participating. In this program, the in-kind match is provided by the universities.

The Administrative Office of the Courts coordinates and oversees training via a contract with statewide and local training providers who provide short-term training to enhance social workers, court appointed special advocates and county counsel's understanding of the judicial determination process and necessary court findings on behalf of children in FC.

The Foster and Kinship Care Education Program is conducted through community colleges in consultation with CDSS and key state foster and caregiver associations. The CCC Proposition 98 funds are used as matching funds to draw down federal Title IV-E funds for the provision of education and training to foster parents and kinship care providers.

IMPLEMENTATION DATES:

- Pass-through funds for probation administrative costs implemented in June 1991.
- The Title IV-E University Stipend Program implemented in FY 1992-93.
- Pass-through funds for other public agencies implemented in FY 2003-04.
- Administrative Office of the Courts training implemented in FY 2005-06.
- Foster and Kinship Care Education Program implemented in FY 2005-06 after incorporating the Foster Parent Training Fund (FY 1990-91) and the Foster Parent Training Program (FY 1998-99).

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Pass-Through Title IV-E*

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 16003.
- The probation administrative pass-through costs for FY 2015-16 and FY 2016-17 are $13.9 million and are based on the 49-county actual expenditures from FY 2014-15.
- The other public agencies' administrative pass-through funds for FY 2015-16 and FY 2016-17 are $653,728 and are based on the 49-county actual expenditures from FY 2014-15.
- The Title IV-E University Stipend Program contract costs are $36.6 million federal funds for FY 2015-16. Federal funds for FY 2016-17 are $37.6 million with an additional $3.8 million GF for a total of $41.4 million for FY 2016-17. Costs for FY 2016-17 include additional federal funds and GF to cover a portion of the universities' indirect costs.
- The Administrative Office of the Courts training contract is $726,698 for FY 2015-16 and $752,577 for FY 2016-17.
- The federal portion of the Foster and Kinship Care Education Program's contract is $4.4 million for FY 2015-16 and $4.6 million FY 2016-17.
- The percent of federally eligible costs is 65 percent in FY 2015-16 and 66 percent in FY 2016-17 for the 58-county estimated contract costs.

METHODOLOGY:

The Title IV-E total pass-through costs are calculated by summing the eligible costs for probation administration, other public agencies' administration, Title IV-E University Stipend Program, Administrative Office of the Courts training and Foster and Kinship Care Education Program.

FUNDING:

Federal funding is provided by Title IV-E of the Social Security Act. For non-contract costs, the nine Title IV-E California Well-Being Project counties do not receive FFP as the federal funds for the Project are capped. For the Title IV-E University Stipend Program, indirect costs are funded with GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects decreases in the actual probation expenditures and the federal discount rate, slightly offset by an increase in other public agencies' actual expenditures.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 increase reflects increases in the Administrative Office of Courts training contract, the federal discount rate and the Title IV-E University Stipend Program contract.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Pass-Through Title IV-E*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
Pass-Through Title IV-E	$56,366	$56,366	$0	$0	$0

FY 2016-17

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
Pass-Through Title IV-E	$61,247	$58,701	$2,546	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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CWS/CMS Ongoing Maintenance and Operations*

DESCRIPTION:

This premise reflects the costs related to the ongoing and administrative support of the CWS/CMS. As mandated by W&IC section 16501.5, the CWS/CMS provides a comprehensive database, case management tool and reporting system for the CWS program. It contains both current and historical information for all children statewide in ER, FM, FR, PP and Adoptions and provides FC reports mandated by sponsoring and funding agencies.

The CWS/CMS provides: 1) immediate statewide data on referrals for children at risk of abuse, neglect or exploitation; 2) immediate case status and case tracking for children and families receiving CWS; 3) necessary information and forms required to determine eligibility for the AFDC-FC Program; 4) tracking of all placement activities for children in FC; and 5) issuance of the appropriate NOA messages, court reports and service plans. The system also produces all required state and federal reports. State level project management for CWS/CMS is provided by OSI, who administers the projects under an interagency agreement with CDSS.

IMPLEMENTATION DATE:

This premise became effective in FY 1995-96.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 16501.5.
- Costs represent ongoing M&O associated with support and oversight of the CWS/CMS.
- Costs include the wide-area network and infrastructure hosting services provided by the state data center, OSI administrative support and vendor costs related to contracted application and technical architecture support services.

METHODOLOGY:

The total costs are based on the CWS/CMS M&O plan and subsequent adjustments.

FUNDING:

The cost allocation is based on the CDSS Operational Cost Allocation Plan approved by the DHHS, Division of Cost Allocation. Project-related TANF funds are identified in the TANF detail table in the "Additional TANF/ MOE Expenditures in CDSS" section.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The net increase reflects baseline budget adjustments

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 decrease reflects the ongoing budget decrease due to the redirection of nine positions from CWS/CMS to CWS-NS per the CWS-NS Budget Change Proposal.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CWS/CMS Ongoing Maintenance and Operations*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
CWS/CMS M&O	$80,258	$40,252	$35,287	$0	$4,719

FY 2016-17

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
CWS/CMS M&O	$78,603	$39,440	$34,541	$0	$4,622

CDSS/OSI PARTNERSHIP	Total	CDSS	OSI
FY 2015-16	$80,258	$32,723	$47,535
FY 2016-17	$78,603	$32,227	$46,376

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CWS-New System Project*

DESCRIPTION:

This premise reflects the costs associated with the development and implementation of the CWS-NS Project, which will replace the aging CWS/CMS. In order to effectively protect California's at risk children and preserve families, a multi-agency collaborative service approach supported by a comprehensive case management system is required. The case management system must provide data exchanges with other systems, support evolving mobile computing devices and have enhanced and expanded operational functionality to meet CWS business needs and federal Statewide Automated Child Welfare Information System requirements.
The new system must have robust case, process and outcome data reporting capabilities, to ensure state and county-level analysis for program monitoring, evaluation and policymaking.

IMPLEMENTATION DATE:

This premise was implemented in July 2013.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 16501.5.
- Costs presented are associated with the support and oversight of the CWS-NS Project.

METHODOLOGY:

Costs are based on the staffing, consultant services and operating expenses and equipment in support of the CWS-NS Project.

FUNDING:

The funding for this program is determined by the sharing ratios of the benefitting programs which is based on CDSS' Operational Cost Allocation Plan approved by the DHHS, Division of Cost Allocation. Federal funds include TANF, Title IV-E and Title XIX. The remaining portion is funded with GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects the rescheduling of county transition and Operational Change Management costs to be consistent with the revised project schedule included in Special Project Report #2, slightly offset by increased baseline budget adjustments.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 increase reflects the budget adjustments requested in the 2016-17 Budget Change Proposal, consistent with Special Project Report #2, as well as baseline budget adjustments.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CWS-New System Project*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
CWS-NS Project	$10,732	$5,452	$4,649	$0	$631

FY 2016-17

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
CWS-NS Project	$12,055	$6,124	$5,222	$0	$709

CDSS/OSI PARTNERSHIP	Total	CDSS	OSI
FY 2015-16	$10,732	$2,469	$8,263
FY 2016-17	$12,055	$2,690	$9,365

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

County Children's Trust Funds*

DESCRIPTION:

This premise reflects funding for community child abuse prevention activities generated through the Department of Motor Vehicles' "Have a Heart, Be a Star, Help our Kids" license plate program. Fees from this program are distributed into the state's Child Health and Safety Fund and accessed by counties through each of the 58 County Children's Trust Funds.

IMPLEMENTATION DATE:

This premise implemented in FY 1992-93.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 18285 and Vehicle Code section 5072.
- Up to 25 percent of the actual license plate revenue may be used for child abuse prevention. County Children's Trust Funds receive 22.5 percent of the actual plate revenue while the remaining 2.5 percent is included in the State Children's Trust Fund Program premise.
- The FY 2013-14 actual revenues are used to estimate the funds available in FY 2015-16, and FY 2014-15 actual revenues are used to estimate the funds available in FY 2016-17.
- The actual license plate revenue was $4,134,000 for FY 2013-14 and $4,003,598 for FY 2014-15.

METHODOLOGY:

The total funds available are calculated by multiplying the actual license plate revenue by 22.5 percent.

FUNDING:

Funding is 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 decrease reflects updated actual license plate revenues.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

County Children's Trust Funds*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
County Children's Trust Funds	$930	$0	$930	$0	$0

FY 2016-17

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
County Children's Trust Funds	$901	$0	$901	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CWS Program Improvement Fund*

DESCRIPTION:

This premise reflects donated grants, gifts or bequests made to the state from private sources to be deposited into the CWS Program Improvement Fund. This fund enhances the state's ability to provide a comprehensive system of support to promote positive outcomes for children and families.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2005.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 16524.
- The expected donations are $4.0 million GF each FY, which will be used to provide training and are eligible for matching federal funds at the 75 percent enhanced rate for those cases meeting federal eligibility criteria.
- The percent of federally eligible costs is 66 percent in FY 2015-16 and FY 2016-17 for the 58-county estimate.

METHODOLOGY:

The total costs are calculated by summing the expected donations with the amount of FFP.

FUNDING:

Donated funds are 100 percent GF, payable from the CWS Program Improvement Fund. Federal funding is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 75 percent enhanced rate for those cases meeting federal eligibility criteria.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CWS Program Improvement Fund*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
CWS Program Improvement Fund	$7,921	$3,921	$4,000	$0	$0

FY 2016-17

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
CWS Program Improvement Fund	$7,921	$3,921	$4,000	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Reports of Child Near Fatalities*

DESCRIPTION:

This premise reflects the costs associated with compiling and publishing reports and disclosing information on all near fatalities caused by suspected child abuse or neglect as required by federal CAPTA. This includes costs to bring California into compliance with new federally mandated child near fatality reporting and disclosure requirements.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: CAPTA section 106(b)(2) and PL 111-320.
- The FY 2015-16 projected number of near fatalities is 135 incidents statewide. Of those, 67 cases will occur in the nine Title IV-E California Well-Being Project counties.
- The FY 2016-17 projected number of near fatalities is 147 incidents statewide. Of those, 72 cases will occur in the nine Title IV-E California Well-Being Project counties.
- Each child near fatality report and disclosure takes 64 hours of social worker time to complete.
- The social worker cost per hour is $72.60.
- The percent of federally eligible costs is 69 percent in FY 2015-16 and 68 percent in FY 2016-17 for the 49-county estimate. The nine Title IV-E California Well-Being Project counties do not receive FFP as the federal funds for the Project are capped.

METHODOLOGY:

The total cost is calculated by multiplying the projected number of cases by the social worker time necessary to complete each report and then multiplied by the hourly social worker cost.

FUNDING:

Federal funding for the 49 counties is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 50 percent administration rate for those cases meeting federal eligibility criteria.

The responsibility for child welfare and protective services was realigned to the counties in 2011 as part of 2011 Public Safety Realignment. Pursuant to Proposition 30, subsequent changes in federal statutes or regulations that alter the conditions under which federal matching funds as described in 2011 Realignment Legislation are obtained, and have the overall effect of increasing the costs incurred by a local agency, require the state to annually fund 50 percent of the non-federal share of these costs as determined by the state. Therefore, funding for the remaining non-federal costs for all 58 counties is 50 percent GF and 50 percent county. Only the GF and county share of cost is reflected for the nine Title IV-E California Well-Being Project counties as the federal funds for the Project are capped.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Reports of Child Near Fatalities*

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 increase reflects an increase in the projected caseload.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Reports of Child Near Fatalities	$315	$109	$103	$103	$0
Item 153 – Title IV-E Project					
Reports of Child Near Fatalities	214	0	107	107	0
Total	$529	$109	$210	$210	$0

FY 2016-17

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Reports of Child Near Fatalities	$348	$118	$115	$115	$0
Item 153 – Title IV-E Project					
Reports of Child Near Fatalities	230	0	115	115	0
Total	$578	$118	$230	$230	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CWS Case Record Reviews*

DESCRIPTION:

This premise reflects funding for the additional federally mandated activities for California Child and Family Services Reviews. As outlined in the August 27, 2012 federal ACF Children's Bureau memorandum 12-07, funds are needed to comply with federal requirements for a state Continuous Quality Improvement system. In addition, a method for conducting ongoing case reviews to measure the quality of casework provided by CWDs is needed. California's existing Continuous Quality Improvement system does not contain this element.

Similar to the federal Child and Family Services Review process, the new CWS case record reviews include an extensive online review process and in-depth interviews for individuals involved in the case plan for each case selected to undergo review. The reviews include interviews with children, parents, social workers, foster parents and service providers to examine both the quantitative and qualitative aspects of social service delivery. The reviews also ensure that social service requirements are being met. Each CWD and county probation department performs reviews on an ongoing basis, at least monthly for child welfare and at least quarterly for probation. The sample size must be representative of the entire continuum of CWS from the ER hotline to post permanency. The review findings are to be aggregated, analyzed and summarized for inclusion in the County Self-Assessment or System Improvement Plan.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 10601.2.
- The FY 2015-16 projected FTEs are 155 statewide. Of those, the nine Title IV-E California Well-Being Project counties will have 31 FTEs.
- The FY 2016-17 projected FTEs are 155 statewide. Of those, the nine Title IV-E California Well-Being Project counties will have 32 FTEs.
- The statewide annual unit cost is $129,074 per FTE.
- The percent of federally eligible costs is 69 percent in FY 2015-16 and 68 percent in FY 2016-17 for the 49-county estimate. The nine Title IV-E California Well-Being Project counties do not receive FFP as the federal funds for the Project are capped.

METHODOLOGY:

The total cost of case record reviews is calculated by multiplying the number of FTEs for each county by the annual unit cost.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

CWS Case Record Reviews*

FUNDING:

Federal funding for the 49 counties is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 50 percent administration rate for those cases meeting federal eligibility criteria.

The responsibility for child welfare and protective services was realigned to the counties in 2011 as part of 2011 Public Safety Realignment. Pursuant to Proposition 30, subsequent changes in federal statutes or regulations that alter the conditions under which federal matching funds as described in 2011 Realignment legislation are obtained, and have the overall effect of increasing the costs incurred by a local agency, require the state to annually fund 50 percent of the nonfederal share of these costs as determined by the state. Therefore, funding for the remaining nonfederal costs for all 58 counties is 50 percent GF and 50 percent county. Only the GF and county share of cost is reflected for the nine Title IV-E California Well-Being Project counties as the federal funds for the Project are capped.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 net decrease reflects the updated county redistribution of FTEs. The GF and county funds increase reflects a decrease in the federal discount rate.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
CWS Case Record Reviews	$16,006	$5,522	$5,242	$5,242	$0
Item 153 – Title IV-E Project					
CWS Case Record Reviews	2,706	0	1,353	1,353	0
Total	$18,712	$5,522	$6,595	$6,595	$0

FY 2016-17

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
CWS Case Record Reviews	$15,876	$5,398	$5,239	$5,239	$0
Item 153 – Title IV-E Project					
CWS Case Record Reviews	2,794	0	1,397	1,397	0
Total	$18,670	$5,398	$6,636	$6,636	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Services to Commercially Sexually Exploited Children (CSEC)*

DESCRIPTION:

This premise reflects the funding for prevention, intervention, services and training for the state and federal CSEC Program. California has a significant CSEC population and many of the children being subjected to commercial sexual exploitation are in FC or in runaway status from FC.

Funding was provided in FY 2015-16 for counties to complete federally required CSEC activities from the Preventing Sex Trafficking and Strengthening Families Act (PL 113-183) and for state CSEC program activities for counties that opted in. The PL 113-183 requires child welfare agencies to develop and implement CSEC policies and procedures, develop and implement protocols for missing/runaway foster youth, notify law enforcement of CSEC and missing/runaway foster youth, input CSEC data into CWS/CMS, train social workers on CSEC and identify, document and determine appropriate services for children in FC who are victims or at risk of becoming victims of child sex trafficking.

Counties that elected to participate in state CSEC activities received funding for specialized services for the commercially sexually exploited child population.

IMPLEMENTATION DATE:

This premise implemented on January 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 16524.7 through 16524.10.
- Funding for the state and federal CSEC programs is $14.0 million GF annually.

Federal CSEC

- In FY 2016-17, $1.2 million GF statewide will be provided for the completion of the federal CSEC requirements.
- The statewide annual cost is $129,074 per social worker FTE.
- It is assumed 0.25 FTE is required for the development, implementation and maintenance of CSEC policies and procedures and 0.25 FTE is required for the development and implementation of protocols for missing/runaway youth.
- The social worker cost per hour is $72.60.
- Thirty minutes of social worker time is required to notify law enforcement of incidents involving CSEC youth within 24 hours of the incident occurring.
- The projected number of CSEC is 7,856 statewide in FY 2016-17.
- Thirty minutes of social worker time is required per case to notify law enforcement of missing and runaway youth from FC within 24 hours.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Services to Commercially Sexually Exploited Children (CSEC)*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The projected number of missing and runaway youth from FC who are possible CSEC is 1,226 for FY 2016-17.
- Thirty minutes of social worker time is required per case, for youth at risk of becoming CSEC victims, to collect and input federally required data elements into CWS/CMS and two hours of social worker time is required to complete screenings with these youth.
- The projected number of youth at risk of becoming victims of commercial sexual exploitation is 2,000 statewide for FY 2016-17.
- Six hours of social worker time is required per case to determine appropriate services for newly identified CSEC youth.
- The projected number of cases being identified as CSEC after screening at-risk youth in FY 2016-17 is 1,000 statewide.
- Two hundred probation placement officers statewide will require one day of CSEC training at an average cost of $75 per day.

State CSEC

- Thirty-eight counties will elect to participate in the state program in FY 2016-17.
- In FY 2016-17, $12.8 million GF will be provided for the completion of the state optional CSEC program, which is not eligible for FFP

METHODOLOGY:

The federal CSEC program costs are determined by:

- The time necessary to develop and implement policies and procedures for both CSEC and runaways is multiplied by the number of counties.
- The time required to notify law enforcement of incidents involving CSEC youth is multiplied by the projected number of CSEC statewide.
- The time required to notify law enforcement is multiplied by the number of missing and runaway youth from FC who are possible CSEC.
- The time required to collect and input federally required data elements plus the time required to complete screenings is multiplied by the number of youth at risk of becoming victims of commercial sexual exploitation statewide.
- The time required to determine appropriate services is multiplied by the number of newly identified CSEC youth.
- The average cost for one day of CSEC training is multiplied by the number of probation placement officers statewide.

The state CSEC program costs are the remaining GF.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Services to Commercially Sexually Exploited Children (CSEC)*

FUNDING:

Federal CSEC

For the probation placement officer training, federal funding is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 75 percent enhanced training rate for those cases meeting federal eligibility criteria. Funding for the non-federal costs for all 58 counties is 100 percent GF.

For administrative activities, federal funding for the 49 counties is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 50 percent administration rate for those cases meeting federal eligibility criteria.

The responsibility for child welfare and protective services was realigned to the counties in 2011 as part of 2011 Public Safety Realignment. Pursuant to Proposition 30, subsequent changes in federal statutes or regulations that alter the conditions under which federal matching funds as described in 2011 Realignment legislation are obtained, and have the overall effect of increasing the costs incurred by a local agency, require the state to annually fund 50 percent of the non-federal share of these costs as determined by the state. Therefore, funding for the remaining non-federal costs for all 58 counties is 50 percent GF and 50 percent county. Only the GF and county share of funding is reflected for the nine Title IV-E California Well-Being Project counties as the federal funds for the Project are capped.

State CSEC

The GF used for services in the state optional CSEC program is not eligible for FFP; therefore, the state CSEC program service funding for the 58 counties is 100 percent GF.

The responsibility for child welfare and protective services was realigned to the counties in 2011 as part of 2011 Public Safety Realignment. Pursuant to Proposition 30, legislation enacted after September 30, 2012, that has the overall effect of increasing the costs incurred by a local agency for programs or levels of service mandated by 2011 Realignment shall apply to local agencies only to the extent that the state provides annual funding for the cost increase. Local agencies are not obligated to provide programs or levels of service required by legislation above the level for which funding has been provided. Therefore, funding for the remaining non-federal costs for all 58 counties is 100 percent GF. Only the GF share of funding is reflected for the nine Title IV-E Well-Being Project counties as the federal funds for the Project are capped

CURRENT YEAR CHANGE FROM APPROPRIATION:

The net decrease reflects a change in the federal discount rate and an increase in the services for the state CSEC program.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 net decrease reflects a decrease in the federally eligible cases for the federal CSEC program.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Services to Commercially Sexually Exploited Children (CSEC)*

EXPENDITURES:

(in 000s)

			FY 2015-16		
Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Services to CSEC	$11,423	$3,533	$6,338	$1,552	$0
Item 153 – Title IV-E Project					
Services to CSEC	8,551	0	7,662	889	0
Total	$19,974	$3,533	$14,000	$2,441	$0

			FY 2016-17		
Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Services to CSEC	$9,035	$1,876	$6,225	$934	$0
Item 153 – Title IV-E Project					
Services to CSEC	8,060	0	7,775	285	0
Total	$17,095	$1876	$14,000	$1,219	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

After 18 Terminated Guardianship and Adoption*

DESCRIPTION:

This premise reflects the costs associated with expanding the categories of eligible non-minors who can return to FC. Non-minors who are under the age of 21 and who received aid after attaining 18 years of age under Kin-GAP, Fed-GAP or AAP may petition the court for a hearing to determine whether or not they are eligible, under the provisions of W&IC section 388.1, and able to return to FC.

If re-entry and remaining in FC are in the non-minor's best interest, the court can assume dependency jurisdiction over the non-minor and order placement and care responsibility with the child welfare agency.

To qualify, the youth must be either:

- A non-minor former dependent who received aid after attaining 18 years of age under the state or federal Kin-GAP Program and whose former guardian(s) no longer provide ongoing support to, and no longer receive aid on behalf of, the non-minor; or
- A non-minor dependent who received AAP after attaining 18 years of age and whose adoptive parent(s) no longer provide ongoing support to, and no longer receive aid on behalf of, the non-minor.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 388.1, 11400 and 11403.
- Funding for this premise reflects the After 18 Program administrative costs, including basic staffing, child relationships, increased funding for social worker visits, health oversight and coordination, criminal background checks, personalized transition plans and foster youth identity theft. For more information on these realigned components, please refer to the 2011 May Revision binder.
- Three percent of the Kin-GAP, Fed-GAP and AAP cases aged 18 to 21 will re-enter FC, resulting in 19 cases annually.
- The social worker cost per hour is $72.60.
- The percent of federally eligible costs is 66 percent for the 58-county estimate.

METHODOLOGY:

The total cost is calculated by summing the administrative components.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

After 18 Terminated Guardianship and Adoption*

FUNDING:

Federal funding is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 50 percent administrative rate for those cases and programs meeting federal eligibility criteria.

The responsibility for child welfare and protective services was realigned to the counties in 2011 as part of 2011 Public Safety Realignment. Pursuant to Proposition 30, legislation enacted after September 30, 2012, that has the overall effect of increasing the costs incurred by a local agency for programs or levels of service mandated by 2011 Realignment, shall apply to local agencies only to the extent that the state provides annual funding for the cost increase. Local agencies are not obligated to provide programs or levels of service required by legislation above the level for which funding has been provided. Therefore, funding for the remaining non-federal costs for all 58 counties is 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
After 18 Terminated Guardianship	$112	$39	$73	$0	$0

FY 2016-17

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
After 18 Terminated Guardianship	$112	$39	$73	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Sibling Visitations*

DESCRIPTION:

This premise reflects the costs associated with the state mandated sibling visitations for children who are wards of the juvenile court. The statute requires county child welfare and probation social workers to provide additional detailed information in court reports regarding sibling visitation for children in FC. Social workers court reports are now required to include:
1) whether visits between siblings not placed together are supervised or unsupervised; 2) the reasons for any supervision; 3) what needs to be accomplished to have unsupervised visitation; 4) the length and location of the visits; and 5) any plan to increase visitation between the siblings.

Social workers will also be required to assess sibling relationships between dependent and non-dependent siblings. Dependent siblings can now petition the court to assert a relationship and request visitation with a non-dependent sibling residing with a common legal or biological parent.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statutes: W&IC sections 358.1, 361.2, 362.1, 366, 366.1, 366.3, 388, 706.6, 778 and 16002.
- For FY 2016-17, there are 17,080 cases statewide that have dependent siblings. Of those, 8,943 cases are in the nine Title IV-E California Well-Being counties.
- One hour of social worker time is required to complete the additional documentation required for dependent siblings to describe the frequency and nature of sibling visits.
- For FY 2016-17, there are 13,801 cases statewide that have only non-dependent siblings. Of those, 7,582 cases are in the nine Title IV-E California Well-Being counties.
- For FY 2016-17, there are 6,818 cases statewide that have both dependent and non-dependent siblings. Of those, 3,555 cases are in the nine Title IV-E California Well-Being counties.
- Six hours of social worker time is required to compile and document the additional information that needs to be included in social study and evaluation reports and presented at status review hearings.
- The social worker cost per hour is $72.60.
- The percent of federally eligible costs is 68 percent in FY 2016-17 for the 49-county estimate. The nine Title IV-E California Well-Being Project counties do not receive FFP as the federal funds for the Project are capped.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Sibling Visitations*

METHODOLOGY:

The administrative costs for dependent and non-dependent siblings is calculated by multiplying the applicable cases by the social worker time, then by the hourly social worker rate. The total costs are calculated by summing the costs associated with dependent siblings and/or non-dependent siblings.

FUNDING:

Federal funding for the 49 counties is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 50 percent administration rate for those cases meeting federal eligibility criteria.

The responsibility for child welfare and protective services was realigned to the counties in 2011 as part of 2011 Public Safety Realignment. Pursuant to Proposition 30, legislation enacted after September 30, 2012, that has the overall effect of increasing the costs incurred by a local agency for programs or levels of service mandated by 2011 Realignment shall apply to local agencies only to the extent that the state provides annual funding for the cost increase. Local agencies are not obligated to provide programs or levels of service required by legislation above the level for which funding has been provided. Therefore, funding for the remaining nonfederal costs for all 58 counties is 100 percent GF. Only the GF share is reflected for the nine Title IV-E California Well-Being Project counties as the federal funds for the Project are capped.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 net decrease reflects an updated funding distribution for Title IV-E California Well-Being Project counties.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Sibling Visitations	$4,721	$1,629	$3,092	$0	$0
Item 153 – Title IV-E Project					
Sibling Visitations	3,788	0	3,788	0	0
Total	$8,509	$1,629	$6,880	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Sibling Visitations*

EXPENDITURES (CONTINUED):
(in 000s)

	FY 2016-17				
Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Sibling Visitations	$4,721	$1,605	$3,116	$0	$0
Item 153 – Title IV-E Project					
Sibling Visitations	3,778	0	3,778	0	0
Total	$8,499	$1,605	$6,894	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Interagency Child Abuse and Neglect Reporting*

DESCRIPTION:

Starting in 1980, there have been multiple changes to statutes under the Child Abuse and Neglect Reporting Act requiring child protection and law enforcement agencies to submit information on perpetrators of substantiated instances of child abuse or neglect to DOJ, and to cross-report to other agencies. Some of the changes resulted in the filing of a state mandated claim requiring mandated reporters to: 1) submit a new Interagency Child Abuse and Neglect report form to DOJ, 2) continue to cross report to other agencies, and 3) complete other reporting activities for child abuse and neglect. Initially, funding for these reporting requirements was provided to counties, with a required county share. A test claim was filed in 2001 with the Commission on State Mandates, alleging that reporting provisions of the Child Abuse and Neglect Reporting Act constituted an unfunded state mandate for local law enforcement, probation and county CWS staff. The Commission on State Mandates found in favor of the claimant agency by determining there were additional requirements that constituted a state mandate. Eligible claimants were required to file initial reimbursement claims for costs incurred between July 1, 1999, and June 30, 2013, with the SCO by July 15, 2014. The CWDs and county probation departments that receive mandated reports have filed claims with SCO to receive ongoing reimbursements for the increased costs. Funding for this premise reflects the ongoing costs to cover the county share for the activities that were determined to be a state mandate.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Penal Code section 11164.
- The ongoing projected statewide claims are $4.0 million annually.

METHODOLOGY:

The costs reflect the ongoing projected statewide claims by the CWDs and county probation departments for the county share of the costs.

FUNDING:

The funding is 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Interagency Child Abuse and Neglect Reporting*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Interagency Child Abuse and Neglect Reporting	$4,000	$0	$4,000	$0	$0

FY 2016-17

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Interagency Child Abuse and Neglect Reporting	$4,000	$0	$4,000	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Strengthening Families Act*

DESCRIPTION:

This premise reflects costs associated with the federal Preventing Sex Trafficking and Strengthening Families Act (PL 113-183). The Act requires additional administrative activities consisting of six components. There are six components to PL 113-183, five of which are included in this premise. The sixth component, CSEC, is included in the Services to CSEC premise. The five components are as follows:

1) Another Planned Permanent Living Arrangement is a PP option for long-term foster youth who do not reunify with their family, are not adopted or do not enter guardianship. The Act limits the availability of this option to those children who are 16 years of age or older and requires states to document to the court procedures related to the distribution of child support collected for youth with Another Planned Permanent Living Arrangement permanency plan.
2) The Act extends successor guardian and transition plan requirements under Chafee ILP by requiring youth to be involved in the development of or changes to their case plans. Specifically, social workers must consult with youth in developing the case plan and give youth the opportunity to choose two members of their case planning team who are not the social worker or foster parent. Social workers must also explain rights to youth in a developmentally-appropriate manner and obtain signed acknowledgement that the youth understands their rights. Additionally, the Act requires credit report checks for foster youth aged 14 and 15 each year until the youth is discharged from care. The foster youth receives assistance in interpreting and resolving any inaccuracies in the report.
3) The Act defines a "reasonable and prudent parent standard" and mandates that a caregiver must use the reasonable and prudent parent standard when determining whether to allow a child to participate in extracurricular, enrichment, cultural and social activities. The Act also requires documentation of the steps the state has taken to ensure the child's foster family home or child care institution is following the reasonable and prudent parent standard.
4) The Act modifies current requirements for relative notification to include notifying parents of the dependent child's sibling. The relative notification must include the birth or adoptive parents of a dependent child's sibling, in addition to the adult relatives who must be identified and notified when a child is removed from his or her home. Counties must provide all located relatives with written and oral notification unless notification is inappropriate.
5) The Act also requires counties to collect and input complete and accurate data on pregnant minors and non-minor dependents. This collection of information is done through the state's CWS/CMS.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2015.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Strengthening Families Act*

KEY DATA/ASSUMPTIONS:

- Authorizing statute: PL 113-183.
- The social worker cost per hour is $72.60.
- The percent of federally eligible costs is 68 percent in FY 2015-16 and FY 2016-17 for the 49-county estimate. The nine Title IV-E California Well-Being Project counties do not receive FFP as the federal funds for the Project are capped.

Another Planned Permanent Living Arrangement

- The projected number of cases in long-term FC under age 16 is 5,129 statewide for FY 2015-16 and FY 2016-17.
- Seven hours of additional social worker time is required per case per year to actively work towards guardianship and adoption case plan goals for all children under the age of 16 who can no longer have a permanent case plan goal of Another Planned Permanent Living Arrangement.
- The projected number of cases in long-term FC aged 16 to 21 is 11,409 statewide for FY 2015-16 and FY 2016-17.
- Seven hours of additional social worker time is required per case per year for court documentation of youth in Another Planned Permanent Living Arrangement placements aged 16 to 21 and towards the additional time required for activities in regards to efforts to place these youth permanently with a parent, relative, guardianship or adoptive placement.

Transition Plans

- The projected number of CWS and probation youth aged 14 to 15 is 6,508 statewide for FY 2015-16 FY 2016-17.
- One hour and 15 minutes of additional social worker time is required per case per year to involve youth and non-minor dependents in the development of or changes to their case plans/transition plans.
- The projected number of CWS and probation youth aged 14 and 15 is 5,589 statewide for FY 2015-16 and 6,282 for FY 2016-17.
- Approximately 23 percent of youth will have a credit report.
- One hour of additional social worker time is required per case per year to follow-up with youth that have a credit report and clear up inaccuracies.

Reasonable and Prudent Parent Standard

- The projected number of CWS and probation cases is 125,339 statewide for FY 2015-16 and 125,559 for FY 2016-17.
- Fifteen minutes of social worker time is required per case per year for increased documentation regarding the Reasonable and Prudent Parent Standard.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Strengthening Families Act*

KEY DATA/ASSUMPTIONS (CONTINUED):

Notification of Relatives

- The projected number of CWS and probation youth that have a non-dependent sibling is 20,858 statewide for FY 2015-16 and FY 2016-17. Of those, each youth will have two non-dependent siblings in a two-parent household.
- Fifteen minutes of social worker time is required per case per year to provide notice to the parents of a child who is a sibling to a child in FC regarding the foster child's removal and to obtain contact information if not provided by the foster child's parent/family and to prepare and provide (call or mail) the notice.

Pregnant Minors and Non-Minor Dependents

- The projected number of female CWS and probation cases age 13 to 21 years old is 11,479 statewide for FY 2015-16 and FY 2016-17. Of those, 291 cases (approximately 2.3 percent) are projected to be pregnant.
- Thirty minutes of social worker time is required per case per year to collect and input federally-required data elements into CWS/CMS.

METHODOLOGY:

The costs for each component are calculated by multiplying the number of projected cases by the social worker time, then by the hourly social worker cost. The total cost is calculated by summing the costs for each of the five components.

FUNDING:

Federal funding for the 49 counties is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 50 percent administration rate for those cases meeting federal eligibility criteria. Federal funding for training is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 75 percent enhanced training rate for those cases meeting federal eligibility criteria.

The responsibility for child welfare and protective services was realigned to the counties in 2011 as part of 2011 Public Safety Realignment. Pursuant to Proposition 30, subsequent changes in federal statutes or regulations that alter the conditions under which federal matching funds as described in 2011 Realignment legislation are obtained, and have the overall effect of increasing the costs incurred by a local agency, require the state to annually fund 50 percent of the non-federal share of these costs as determined by the state. Only the GF and county share of funding is reflected for the nine Title IV-E California Well-Being Project counties as the federal funds for the Project are capped.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Strengthening Families Act*

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 decrease reflects the annualized costs.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Strengthening Families Act	$6,528	$2,252	$2,138	$2,138	$0
Item 153 – Title IV-E Project					
Strengthening Families Act	4,770	0	2,385	2,385	0
Total	$11,298	$2,252	$4,523	$4,523	$0

FY 2016-17

Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Strengthening Families Act	$5,946	$2,022	$1,962	$1,962	$0
Item 153 – Title IV-E Project					
Strengthening Families Act	4,252	0	2,126	2,126	0
Total	$10,198	$2,022	$4,088	$4,088	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Psychotropic Medications Data*

DESCRIPTION:

This premise seeks to establish a contract to match Medi-Cal and FC data at regular intervals. This data match is a new effort to meet part of the federal requirements under PL 112-34. There is currently insufficient capacity at DHCS and CDSS to produce needed data at the intervals required by federal regulations.

Federal requirements mandate that a state's health care oversight plan include an outline of protocols for the appropriate use and monitoring of psychotropic medications. To meet the federal requirements, California has engaged with DHCS and stakeholders to develop guidelines, protocols and educational materials. The CDSS and DHCS have conducted cross-system data matching to inform policy decisions for effective oversight and monitoring. The contract will allow for data analysis, including case specific information and for the information to be shared with counties. Counties will use the information to improve administration and oversight of psychotropic medications at the local level.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: PL 112-34.
- The projected contract cost is $100,000 GF.
- The percent of federally eligible costs in FY 2015-16.

METHODOLOGY:

The total contract cost is calculated by summing the GF amount with the projected FFP.

FUNDING:

Federal funding is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 50 percent administration rate for those cases meeting federal eligibility criteria. Funding for the remaining non-federal costs is 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects a funding shift from CWS administration for state operations.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Psychotropic Medications Data*

EXPENDITURES:
(in 000s)

			FY 2015-16		
Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Psychotropic Medications Data	$0	$0	$0	$0	$0

			FY 2016-17		
Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Psychotropic Medications Data	$0	$0	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Family Reunification (FR) Services Extension for Dependent Parents*

DESCRIPTION:

This premise provides funding to extend FR services from 18 months up to 24 months. Extension of FR services is dependent on a minor parent or non-minor dependent parent making substantial progress on their court ordered FR plan and the courts determining that extending FR services is in the best interests of the minor parent's or non-minor dependent parent's child.

IMPLEMENTATION DATE:

This premise will implement on July 1, 2016.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: SB 68 (Chapter 284, Statutes of 2015), W&IC sections 366.21 and 366.22.
- The projected FY 2015-16 and FY 2016-17 average monthly caseload that will be eligible to receive an additional six months of FR services is 13 cases.
- All cases that are eligible to receive FR services beyond 18 months will utilize all six months of additional FR services.
- Five children will be reunified with their minor parent or non-minor dependent parent after receiving extended FR services from 18 months to 24 months and will not require an ongoing PP.
- Eight children will not be reunified with their minor parent or non-minor dependent parent after receiving extended FR services from 18 months to 24 months and will require an ongoing PP.
- The projected FY 2015-16 and FY 2016-17 monthly administrative cost per case for the 58-county estimate is $790 for FR cases and $395 for PP cases.
- The percent of federally eligible costs is 69 percent in FY 2015-16 and FY 2016-17 for the 49-county estimate. The nine Title IV-E Well-Being Project counties do not receive FFP as the federal funds for the Project are capped.

METHODOLOGY:

The net costs are calculated by multiplying the projected number of children who are not reunified with their minor parent or non-minor dependent parent by the PP cost per case. This cost is annualized to obtain the FY impact.

FUNDING:

Federal funding is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the 50 percent administrative rate for those cases and programs meeting federal eligibility criteria.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Family Reunification (FR) Services Extension for Dependent Parents*

FUNDING (CONTINUED):

The responsibility for child welfare and protective services was realigned to the counties in 2011 as part of 2011 Public Safety Realignment. Pursuant to Proposition 30, legislation enacted after September 30, 2012, that has the overall effect of increasing the costs incurred by a local agency for programs or levels of service mandated by 2011 Realignment, shall apply to local agencies only to the extent that the state provides annual funding for the cost increase. Local agencies are not obligated to provide programs or levels of service required by legislation above the level for which funding has been provided. Therefore, funding for the remaining non-federal costs for all 58 counties is 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

This new premise implements in FY 2016-17.

REASON FOR YEAR-TO-YEAR CHANGE:

The is a new premise.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
FR Services Extension for Dependent Parents	$0	$0	$0	0	0
Item 153 – Title IV-E Project					
FR Services Extension for Dependent Parents	0	0	0	0	0
Total	$0	$0	$0	$0	$0

	FY 2016-17				
Item 151 – CWS Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
FR Services Extension for Dependent Parents	$24	$8	$16	$0	$0
Item 153 – Title IV-E Project					
FR Services Extension for Dependent Parents	12	0	12	0	0
Total	$36	$8	$28	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Indian Child Welfare Act Compliance*

DESCRIPTION:

This premise will provide one-time funding for Live Scan machines for tribes to conduct criminal background checks to establish a pool of tribally approved foster homes. Increasing the number of tribal foster homes available will improve California's compliance with SB 1460 (Chapter 772, Statutes of 2014) and the Indian Child Welfare Act, which requires keeping tribal children within their tribal community.

IMPLEMENTATION DATE:

This premise will implement on July 1, 2016.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 381, 827.15 and 10553.12 and PL 95-608.
- Twenty tribes will purchase a Live Scan machine in FY 2016-17.
- The cost of a Live Scan machine is $11,295 total funds.

METHODOLOGY:

The total cost is calculated by multiplying the number of Live Scan machines by the cost per machine.

FUNDING:

Federal funding is provided by Title IV-E of the Social Security Act, with the FFP based on 50 percent for administrative costs.

CURRENT YEAR CHANGE FROM APPROPRIATION:

This premise implements in FY 2016-17.

REASON FOR YEAR-TO-YEAR CHANGE:

This is a new premise.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Indian Child Welfare Act Compliance*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
Indian Child Welfare Act Compliance	$0	$0	$0	$0	$0

FY 2016-17

Item 151 – CWS Administration	Total	Federal	State	County	Reimb.
Indian Child Welfare Act Compliance	$226	$113	$113	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Office of Child Abuse Prevention (OCAP) Federal Grants*

DESCRIPTION:

This premise reflects the federal grants associated with assisting local and private agencies in developing and strengthening prevention for child abuse and neglect treatment programs. These federal CAPTA grants consist of Title I (General Program) and Title II (CBCAP) of the Social Security Act, which was formerly known as the Community-Based Family Resource and Support grant. The remaining federal grants consist of CAPIT and the Preventing and Addressing Child Trafficking CSEC fund.

IMPLEMENTATION DATE:

The CAPTA implemented on January 31, 1974. The CBCAP implemented on October 12, 1984. The Preventing and Addressing Child Trafficking CSEC fund implemented on October 1, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: PL 93-247, PL 98-473, PL 111-320, W&IC sections 18958 and 18960 through 18964.
- Project funding is contingent upon continued receipt of federal grant awards.
- The CAPTA federal grants have a limit of four years to fully expend the annual grant. This allows states flexibility in the use and support of multi-year projects.

METHODOLOGY:

- Counties will spend $4.3 million CAPTA Title I funds in FY 2015-16 and $3.2 million in FY 2016-17.
- Counties will spend $3.0 million CBCAP funds in FY 2015-16 and $3.4 million in FY 2016-17.
- Counties will spend $100,000 Preventing and Addressing Child Trafficking CSEC funds in FY 2015-16 and FY 2016-17.
- For more information on CAPIT funds, refer to the 2011 Realignment tab.

FUNDING:

Funding for these projects is 100 percent federal grant funds. The CBCAP grant requires matching funds which are provided from a portion of the 2011 Realignment funds. For more information, refer to the 2011 Realignment tab.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects the updated spending plan for the CSEC fund and CBCAP fund, slightly offset by increases to the CAPTA Title I spending plan.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Office of Child Abuse Prevention (OCAP) Federal Grants*

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 decrease reflects the updated spending plan.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – Child Abuse Prevention Program Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Federal Grants	$7,441	$7,441	$0	$0	$0

FY 2016-17

Item 151 – Child Abuse Prevention Program Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Federal Grants	$6,692	$6,692	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

State Children's Trust Fund Program*

DESCRIPTION:

This premise reflects the revenue generated from California birth certificate surcharges, specialty license plate revenue and private donations available for the State Children's Trust Fund in California. The State Children's Trust Fund is used to research, evaluate and disseminate information to the public, to establish public and private partnerships with foundations and corporations, increase public awareness about child abuse and neglect via media campaigns and seek continued contributions to the fund. Project funding is awarded through proposals submitted to the CDSS OCAP.

IMPLEMENTATION DATE:

This premise implemented on July 1, 1984.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 18969.
- The project funding available is $720,000 for FY 2015-16 and $701,000 for FY 2016-17.

METHODOLOGY:

This premise reflects the current funding available for the State Children's Trust Fund, as provided by the OCAP.

FUNDING:

This program is funded with 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects baseline budget adjustments.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 216-17 decrease reflects an updated spending plan.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 151 – Child Abuse Prevention Program Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
State Children's Trust Fund Program	$720	$0	$720	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

State Children's Trust Fund Program*

EXPENDITURES (CONTINUED):
(in 000s)

	FY 2016-17				
Item 151 – Child Abuse Prevention Program Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
State Children's Trust Fund Program	$701	$0	$701	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

APS Contract for Training Curriculum*

DESCRIPTION:

This premise reflects the cost of a multi-year contract with a qualified institution, agency or consultant to provide training and staff development for county APS and affiliated staff. The contractor will schedule and arrange training in all regions of the state, produce all required training materials, periodically update the curriculum and its content to reflect changes to APS laws, policies and practices and provide updated training to APS workers.

The purpose of the training is to educate county APS workers on APS program standards, requirements and mandates. The training is intended to promote statewide uniformity and consistency in the administration and delivery of services under the APS program.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2001.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Elder Abuse and Dependent Adult Civil Protection Act, commencing with W&IC section 15600.
- The annual contract cost for ongoing training activities is estimated to be $176,000.

METHODOLOGY:

The funding for this premise reflects the amount of the contract.

FUNDING:

Federal funding is provided by Title XIX of the Social Security Act. The federal Title XIX reimbursement represents 50 percent of the total funds. The non-federal share is 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

APS Contract for Training Curriculum*

EXPENDITURES:
(in 000s)

			FY 2015-16		
Item 151 – APS	**Total**	**Federal**	**State**	**County**	**Reimb.**
APS Contract for Training Curriculum	$176	$0	$88	$0	$88

			FY 2016-17		
Item 151 – APS	**Total**	**Federal**	**State**	**County**	**Reimb.**
APS Contract for Training Curriculum	$176	$0	$88	$0	$88

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CCL – Foster Family Homes*

DESCRIPTION:

This premise reflects the costs of providing basic funding for foster family home licensing and recruitment services. Services include on-site visits, reviewing and monitoring all foster family home related activities as specified in the CCL Evaluator Manual. A foster family home is defined as any residential facility providing 24-hour care for six or fewer foster children that is owned, leased or rented and is the residence of the foster parent or parents. This includes all family members residing in the home, in whose care the foster children have been placed. Up to eight children may be cared for if additional requirements are met.

The Target Visit protocol streamlines the annual review process of licensed care facilities to focus on facilities in which health and safety may be at greatest risk, or those facilities that require an annual visit as a condition of federal funding.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Health and Safety Code sections 1500 through 1519 and 1596.82.
- There are 38 counties providing foster family home licensing and recruitment services. The remaining 20 counties are licensed by CDSS' CCL Division.
- In addition to the Target Visit protocol, counties are required to complete a 30 percent random sample of the remaining facilities which are subject to announced annual visits. Counties are funded to conduct 100 percent of annual visits.
- The workload standard used to determine FTEs for targeted visits is 120 cases per year per worker.
- The worker to supervisor ratio used to determine the total number of FTEs is 6.25:1.
- The annual statewide unit cost for a CCL foster family home Licensing Program Analyst is $125,663.
- The projected caseload is 6,100 for FY 2015-16 and 5,853 for FY 2016-17
- The FY 2016-17 assumes a caseload reduction of 665 facilities due to the January 1, 2017, statewide implementation of Resource Family Approval.
- The recruitment-only amount is held at the FY 2005-06 funding level of $877,764 total funds.
- Title IV-E funds are budgeted in FY 2015-16 for $4.9 million and $6.1 million for FY 2016-17 to reflect appropriate levels of federal spending authority.
- The *Gresher v. Anderson* court case reflects funding in the amount of $27,000 GF for FY 2015-16 and FY 2016-17, which requires notification to applicants of conviction information received and a summary of reasons for denial.
- The sharing ratio for the remaining funds for FY 2015-16 is 33.09 percent federal funds and 66.91 percent GF based on actual expenditure data from calendar year 2014. The sharing ratio for the remaining funds for FY 2016-17 is 32.62 percent federal funds and 67.38 percent GF based on actual expenditure data from FY 2014-15.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CCL – Foster Family Homes*

METHODOLOGY:

The estimate is developed by dividing the caseload by the workload standards to derive the number of non-supervisory FTEs, which is then expanded to include supervisors to determine the total number of FTEs. The total number of FTEs is then multiplied by the Licensing Program Analyst unit cost. Established allocations for recruitment-only costs, additional federal spending authority and *Gresher v. Anderson* costs are then added.

FUNDING:

Federal funding is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the sharing ratios for those cases meeting federal eligibility criteria. Funding for the remaining non-federal costs is 100 percent GF. Additional federal spending authority is included based on actual expenditures.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 net increase reflects additional federal overmatch authority, slightly offset by a decrease in caseload.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – CCL Administration	Total	Federal	State	County	Reimb.
Foster Family Homes	$13,178	$7,694	$5,484	$0	$0

FY 2016-17

Item 151 – CCL Administration	Total	Federal	State	County	Reimb.
Foster Family Homes	$13,307	$8,534	$4,773	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CCL – Family Child Care Homes*

DESCRIPTION:

This premise reflects the costs of providing basic funding for family child care home licensing services. Services include on-site visits, reviewing and monitoring all family child care home related activities as specified in the CCL's Evaluator Manual. The family child care home licensees are required to report any injury to a child requiring medical treatment, the death of any child and any unusual incident or child absence that threatens the physical, emotional health or safety of any child while in the care of the licensee. Family child care homes provide regular care, protection and supervision of children, in the caregiver's own home, for periods of less than 24 hours per day, while the parents or authorized representatives are away. Small family child care homes may provide care for up to six children and large family child care homes may provide care for up to 12 children. More children may be cared for if additional requirements are met.

The Target Visit protocol focuses on licensed care facilities in which health and safety may be at greatest risk, or those facilities that require an annual visit as a condition of federal funding.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Health and Safety Code sections 1500 through 1519, 1596.82, 1597.44 and 1597.465.
- Del Norte and Inyo Counties provide family child care home licensing services. The remaining 56 counties are licensed by CDSS' CCL Division.
- In addition to the Target Visit protocol, counties are required to complete a 30 percent random sample of the remaining facilities which are subject to unannounced annual visits. Counties are funded to conduct 100 percent of annual visits.
- The projected caseload is 59 for FY 2015-16 and 65 for FY 2016-17.
- The workload standard used to determine FTEs for targeted monitoring visits is 257 cases per Licensing Program Analyst worker.
- The worker to supervisor ratio used to determine FTEs is 6.25:1.
- The average statewide unit cost of a CCL family child care home Licensing Program Analyst is $117,885.
- The Serious Incident Reporting reflects funding in the amount of $525 GF annually which fulfills the reporting requirements for any injury requiring medical treatment, death, absence or unusual incident that threatens any child in the care of the licensee of a family child care home.
- The *Gresher v. Anderson* court case reflects funding in the amount of $460 GF annually which requires notification to applicants of conviction information received and a summary of reasons for denial.
- Reimbursement from CDE in the amount of $13,000 is included to cover a portion of comprehensive site visit costs.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CCL – Family Child Care Homes*

METHODOLOGY:

The estimate is developed by dividing the caseload by the workload standard to determine the number of non-supervisory FTEs, which is then expanded to include supervisors to derive the total number of FTEs. The average statewide unit cost is then multiplied by the total FTEs. Costs for the Serious Incident Reporting and G*resher v. Anderson* are then added.

FUNDING:

The funding includes reimbursements from CDE (from the federal Child Care Development Fund block grant) to cover a portion of the costs of conducting comprehensive site visits. The remaining costs are 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 increase reflects an increase in caseload.

EXPENDITURES:

(in 000s)

			FY 2015-16		
Item 151 – CCL Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Family Child Care Homes	$32	$0	$19	$0	$13

			FY 2016-17		
Item 151 – CCL Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Family Child Care Homes	$36	$0	$23	$0	$13

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Adam Walsh Child Protection and Safety Act of 2006*

DESCRIPTION:

This premise reflects the costs of the Adam Walsh Child Protection and Safety Act of 2006. States are required to check child abuse and neglect registries in each state in which prospective foster or adoptive parents, relative caregivers or non-relative extended family members (as well as other adults in the home) have resided in for the preceding five years prior to approval for placement of a child. This premise also reflects the costs associated with responding to other states' requests for underlying information about child abuse and neglect reports in California.

IMPLEMENTATION DATE:

This premise implemented on January 1, 2008.

KEY DATA/ASSUMPTIONS:

- Authorizing statutes: PL 109-248, Family Code sections 7901.1 and 7906.5, Health and Safety Code section 1522.1 and Penal Code section 11170.
- The total number of prospective foster family homes reviewed in FY 2015-16 is 1,241 and is based on new licensing activity for calendar year 2014. The total number of prospective foster family homes reviewed in FY 2016-17 is 1,141 based on new licensing activity for calendar year 2015.
- An average of 2.5 persons in the home will require a child abuse and neglect registry check in another state.
- A total of 3,102 out-of-state registry checks will be performed in FY 2015-16 and 2,852 in FY 2016-17.
- Ten percent of those seeking home approval have resided in another state within the past five years and will require a child abuse and neglect registry check.
- Ten percent of those who have resided in another state within the past five years and have a child abuse and neglect registry check will have a history of child abuse and neglect.
- Licensing workers will spend one hour per registry check for those seeking home approvals without a hit for a history of child abuse and neglect. However, when information from other states indicates a history of child abuse and neglect, eight hours of licensing worker time will be required to investigate and review the facts of the case.
- The sharing ratio for FY 2015-16 is 33.09 percent federal funds and 66.91 percent GF, based on actual expenditures from calendar year 2014.
- The sharing ratio for FY 2016-17 is 32.62 percent federal funds and 67.38 percent GF, based on actual expenditures from FY 2014-15.
- The hourly cost of a licensing worker is $70.68.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Adam Walsh Child Protection and Safety Act of 2006*

METHODOLOGY:

The total costs are calculated by multiplying the total foster family homes reviewed by 2.5 persons in each home. Then multiply ten percent of those seeking home approval by the hours required to complete a home approval and by the hourly cost of a licensing worker.

FUNDING:

Federal funding is provided by Title IV-E of the Social Security Act. Funding for the remaining cost is 100 percent GF. The funding for the CWS and Adoptions programs portion are included in the 2011 Realignment tab.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects a decrease in foster family homes.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 151 – CCL Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Adam Walsh Child Protection and Safety Act of 2006	$37	$12	$25	$0	$0

	FY 2016-17				
Item 151 – CCL Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Adam Walsh Child Protection and Safety Act of 2006	$34	$11	$23	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Fee-Exempt Live Scan*

DESCRIPTION:

This premise reflects the costs for fingerprinting and search requirements associated with certain fee-exempt providers and the reimbursement cost for processing applications referred by CDE and licensed fee-exempt providers.

The CCL Division is responsible for processing the applications, contracting with DOJ and the California Child Care Resource and Referral Network to process the fingerprint and index search file activities. The CCL Division also contracts with Sylvan/Indentix, a private vendor, for Live Scan fingerprinting. The Live Scan fingerprint process is an electronic technology that transfers images of fingerprints and personal information to DOJ in a matter of seconds.

IMPLEMENTATION DATE:

This premise implemented on January 1, 1999.

KEY DATA ASSUMPTIONS:

Authorizing statute: W&IC section 11324 and Health and Safety Code section 1522.

METHODOLOGY:

Funding is suspended for FY 2015-16, and it is assumed funding will be suspended for FY 2016-17.

FUNDING:

This premise is funded with 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 151 – CCL Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Fee-Exempt Live Scan	$0	$0	$0	$0	$0

	FY 2016-17				
Item 151 – CCL Administration	**Total**	**Federal**	**State**	**County**	**Reimb.**
Fee-Exempt Live Scan	$0	$0	$0	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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Registered Sex Offender Check*

DESCRIPTION:

This premise reflects costs to minimize the risk of predictable and preventable harm to vulnerable children in out-of-home care by detecting the presence/residence of a registered sex offender in prospective and approved licensed facilities and prospective and approved relative/non-relative extended family member homes.

On a monthly basis, CDSS' CCL Division compares transmitted DOJ registered sex offender files against CWS/CMS placement information for county-licensed foster family homes, family child care homes and county-approved relative and non-relative extended family member homes. The CWDs are responsible for investigating any address matches, with the exception of relatives and non-relative extended family member homes, for the 20 small counties, which are investigated by the CDSS CCL Division.

The CWDs also check all prospective licensure applicants and relative/non-relative extended family member homes against Megan's Law public website and investigate all address matches. When a match resulting from the annual or prospective check is verified, CWDs take appropriate action which may include licensure and placement denial, removal of children and finding a new placement and/or grievance reviews for relatives/non-relative extended family members.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2009.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: Health and Safety Code section 1522.01.
- For the annual registered sex offender check process, the foster family home caseload is 6,100 in FY 2015-16 and 5,853 in FY 2016-17.
- For the annual registered sex offender check process, the family child care home caseload is 59 in FY 2015-16 and 65 in FY 2016-17.
- For the application registered sex offender check process, 1,982 foster family home and 17 family child care home applications will be received in FY 2015-16 based on actual data from calendar year 2014.
- For the application registered sex offender check process, 1,704 foster family home and 17 family child care home applications will be received in FY 2016-17 based on actual data for FY 2014-15.
- The match rate for FY 2015-16 and FY 2016-17 is 0.69 percent based on the most recent monthly foster family home and family child care home registered sex offender summary reports.
- It will take a foster family home licensing worker 20 hours and a family child care home licensing worker 12 hours to investigate each address match.
- In FY 2015-16 and FY 2016-17, 19 percent of the matches will require administrative action.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Registered Sex Offender Check*

KEY DATA/ASSUMPTIONS (CONTINUED):

- It will take a foster family home licensing worker 14 hours and a family child care home licensing worker ten hours for each administrative action.
- For the application check process, it will take a licensing worker 20 minutes to check an address against the Megan's Law public website.
- The hourly cost of a foster family home licensing worker is $70.68. The hourly cost of a family child care home licensing worker is $66.30.
- The foster family home sharing ratio for FY 2015-16 is 33.09 percent federal funds and 66.91 percent GF based on actual expenditures for calendar year 2014.
- The foster family home sharing ratio for FY 2016-17 is 32.62 percent federal funds and 67.38 percent GF based on actual expenditures for FY 2014-15.
- Family child care home costs do not receive FFP.

METHODOLOGY:

For total hours in investigating annual checks, the caseload is multiplied by the match rate and multiplied by the number of hours required per investigation. For total administrative hours, the number of administrative actions is multiplied by the number of hours required per action. All hours are then combined and multiplied by the hourly cost of a foster family home/family child care home licensing worker to obtain the total cost for annual checks.

For the total hours to investigate applications, the number of applications are multiplied by the match rate and multiplied by the number of hours required per investigation. For total administrative hours, the number of administrative actions are multiplied by the number of hours required per action. The number of applications are then multiplied by the number of hours it will take to check an address against the Megan's Law public website. All hours are combined and multiplied by the hourly cost of a foster family home/family child care home licensing worker to obtain the total cost for application checks.

FUNDING:

Federal funding for a foster family home is provided by Title IV-E of the Social Security Act, with the amount of FFP based on the sharing ratios for those cases meeting federal eligibility criteria. Funding for the remaining non-federal foster family home costs is 100 percent GF.

The family child care home costs are 100 percent GF.

The funding for the CWS program portion of this premise is included in the 2011 Realignment tab.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Registered Sex Offender Check*

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 decrease reflects 247 fewer foster family home facilities and 278 fewer foster family home applications, slightly offset by six additional family child care home facilities.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – CCL Administration	Total	Federal	State	County	Reimb.
Registered Sex Offender Check	$140	$46	$94	$0	$0

FY 2016-17

Item 151 – CCL Administration	Total	Federal	State	County	Reimb.
Registered Sex Offender Check	$127	$41	$86	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Foster Care (FC) Burial*

DESCRIPTION:

This premise reflects the costs of the FC Burial program. The FC Burial costs are reimbursements provided to foster parents for the costs of a burial plot and funeral expenses for a child who was receiving FC benefits at the time of death.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 11212.
- Reimbursements of up to $5,000 per burial are provided.

METHODOLOGY:

Based on historical expenditure data, the estimated costs for FY 2015-16 and FY 2016-17 are held at the FY 1999-00 GF expenditure level of $186,000.

FUNDING:

The FC Burial program is funded with 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – Special Programs Services	Total	Federal	State	County	Reimb.
FC Burial	$186	$0	$186	$0	$0

FY 2016-17

Item 151 – Special Programs Services	Total	Federal	State	County	Reimb.
FC Burial	$186	$0	$186	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Assistance Dog Special Allowance Program*

DESCRIPTION:

This premise reflects the costs associated with providing a monthly dog food allowance to recipients of federal Social Security Disability Insurance, SSI/SSP and IHSS program participants who have incomes at or below the FPL. Existing law provides that eligible individuals with guide, signal or service dogs are eligible to receive a dog food allowance of $50 per month.

IMPLEMENTATION DATE:

This premise implemented on January 1, 2000.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 12553 and 12554.
- Recipients will receive a dog food allowance of $50 per month.
- The FY 2015-16 and FY 2016-17 estimates are based on year-to-date actual costs and projected caseload growth or the 2010-11 Governor's Budget level, whichever is higher.
- Eligibility for the program expanded in FY 2015-16 to accept applicants that own service dogs providing necessary services for psychiatric or mental disabilities.
- The projected average monthly caseload is 908 in FY 2015-16 and 943 in FY 2016-17.
- The projected cost for FY 2015-16 is lower than the 2010-11 Governor's Budget total cost of $554,000.

METHODOLOGY:

The total costs are calculated by using the year-to-date actual costs and projected caseload growth or the 2010-11 Governor's Budget level, whichever is higher.

FUNDING:

This program is funded with 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATON:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

The FY 2016-17 increase reflects a projected monthly caseload growth resulting from a change in the eligibility criteria for service dogs.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Assistance Dog Special Allowance Program*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 151 – Special Programs Services	Total	Federal	State	County	Reimb.
Assistance Dog Special Allowance Program	$554	$0	$554	$0	$0

FY 2016-17

Item 151 – Special Programs Services	Total	Federal	State	County	Reimb.
Assistance Dog Special Allowance Program	$566	$0	$566	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Access Assistance/Deaf Access Program*

DESCRIPTION:

This premise reflects the costs associated with the Access Assistance/Deaf Access Program. Assistance under this program enables deaf and hearing-impaired persons to access needed social and community services, e.g., employment services, counseling, interpreting services, deafness education and advocacy. In addition, this premise reflects savings from reducing Access Assistance/Deaf Access Program costs by ten percent, effective July 1, 2008.

IMPLEMENTATION DATE:

The Access Assistance/Deaf Access Program implemented in 1980. The ten percent reduction implemented July 1, 2008.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 10621.
- Currently, eight regional contractors provide services to individuals that are hard of hearing.
- Services will be provided to a projected 165,000 deaf and hard of hearing Californians in FY 2015-16 and FY 2016-17.
- In FY 2015-16 and FY 2016-17, the program will be funded with $2.5 million in Title XX funds, which offsets GF costs by that same amount.

METHODOLOGY:

Basic costs were established through the Budget Act of 1999. The GF amount is held at this level. The estimated savings reflects a ten percent reduction consistent with FY 1998-99, which is applied to the Access Assistance/Deaf Access Program - Basic Costs table line and corresponding Title XX Funding budget line.

FUNDING:

This program is funded with GF and Title XX funds. The Title XX block grant reduces the amount of GF in the program. Title XX funding appears on a separate line as an adjustment. The savings for this premise reflects a ten percent reduction to the GF and the Title XX block grant funds.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Access Assistance/Deaf Access Program*

EXPENDITURES:
(in 000s)

FY 2015-16

Item 151 – Special Programs Services	Total	Federal	State	County	Reimb.
Access Assistance/Deaf Access Program – Basic Costs	$5,308	$0	$5,308	$0	$0
Access Assistance/Deaf Access Program – Title XX Funding	0	2,500	-2,500	0	0
Access Assistance/Deaf Access Program – Reduce Services by Ten Percent	-531	-250	-281	0	0
Total	$4,777	$2,250	$2,527	$0	$0

FY 2016-17

Item 151 – Special Programs Services	Total	Federal	State	County	Reimb.
Access Assistance/Deaf Access Program – Basic Costs	$5,308	$0	$5,308	$0	$0
Access Assistance/Deaf Access Program – Title XX Funding	0	2,500	-2,500	0	0
Access Assistance/Deaf Access Program – Reduce Services by Ten Percent	-531	-250	-281	0	0
Total	$4,777	$2,250	$2,527	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Title XX Funding*

DESCRIPTION:

This premise reflects the Title XX Social Services Block Grant awarded to the state as well as TANF funds transferred to Title XX. In order to qualify for these funds, a state must prepare an expenditure plan prior to the start of the FY that is consistent with the five Title XX goals:
1) achieving or maintaining economic self-support to prevent, reduce or eliminate dependency;
2) achieving or maintaining self-sufficiency, including reduction or prevention of dependency;
3) preventing or remedying neglect, abuse or exploitation of children or adults unable to protect their own interests, or preserving, rehabilitating or reuniting families; 4) preventing or reducing inappropriate institutional care by providing for community-based care, home-based care or other forms of less-intensive care; and 5) securing referral or admission for institutional care when other forms of care are not appropriate or providing services to individuals in institutions.

IMPLEMENTATION DATE:

This federal fund source has been given to states for social services since October 1981. Through FY 1992-93, Title XX funds were used exclusively to fund the IHSS program. With the implementation of Title XIX for the PCSP in 1993, a portion of Title XX funds were shifted to other eligible programs. Those funds now support the Deaf Access Program (goals 1 and 2), FC services (goal 3) and CWS (goals 3 and 4).

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC sections 13000 through 13008 and the federal Omnibus Budget Reconciliation Act of 1981.
- State legislation and federal regulations permit Title XX funds to be used in FC and CWS to supplant the non-federal share.

Title XX Grant

- The local assistance portion of the Title XX Social Services Block Grant awarded to California is $138.8 million for both FFY 2014 and FFY 2015. The FFY awards are adjusted to conform to FY funding needs.
- In the Deaf Access Program, $2.5 million in Title XX grant funds for both FY 2015-16 and FY 2016-17 will reduce the 100 percent GF share.
- The Title XX grant transferred to DDS is $136.3 million in both FY 2015-16 and FY 2016-17.

TANF Transfer to Title XX

- The amount of TANF funds transferred to Title XX is ten percent of the TANF block grant less the TANF needed for Tribal TANF.
- The amount of TANF funds transferred to Title XX is $365.1 million in FY 2015-16 $364.4 million in FY 2016-17.
- In FY 2015-16 and FY 2016-17, $10.0 million of TANF funds are transferred to Title XX for CDE's child care programs to broaden access to Child and Adult Care Food Program benefits for low-income children in proprietary child care centers.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Title XX Funding*

KEY DATA/ASSUMPTIONS (CONTINUED):

- The total TANF funds transferred to Title XX for Stage One Child Care is $160.1 million in FY 2015-16 and $159.2 million in FY 2016-17.
- The total TANF funds transferred to Title XX for the CCR is $3.0 million in FY 2015-16 and $3.1 million in FY 2016-17. This funding is needed to cover the additional costs for the foster family agency social worker rate increase.
- The remaining TANF transfer to Title XX is used for FC, CWS and DDS programs, totaling $195.1 million in FY 2015-16 and $195.2 million in FY 2016-17.

METHODOLOGY:

The estimate reflects the local assistance portion of the Title XX Social Services Block Grant and the TANF transfer to Title XX.

FUNDING:

This funding is provided under Title XX of the federal Social Security Act and does not require a state or county match. The funding for the FC and CWS programs portion of this estimate is included in the 2011 Realignment tab. The TANF transfer to Title XX funding is federal funds converted from the TANF Block Grant and transferred to the Social Services Block Grant to be used as Title XX funds.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change in the local assistance portion of the Title XX Social Services Block Grant.

The increase in the TANF transfer to Title XX reflects a decrease in Tribal TANF costs. This also results in additional TANF shifted to Title XX for Stage One Child Care in FY 2015-16, which is partially offset by an increase in the Title XX funding used for CCR in FY 2015-16.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change in the local assistance portion of the Title XX Social Services Block Grant.

The decrease in the TANF transfer to Title XX in FY 2016-17 reflects an increase in Tribal TANF costs. This also results in less TANF available to shift to Title XX for Stage One Child Care. The decrease in Title XX funding for Stage One Child Care also reflects an increase in the Title XX funding used for CCR in FY 2016-17.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Title XX Funding*

EXPENDITURES:
(in 000s)

	FY 2015-16
Total Title XX Funding	**Federal Funds**
Title XX Social Services Block Grant	$138,763
TANF Transfer to Title XX	365,134
Title XX Social Services Block Grant	
Item 151 – CWS Grant Transfer to DDS	$136,263
Item 151 – Deaf Access (Access Assistance/Deaf Access Program) Grant**	2,500
TANF Transfer to Title XX	
Item 101 – FC TANF Transfer**	$21,394
Item 153 – Title IV-E California Well-Being Project TANF Transfer**	30,382
Item 151 – CWS TANF Transfer to DDS	77,157
Item 151 – CWS TANF Transfer**	26,958
Item 153 – Title IV-E California Well-Being Project TANF Transfer**	36,228
Item 101 – CCR Transfer	2,951
Item 101 – CalWORKs Stage One Child Care	160,064

	FY 2016-17
Total Title XX Funding	**Federal Funds**
Title XX Social Services Block Grant	$138,763
TANF Transfer to Title XX	364,380
Title XX Social Services Block Grant	
Item 151 – CWS Grant Transfer to DDS	$136,263
Item 151 – Deaf Access (Access Assistance/Deaf Access Program) Grant**	2,500
TANF Transfer to Title XX	
Item 101 – FC TANF Transfer**	$21,394
Item 153 – Title IV-E California Well-Being Project TANF Transfer**	30,382
Item 151 – CWS TANF Transfer to DDS	77,157
Item 151 – CWS TANF Transfer**	26,958
Item 153 – Title IV-E California Well-Being Project TANF Transfer**	36,228
Item 101 – CCR Transfer	3,078
Item 101 – CalWORKs Stage One Child Care	159,183

**Detail Table Line also includes a corresponding decrease in GF.

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

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Legal Counsel for Unaccompanied Undocumented Minors*

DESCRIPTION:

This premise reflects the cost to provide legal services to unaccompanied undocumented minors in California. Per statute, funding is awarded to qualified nonprofit legal service organizations to provide legal services to eligible unaccompanied undocumented minors. These minors must be present in California and reside with a sponsor or must be under the care and custody of the federal Office of Refugee Resettlement. Legal representation for these minors is important to assist them in the filing of, preparation for and representation in administrative and/or judicial proceedings for the following immigration statuses: asylum, T-Visa, U-Visa and/or Special Immigrant Juvenile Status. The legal services include culturally and linguistically appropriate services provided by attorneys, paralegals, interpreters and other support staff for state court proceedings, federal immigration proceedings and any appeals arising from those proceedings.

IMPLEMENTATION DATE:

This premise implemented on September 27, 2014.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section 13300.
- The Budget Act of 2015 included $3.0 million GF to provide legal services for unaccompanied undocumented minors.
- For FY 2016-17, $3.0 million GF is budgeted to provide legal services for unaccompanied undocumented minors.
- Of the $3.0 million, $100,000 will be used for State Operations costs to implement the program.

METHODOLOGY:

The cost is calculated by subtracting the State Operations cost from the total Budget Act of 2015 amount.

FUNDING:

This premise is funded with 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Legal Counsel for Unaccompanied Undocumented Minors*

EXPENDITURES:

(in 000s)

FY 2015-16

Item 151 – Special Programs	Total	Federal	State	County	Reimb.
Legal Counsel for Unaccomp/Undoc. Minors	$2,900	$0	$2,900	$0	$0

FY 2016-17

Item 151 – Special Programs	Total	Federal	State	County	Reimb.
Legal Counsel for Unaccomp/Undoc. Minors	$2,900	$0	$2,900	$0	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

Federal Immigration Assistance*

DESCRIPTION:

This premise reflects the cost of providing services to immigrants who reside in the state of California pursuant to SB 79 (Statutes of 2015, Chapter 5.6) enacted W&IC sections 13302 through 13306. These services include: 1) assistance to help applicants obtain DACA, DAPA or other immigration remedies; 2) assistance to help applicants with naturalization; 3) legal training and technical assistance to CDSS contractors that provide immigration legal services to these applicants; and 4) education and outreach activities to immigrant communities about DACA, DAPA, other immigration remedies and naturalization.

IMPLEMENTATION DATE:

This premise implemented on July 1, 2015.

KEY DATA/ASSUMPTIONS:

- Authorizing statute: W&IC section sections 13302 through 13306.
- The funding is maintained at $15 million total funds. Of the total funds, $540,000 will be used for state operations.
- The federal immigration assistance services are provided by nonprofit organization contractors who meet the requirements set forth in Internal Revenue Code section 501(c)(3) or 501(c)(5).

METHODOLOGY:

The cost is calculated by taking the Budget Act of 2015 amount less the state operations costs.

FUNDING:

This premise is funded with 100 percent GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

There is no change.

REASON FOR YEAR-TO-YEAR CHANGE:

There is no change.

EXPENDITURES:

(in 000s)

	FY 2015-16				
Item 151 – Special Programs	**Total**	**Federal**	**State**	**County**	**Reimb.**
Federal Immigration Assistance	$14,460	$0	$14,460	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

Federal Immigration Assistance*

EXPENDITURES (CONTINUED):

(in 000s)

	FY 2016-17				
Item 151 – Special Programs	**Total**	**Federal**	**State**	**County**	**Reimb.**
Federal Immigration Assistance	$14,460	$0	$14,460	$0	$0

**Please refer to the first tab titled "Acronyms" for a full description of acronyms.*

CalWORKs Non-MOE*

DESCRIPTION:

This premise reflects the shift of funds for CalWORKs cases with a certain unaided, but federally work-eligible, adult from TANF and MOE GF (GF counted toward the state's TANF MOE requirement) to non-MOE GF. The following cases are included in this funding shift: AUs that include an unaided adult who has either exceeded the CalWORKs 48-month time limit (Safety Net) or is a fleeing felon and AUs with an adult that has been in sanction status due to failing or refusing to comply with WTW program requirements without good cause for 12 consecutive months or longer (long-term sanction). These CalWORKs cases are solely state-funded and removed from the TANF WPR calculation.

IMPLEMENTATION DATE:

The Safety Net/fleeing felon shift implemented on December 1, 2013, for C-IV counties and on April 1, 2014, for CalWIN and LEADER counties. The long-term sanction shift implemented on March 1, 2015.

KEY DATA/ASSUMPTIONS:

- Effective April 1, 2015, AUs with an unaided drug felon adult shifted out of the CalWORKs Non-MOE funding designation; see the Drug Felon Eligibility premise for more details.
- The average monthly caseload is anticipated to be 88,257 cases and 84,336 cases in FY 2015-16 and FY 2016-17, respectively. Of the average monthly caseload, 14,550 are long-term sanction cases in both FY 2015-16 and FY 2016-17.
- The monthly grant cost per case is the average grant for non-MOE GF cases from April to June 2015, $442.20.
- The total monthly administrative cost is $4.32 million and $4.12 million in FY 2015-16 and FY 2016-17, respectively. This is based on a percent to total of the non-MOE GF caseload to the CalWORKs caseload and actual CalWORKs administrative expenditures in FY 2014-15.
- The total monthly employment services cost for Safety Net cases is $0.33 million and $0.32 million in FY 2015-16 and FY 2016-17, respectively. For more information about this funding methodology, see the CalWORKs Employment Services premise.
- The monthly employment services cost per case for long-term sanction cases is $382.37, for more information about the cost per case, see the CalWORKs Employment Services premise.
- The total monthly Stage One Child Care cost for Safety Net cases is $0.20 million and $0.22 million in FY 2015-16 and FY 2016-17, respectively. For more information about this funding methodology, see the CalWORKs Child Care – Stage One Services and Administration premise.
- The total monthly Family Stabilization cost for long-term sanction cases is approximately $2,340 in FY 2015-16 and FY 2016-17. This is based on a percent to total of the long-term sanction expenditures to the total expenditures for family stabilization from April to June 2015 which is applied to the total anticipated family stabilization expenditures in each FY.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Non-MOE*

KEY DATA/ASSUMPTIONS (CONTINUED):

- Child support is fully passed through to families impacted by this policy change. Child support received by the families should be reported as unearned income based on the reasonable anticipation of the payments.

METHODOLOGY:

- The monthly grant cost per case is multiplied by the total projected caseload and then by 12 months.
- The total monthly administrative cost, Safety Net employment services cost, Safety Net Stage One Child Care cost and long-term sanction Family Stabilization cost is summed and then multiplied by 12 months.
- The monthly employment services cost per case is multiplied by the long-term sanction caseload and then by 12 months.
- The MOE shift is the sum of the grant cost, administrative cost, Safety Net employment services cost, Safety Net Stage One Child Care cost, long-term sanction Family Stabilization cost and long-term sanction employment services cost.

FUNDING:

Assistance costs are funded with 97.5 percent non-MOE GF and 2.5 percent county funds not countable towards the state's MOE requirement. All other costs are funded 100 percent non-MOE GF.

CURRENT YEAR CHANGE FROM APPROPRIATION:

The decrease reflects a lower caseload projection and updated grant cost for long-term sanction cases to reflect actual expenditure data.

REASON FOR YEAR-TO-YEAR CHANGE:

The decrease reflects a projected caseload decline.

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

CalWORKs Non-MOE*

EXPENDITURES:
(in 000s)

FY 2015-16

Non-TANF/MOE Eligible Expenditures	Total	Federal	State	County	Reimb.
CalWORKs Non-MOE	-$593,312	$0	-$581,604	-$11,708	$0

FY 2016-17

Non-TANF/MOE Eligible Expenditures	Total	Federal	State	County	Reimb.
CalWORKs Non-MOE	-$570,290	$0	-$559,102	-$11,188	$0

Please refer to the first tab titled "Acronyms" for a full description of acronyms.

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