

# STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY DEPARTMENT OF SOCIAL SERVICES

744 P Street-Sacramento, CA 95814-www.cdss.ca.gov



January 13, 2014

**ALL COUNTY LETTER 14-05** 

<u>REASON</u>	<u>FOR</u>	<u>THIS</u>
TRANSMI	TTAL	

[X] State Law Change

[] Federal Law or Regulation

Change

[] Court Order

[ ] Clarification Requested by One or More Counties

[] Initiated by CDSS

TO: ALL COUNTY WELFARE DIRECTORS

ALL CalWORKs PROGRAM SPECIALISTS

ALL COUNTY REFUGEE PROGRAM COORDINATORS

ALL CALFRESH PROGRAM SPECIALISTS ALL CONSORTIUM PROJECT MANAGERS

SUBJECT: CALIFORNIA WORK OPPORTUNITY AND RESPONSIBILITY TO

KIDS (CalWORKs): FIVE PERCENT INCREASE TO THE MAXIMUM

AID PAYMENT (MAP) LEVELS

REFERENCE: WELFARE & INSTITUTIONS (W&I) CODE SECTIONS 17600.10;

17600.15; 17600.20; 17601.25; 17603; 17605; 17606.10; ASSEMBLY

BILL (AB) 85 (Chapter 24, Statutes of 2013)

The purpose of this All County Letter (ACL) is to inform the County Welfare Departments (CWDs) of changes to the CalWORKs program pursuant to AB 85, which was signed by the Governor on June 27, 2013. This letter includes instructions to be used in the implementation of the five percent Maximum Aid Payment (MAP) increase. The CalWORKs MAP increase takes effect on March 1, 2014. This policy change should be automated into the consortia systems by the effective date provided, or a process must be put in place to meet the requirements of the policy until necessary automation changes are completed.

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The AB 85 redistributed funds to counties for CalWORKs expenditures and established the Child Poverty and Family Supplemental Support (CPFSS) Subaccount within the Sales Tax Account of the Local Revenue Fund to support CalWORKs grant increases. The cost of the five percent grant increase will be funded with revenues deposited into the CPFSS Subaccount. Any remaining amounts in the subaccount will be carried over to future fiscal years. The growth revenues deposited into the CPFSS Subaccount will be monitored to determine if funding remains sufficient for the following fiscal year and thereafter.

Each year the subaccount will also be monitored to determine if funds are sufficient to allow an additional increase to the MAP. If funds are sufficient, the increase would take effect on October 1<sup>st</sup> of that year. If funds are not sufficient to support an increase, no change to the MAP will occur. The California Department of Social Services (CDSS) will notify CWDs in advance of any future grant increases. Specific instructions related to the funding mechanism and claiming process will be provided in a separate County Fiscal Letter.

The changes to Welfare and Institutions Code (WIC) Section 11450.025 implements a five percent increase to the CalWORKs MAP levels and specifies a process by which additional grant increases shall be made depending on projected revenue and costs. The new CalWORKs Payment Standards Chart is attached to this letter. The grant increase is to be applied to all cases, both Region One and Two and exempt and non-exempt Assistance Units (AUs), effective March 1, 2014. CWDs are to treat the grant increase as a mandatory county-initiated mid-period action.

#### INFORMING CalWORKs RECIPIENTS

CWDs shall provide a mass mailing notice to all recipients to inform them of the change in state law that increases MAP levels effective March 1, 2014 and subsequently inform them of the potential decrease to their CalFresh benefits as a result of the increase to their income. Clients should receive the attached adequate notice of action (NOA) (TM44-315G) that specifically provides information on their AU's cash aid amount. A copy of the informing notice (TEMP 2250) that CWDs must use to inform all recipients of the increase to the MAP is also attached to this letter. The CDSS strongly encourages CWDs to also provide a copy of new MAP levels to all new CalWORKs applicants who apply for aid in January 2014 through February 2014, to ensure that they are informed about the March 1, 2014 grant increase.

Additionally, CWDs must send CalWORKs AUs a new SAR 2 or AR 2 to inform them of their new IRT. ACL 13-109 was released on January 3, 2014 and included the IRT figures that will change when the MAP increases.

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# MINIMUM BASIC STANDARDS OF ADEQUATE CARE (MBSAC)

MBSAC figures are normally adjusted annually to account for any increases or decreases in the cost of living. These figures, when adjusted are effective in July of each year and will be provided in a separate ACL.

## FORMS AND NOTICES OF ACTION (NOAs)

TEMP 2250 (1/14) – State Law Changes the Maximum Aid Payment Levels for Cash Aid Recipients. – This form was created for CWDs to send to all cash aid AUs to inform them of the change to the MAP. This is form required with no substitutes permitted.

TM44-315G (12/13) – NOA message – Five Percent Grant Increase/Law Change. - This message was created to send to cash assistance AUs when their grant will increase <u>due to the MAP increase</u>. Instructions are included on the TM44-315G. This message is required with no substitutes permitted to the language.

### Required Form - No Substitute Permitted

Forms in this category are required forms that the CWD may not modify or restructure. However, overprinting or reformatting under the conditions outlined in Operations Manual Section 23.400.211, Overprinting Required Forms and Section 23-400.212, Electronic Data Processing (EDP) Modifications, is permitted.

#### CAMERA READY COPIES AND TRANSLATIONS

For camera-ready copies in English, contact the Forms Management Unit at fmudss@dss.ca.gov. If your office has internet access you may obtain these forms from the CDSS webpage at:

http://www.dss.cahwnet.gov/cdssweb/FormsandPu 271.htm.

When all translations are completed per MPP Section 21-115.2, including Spanish forms, they are posted on an on-going basis on the CDSS webpage. Copies of the translated forms can be obtained at:

http://www.dss.cahwnet.gov/cdssweb/FormsandPu\_274.htm.

For questions on translated materials, please contact Language Services at (916) 651-8876. Until translations are available, recipients who have elected to receive materials in languages other than English should be sent the English version of the form or notice along with the GEN 1365-Notice of Language Services and a local contact number.

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CWDs shall ensure that effective bilingual services are provided. This requirement may be met through utilization of paid interpreters, qualified bilingual employees, and qualified employees of other agencies or community resources. These services shall be provided free of charge to the applicant/recipient. In the event that the CDSS does not provide translations of a form, it is the CWD's responsibility to provide the translation if an applicant or recipient requests it. More information regarding translations can be found in MPP Section 21-115.

#### CONTACTS

If you have any questions or need additional information regarding this ACL, please contact your CalWORKs County Consultant or call the CalWORKs Eligibility Bureau mainline at (916) 654-1322.

Sincerely,

# Original Document Signed By:

TODD R. BLAND Deputy Director Welfare to Work Division

Attachments

C: CWDA CSAC