

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

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January 16, 2014

ALL COUNTY LETTER NO. 14-07

[x] State Law Change
[] Federal Law or Regulation Change
[] Court Order
[] Clarification Requested by One or More Counties
[] Initiated by CDSS

REASON FOR THIS TRANSMITTAL

TO: ALL COUNTY WELFARE DIRECTORS

ALL CALWORKS PROGRAM SPECIALISTS
ALL WELFARE-TO-WORK COORDINATORS
ALL CALFRESH PROGRAM SPECIALISTS
ALL CONSORTIA REPRESENTATIVES

SUBJECT: CALIFORNIA WORK OPPORTUNITY AND RESPONSIBILITY TO

KIDS (CalWORKs) PROGRAM: ASSEMBLY BILL (AB) 419 (CHAPTER

293, STATUTES OF 2013) CHANGES TO THE TEMPORARY ABSENCE RULES FOR CHILDREN IN A PUBLIC HOSPITAL

REFERENCE: AB 419; WELFARE AND INSTITUTIONS CODE (WIC)

SECTION 11269; MANUAL OF POLICIES AND PROCEDURES (MPP) SECTION 82-812.62

The purpose of this letter is to provide implementing instructions to County Welfare Departments (CWDs) for a new CalWORKs law established by AB 419 which became effective on January 1, 2014. Specifically, this All County Letter (ACL) addresses changes to the temporary absence rules in the CalWORKs program for children receiving treatment in a public hospital. As a result of AB 419, there is no longer any limit on the length of time a child is considered temporarily absent from the home while receiving treatment in a public hospital, and aid will continue for that child for the entire period of the hospitalization.

Under current CalWORKs rules, cash aid is allowed to continue unchanged, under certain conditions, for any member of an Assistance Unit (AU) who is not in the home, provided they are only temporarily absent. MPP Section 82-812 states that any member of the AU shall be considered temporarily absent when absent from the home for one full calendar month or less, unless an exception applies. Currently, MPP Section 82-812.62 provides for an exception that allows a child, who is a patient in a public hospital, to be considered temporarily absent from the home for up to two full calendar months. AB 419 now requires that a child who is a patient in either a public or private hospital for medical or surgical care be considered temporarily absent from the

home, and their CalWORKs benefits unchanged, for the duration of the hospital stay, regardless of the length of time.

NOTE: While AB 419 mandates any child who is a patient in a **public or private** hospital be considered temporarily absent for the duration of the hospital stay, current CalWORKs rules already provide no limit on the amount of time a child may be considered temporarily absent if receiving treatment in a private hospital. Therefore, as a practical matter, even before January 1, 2014, children temporarily absent while receiving treatment in a private hospital should have been receiving continued CalWORKs assistance. AB 419 only changes the CalWORKs rules for children receiving treatment in a public hospital.

Examples of how AB 419 will affect children undergoing hospital treatment are given below:

Example 1: A child enters a private hospital for treatment and remains there for 14 months. Under temporary absence rule exceptions in place before January 1, 2014, and AB 419, the child would be considered temporarily absent for the duration of the hospital stay, 14 months.

Example 2: A child enters a public hospital for treatment and remains there for 14 months. Under the temporary absence rule exceptions in place before January 1, 2014, the child would only have been considered temporarily absent for two calendar months. Because of AB 419, CWDs will now consider the hospitalized child temporarily absent for all 14 months of and will continue to aid the child.

When a household reports that a child is hospitalized, the CWD shall document the basis of the temporary absence. The CWD may do so by collecting verification to support the claim that the child is hospitalized. Examples of acceptable evidence to support a claim that a child is hospitalized may include, but are not limited to, the following:

- Admittance documentation from the hospital;
- A letter from the admitting medical doctor or other legally qualified medical professional;
- Other documentation that the CWD determines to be acceptable evidence that the child has been admitted to the hospital.

The documentation shall include the date the child was admitted to the hospital and, if possible, the anticipated duration of the hospital stay. If the child remains hospitalized beyond the anticipated duration of the hospital stay, the CWD shall re-verify if the child remains hospitalized.

NOTE: For CalWORKs cases, because changes in household composition are voluntary mid-period reports for Semi-Annual Reporting (SAR) cases but mandatory

mid-period reports for Annual Reporting/Child Only (AR/CO) cases, verification shall occur with the SAR 7 or SAWS 2 Plus for SAR cases or any time during the AR/CO payment period for AR/CO cases.

CWDs shall make this change effective January 1, 2014. If the policy is currently automated, the 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. Due to the timing of the release of this ACL and the implementation date of January 1, 2014, if the grant amount for the month of January is not adjusted prior to the issuance of the January grant, the county shall issue a supplement for the month of January 2014 and any subsequent months in which the child was not included in the AU while receiving treatment in a public or private hospital on or after January 1, 2014. All supplemental underpayments are to be paid to the AU in accordance with regulations at MPP Section 44-340. For cases where the child was removed from the AU prior to January 2014 due to staying in a public hospital for longer than two months, at the next natural point of contact with the family, such as the client making a mid-period report or submitting a SAR 7 or SAWS 2, the CWD shall review the case file to determine if the child remains in the hospital. If so, the CWD shall issue any appropriate supplements effective January 1, 2014. No supplements shall be issued for any months prior to January 2014.

For CalFresh cases CWDs should continue to evaluate household circumstances on a case-by-case basis. AB 419 does not make any changes to CalFresh policy. As such, there may be cases in which individuals who are staying in a hospital for extended periods will be treated differently for the two programs.

CDSS will promulgate new regulations with reference to the applicable MPP section and notify CWDs of the new regulations via an ACL.

If you have any questions or need further information regarding this letter, please contact the following CDSS representatives or programs:

•	CalWORKs Eligibility County Consultant	(916) 654-1322
•	Employment Bureau County Consultant	(916) 654-2137
•	CalFresh Policy Consultant	(916) 651-8047
•	Program Integrity (WDTIP)	(916) 654-2125

Sincerely,

## Original Document Signed By:

TODD R. BLAND
Deputy Director
Welfare to Work Division