

January 24, 2025

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

EXECUTIVE SUMMARY

ALL COUNTY WELFARE DIRECTORS LETTER

This All County Welfare Directors Letter informs counties of the upcoming 2025 California Work Opportunity and Responsibility to Kids eligibility case file reviews. This letter identifies the 14 counties participating in this year's review and provides the background, purpose, goals, and timelines related to the 2025 reviews.

January 24, 2025

ALL COUNTY WELFARE DIRECTORS LETTER

TO: ALL COUNTY WELFARE DIRECTORS

FROM: ALEXIS FERNÁNDEZ GARCIA, DEPUTY DIRECTOR
FAMILY ENGAGEMENT AND EMPOWERMENT DIVISION

SUBJECT: 2025 CALWORKS ELIGIBILITY CASE FILE REVIEWS

REFERENCE: [SENATE BILL 1339 \(CHAPTER 801, STATUTES OF 2016\)](#); ALL
COUNTY LETTERS [97-70](#), [98-35](#), [13-51](#), [14-98](#), [15-22](#), [15-22E](#),
[17-58](#), [17-87](#), [18-82](#) AND [23-109](#)

BACKGROUND AND PURPOSE

This ACWDL informs County Health and Human Service Agencies (HHSAs) of the upcoming 2025 CalWORKs eligibility case file reviews and provides the background, purpose, goals, and timelines related to the 2025 reviews. An audit conducted in 2012 by the California State Auditor, Bureau of State Audits, determined that the California Department of Social Services (Department) must increase the monitoring of the CalWORKs Eligibility function within counties. As a result, the Department began conducting case file reviews in March 2015.

The purpose of the case file reviews is to review cases at the County HHSA level to assess implementation of recent CalWORKs Eligibility policy, assess the need for further technical assistance, and increase CDSS' oversight for quality assurance consistent with the state audit recommendation. Attached to this letter is the *CalWORKs Eligibility Case File Review Timeline*, as a resource for County HHSAs to reference in anticipation of the upcoming reviews.

The timeline provides the sequence of events for the case file review process, including information on the summary of findings and when a Corrective Action Plan may be required.

REVIEW SCHEDULE

For the 2025 calendar year, the Department plans to begin conducting the CalWORKs eligibility case file reviews in March. Counties scheduled for review during the 2025 calendar year are as follows (subject to change if necessary):

County Name	Review Month
Placer and Fresno	March
Riverside and Mendocino	April
Sacramento and San Luis Obispo	May
San Diego and San Bernardino	June
Sutter and San Mateo	August
Santa Cruz and Los Angeles	September
Yuba and Humboldt	October

CASE FILE REVIEW PLAN FOR 2025

The Department will review 14 County HHSAs in 2025. CalWORKs Eligibility review teams will consist of two to six CDSS Early Engagement and Eligibility Bureau staff. The factors that will be reviewed include:

- Citizenship status and residency of the family,
- Composition of the Assistance Unit,
- Child deprivation,
- Family income,
- Family resources,
- The grant calculation, including recoupment of any applicable overpayments,
- Cooperation with child support requirements,
- Whether the case has all required documentation on file,
- If the County HHSAs assisted the applicant or recipient in obtaining the required documentation, and
- Provision of timely and adequate notice concerning requests for Immediate Need or adverse case actions.

The Department will also conduct review of county written policy in conjunction with the case file reviews if the policies have not been reviewed during prior review cycles.

The following CalWORKs written policies will be reviewed:

- Domestic abuse policies, documentation and notices as detailed in [ACL 23-109](#).

Prior to the reviews, the Department will provide the County HHSA with a complete list of the case files (by providing the case numbers) that will be reviewed, along with the updated *CalWORKs Eligibility Case File Review Tool*. The Department requests that County HHSA staff be available to answer questions during the review.

CASE REVIEW SUMMARY

Following the review, the Department will provide the County HHSA with a draft case review summary report, identifying each of the eligibility criteria reviewed in the case files and indicating whether there are any eligibility findings or observations. A finding occurs when aid is approved or denied incorrectly. An observation occurs when aid is approved or denied correctly, but there is an administrative error.

The County HHSA will have the opportunity to refute any findings or observations, if applicable, by providing additional documentation or evidence to the Department after receipt of the draft summary report. The Department will review any additional documentation provided by the county and issue a final summary report.

In cases where the Department identifies any findings in the final summary report, the County HHSA will be required to complete and submit a Corrective Action Plan (CAP) to the Department. The Department will review the County HHSA's CAP to determine if the plan is sufficient to correct the current finding(s) and prevent any future findings in that area. The Department will work with the County HHSA if additional information or steps are necessary to address the identified area(s).

The Early Engagement and Eligibility Bureau looks forward to open collaboration Counties to ensure the continued success of the CalWORKs program. Please contact the Early Engagement and Eligibility Bureau at CWEligibilityPolicy@dss.ca.gov with any questions or to discuss the case file review plan.

Attachment

CalWORKs Eligibility Case File Review Timeline

WEEK	TASKS
Eight Weeks Prior to Review	<ul style="list-style-type: none"> CDSS will confirm the scheduled day(s) of the CalWORKs Eligibility Case File Review (CFR) and request a County HHSA contact person.
Three to Six Weeks Prior to Review	<ul style="list-style-type: none"> CDSS will work with the County HHSA to determine logistical details for review. CDSS will provide the County HHSA with a list of case files (specific case numbers) that will be reviewed and list of documents, and domestic abuse policies that that will need to be ready prior to the review.
One Week Prior to Review	<ul style="list-style-type: none"> CDSS will hold a pre-review call with the County HHSA. This call is to inform the County of what to expect the day of the review and to answer any questions regarding any of the materials they have received thus far.
Week of Review	<ul style="list-style-type: none"> CDSS will call the County HHSA contact the day before the review to confirm any last-minute logistical details and to answer any questions. The CalWORKs Eligibility CFR review will include: <ul style="list-style-type: none"> Entrance Meeting: Introductions and review of the day's agenda. CFR: Review of selected CalWORKs applications, redeterminations, and terminations. Closing Discussion: This will include what the County HHSA should expect next in the process (post-review), as well as an opportunity for the County HHSA and/or CDSS to ask any follow-up questions.
Two Week Post-Review	<ul style="list-style-type: none"> CDSS will hold a post-review debrief conference call with the County HHSA to discuss the Review. CDSS will issue its Final Summary of Review following the two-week post-review conference call when a County HHSA does not have any findings or observations.
Six Weeks Post-Review	<ul style="list-style-type: none"> CDSS will issue the draft <i>CalWORKs Case File Review Summary</i> and forward to the County HHSA Director, Deputy Director and identified County HHSA management. The CDSS will review any additional data requested by the CDSS or submitted by the county.
Twelve Weeks Post-Review	<ul style="list-style-type: none"> CDSS will issue the final <i>CalWORKs Eligibility Case File Review Summary</i> and forward to County HHSA Director and Deputy Director.
45 Days Following Receipt of Final Summary of Review	<ul style="list-style-type: none"> The County HHSA will submit a Corrective Action Plan (CAP) to the CDSS (if applicable). The CDSS will follow up with the County HHSA within one week of the CAP receipt to ensure the corrective action plan is sufficient.
Six Months After Receipt of Corrective Action Plan	<ul style="list-style-type: none"> CDSS will follow up with the county to monitor the County HHSA's progress with the CAP.