

REFERENCE DOCUMENTS*

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Histories of major changes for the local assistance programs including general overviews of caseload characteristics and demographics, and program data.

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* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

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History of Major Changes

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Adoption Assistance Program (AAP)*

History of Major Program Changes

2008

De-Link – PL 110-351

A provision of the federal Fostering Connections to Success and Increasing Adoptions Act of 2008 gradually removed the path to Title IV-E AAP eligibility based on the 1996 AFDC income requirements. The De-Link began in FFY 2010. A child defined in the law as an “applicable child” will no longer need to meet the 1996 AFDC income requirements to be eligible for Title IV-E funding. Another provision of the law provided a requirement that a Title IV-E agency spend any savings generated from implementing the revised adoption assistance eligibility criteria on CWS that are eligible under Titles IV-B and IV-E of the Social Security Act. This requirement known in California as AAP De-Link, offered the Title IV-E agency flexibility in determining the methodology for calculating the savings. The W&IC section 16118(d) currently meets this requirement.

2010

Extension of AAP to Age 21 – PL 110-351

A provision of the federal Fostering Connections to Success and Increasing Adoptions Act of 2008 allowed states to expand the eligibility criteria for the extension of AAP benefits beyond age 18 to age 21 for specified individuals.

2011

De-Link – PL 112-34

A provision of the federal Child and Family Services Improvement and Innovation Act requires Title IV-E agencies to document how savings (if any) are spent when using the applicable child eligibility criteria in the Title IV-E AAP. California began the process of implementing this requirement under 2011 Realignment.

2012

Non-Minor Dependent Adoptions – W&IC section 161200

Eligibility criteria was expanded to allow for a non-minor dependent adoptee subject of an adoption pursuant to W&IC section 366.31 of subdivision (f), to meet AAP eligibility criteria and receive benefits after age 18 up to age 21.

* Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

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Adoptions*

History of Major Program Changes

1980

Adoption Assistance and Child Welfare Act of 1980 – *W&IC sections 16170 through 15177 and 11461; ACL No. 83-78*

The Act authorized significant funding to states that supported adoption assistance (subsidy) programs for adoptions of children with special needs, established permanency planning and devoted resources to family preservation, reunification and the prevention of abuse, neglect and child removal.

1996

The 1996 Adoptions Initiative – *W&IC sections 361.5, 366.21, 366.26, 16100, 16122 and 16501*

This initiative was introduced to maximize adoption opportunities for children in public FC by doubling funding over three years to county adoption agencies to meet performance targets for the adoption of FC children. This investment more than doubled the annual adoptions of foster children, which has been a significant factor in reducing the number of children in FC.

1997

Adoption and Safe Families Act – *Family Code sections 8700, 8707, 8708, 8710.1, 8710.2, 8710.3, 8710.4 and 8711; Health and Safety Code sections 1502.6, 1505 and 1530.8; W&IC sections 319, 361.3, 361.5, 366, 366.1, 366.21, 366.22, 366.26, 366.3, 366.4, 10950, 11155.5, 11400, 11401, 11404.1, 11478.1, 16100, 16120, 16501.1, 16131 and 16508.1*

This Act stressed permanency planning for children and created adoption incentive awards to states for increasing adoptions.

2000

Inter-country Adoption Act of 2000 – *Family Code sections 8521, 8533, 8900, 7901.1, 7906.5, 8900.5, 8921, 8923, 8924 and 8925; Health and Safety Code sections 1502, 1503.5, 1522, 1522.05 and 1522.1; Penal Code sections 11079, 11105, 11167.5 and 11170; W&IC sections 291, 293, 294, 295, 361.4, 361.5, 366.21, 366.22, 366.26, 16500.1 and 16501.1*

This Act implemented the Hague Adoption Convention, which codified guidelines to safeguard children by establishing international standards for inter-country adoptions. It became effective in the United States on April 1, 2008.

2003

Adoption Promotion Act of 2003 – *PL 108-145*

This Act amended Title IV-E requirements for states eligible to receive Adoption Incentives payments to provide payments for special needs adoptions and adoptions of older children (age nine and older).

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Adoptions*

History of Major Program Changes

2006

Safe and Timely Interstate Placement of Foster Children Act of 2006 – PL 109-239

The Act requires states to complete FC and adoption home studies requested by other states within 60 days, up to 75 days under certain circumstances. States must accept studies received from other states within 14 days unless found to be contrary to the well-being of the child. The Act also authorized incentives to states that complete interstate home studies within 30 days and increased the frequency of caseworker visits for children in out-of-state FC placements.

2008

Fostering Connections to Success and Increasing Adoptions Act of 2008 – PL 110-351

This Act promotes permanency and improves outcomes for children in FC through policy changes in six key areas: 1) support for kinship care and family connections; 2) support for older youth; 3) coordinated health services; 4) improved educational stability and opportunities; 5) incentives and assistance for adoption; and 6) direct access to federal resources for Indian tribes.

2011-2012

Child Welfare Realignment – Government Code sections 30025, 30027, 30028.5, 30029.3, 30029.4 and 30061; Penal Code section 13821; W&IC sections 1954, 10823, 17600, 17600.10, 17601.20, 18220 and 18220.1; Government Code sections 29553, 30061, 30070 and Chapter 6.3 (commencing with section 30025) to Division 3 of Title 3; Penal Code sections 1465.8 and 13821; Revenue and Taxation Code sections 6051.15 and 6201.15

Through the Budget Act of 2011 and related legislation, the responsibility to provide public adoption services was realigned to counties. As a result, counties were no longer required to be licensed for this function. Counties were allowed to choose to either provide these services directly or contract with CDSS, another county or a consortium of counties to provide the services.

2012-2014

Intercountry Adoption Universal Accreditation Act of 2012 – PL 112-276

The Act added provisions to the Intercountry Adoption Act of 2000 (PL 106-279) including adding a requirement that all United States Intercountry adoption agencies receive accreditation from the Council on Accreditation and provide uniform standards and accountability for adoption agencies regardless of whether the case falls under the Hague Adoption Convention. In addition, the Act requires Adoption Service Providers to follow the same accreditation or approval process required of Adoption Service Providers that handle Hague Convention cases.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalFresh^{*}

History of Major Program Changes

1998

Food Stamp Administrative Reduction – PL 105-185

This PL reduced the federal reimbursement of food stamp administrative costs, based on the amount charged to the former AFDC program (the cash aid program prior to TANF) that could have been allocated to the Food Stamp Program and Medi-Cal for common administrative costs. This resulted in a shift of \$58.8 million in costs from federal funds to the GF.

CFAP State-Only Expanded Program – W&IC section 18930 and 18901.7

The original CFAP served legal noncitizens who were under 18 or over 64 years of age. CFAP was expanded to serve legal noncitizens over 18 years of age. At this time, all CFAP recipients must have been legally in the United States prior to August 22, 1996 and must have met all federal food stamp eligibility criteria except for immigration status.

2001

Inaccessible Vehicle Resources – Change in federal Food Stamp regulations, sections 273.8 and 273.8(f)

Initially, the first \$4,650 of fair market value of any vehicle was exempt from family resource limits for purposes of eligibility and benefits determination. Effective June 1, 2011, any licensed or unlicensed vehicle is considered an inaccessible resource if its equity value is \$1,500 or less and one licensed vehicle per adult household member is exempt from the vehicle equity test.

2002

Food Stamp Reauthorization Act of 2002 – House Resolution 2646 Farm Bill

Effective October 2002, all disabled legal noncitizens could become eligible for the federal Food Stamp Program. Effective April 2003, federal food stamp eligibility was expanded to all legal noncitizens that have lived in the United States for five years or more. Effective October 2003, eligibility was further expanded to all legal noncitizen children.

House Resolution 2646 also included the following mandatory changes.

- Increased the limit for resources (property or funds other than income) for households with an elderly/disabled member from \$2,000 to \$3,000.
- The standard deduction was restructured from an equal amount for all households to 8.31 percent of the household's net income limit.

Base Budget for Food Stamp Administration – W&IC section 14154

The Food Stamp administration base funding for FY 2001-02 (and all subsequent years) was established at the FY 2000-01 funding level, which was formulated through the PCAB process and subsequently increased/decreased by caseload growth/decline.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalFresh^{*}

History of Major Program Changes

2003

QR/PB – *W&IC section 11265.2*

The monthly reporting/retrospective budgeting system was replaced with a QR/PB system for the CalWORKs and Food Stamp programs. Under QR/PB, recipients' eligibility and benefits are determined for a three-month period using prospective budgeting and income averaging rules. Recipients have the option to report changes that would result in increased grant/benefits when they occur.

2004

Transitional Benefits – *W&IC section 18901.6*

Transitional food stamp benefits were provided to households terminating their participation in the CalWORKs program without the need to re-establish food stamp eligibility. The household may receive up to five months of food stamp benefits in the same amount received prior to termination from CalWORKs, adjusted for the loss of the CalWORKs grant.

Vehicle Exclusion – *W&IC sections 11155 and 18901.9*

All vehicles were exempted from resource consideration in determining Food Stamp Program eligibility.

Exemption from the Face-to-Face interview – *W&IC section 18901.10*

Counties were required to screen applicants for the need to have a face-to-face interview as part of the application and recertification process and to grant, when appropriate, an exemption from face-to-face interviews.

2006

Simplification Options – *House Resolution 2646 Farm Bill*

Options were provided to simplify the Food Stamp Program to allow the following:

- Certain income exclusions (education loans, grants, scholarships and child support disregard) and resource exemptions (restricted accounts, Individual Development Accounts and Individual Retirement Accounts) consistent with the CalWORKs program
- Child support payments to a non-participating household member are treated as income exclusion rather than a deduction
- The use of the Standard Utility Allowance instead of allowing households the option of choosing the standard or actual costs

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalFresh^{*}

History of Major Program Changes

2008

Non-Assistance Food Stamp Administration Reduction – *Budget Act of 2008*

The county allocation of administrative costs was reduced by approximately \$21.0 million due to ongoing statewide fiscal challenges.

Face-to-Face Waiver – *W&IC section 18901.10*

Counties were allowed to waive the face-to-face intake interview to help streamline the application process and improve the Food Stamp Program's administrative efficiency. This policy was implemented statewide beginning 2012.

2009

American Recovery and Reinvestment Act of 2009

Participants in California's Food Stamp Program were provided a 13.6 percent increase in monthly benefits from February 17, 2009 through October 31, 2013.

Expanded Categorical Eligibility Food Stamp Program – *W&IC section 18901.5*

Categorical eligibility for the Food Stamp Program was expanded by waiving excess resource limits for households with minor children who receive TANF-funded benefits.

2011

Inter-County Transfer – *W&IC section 11053.2*

An inter-county transfer process was implemented to ensure uninterrupted benefits for CalFresh households that move from one county to another.

Extended Modified Categorical Eligibility – *W&IC sections 18900.1 and 18901.5*

Categorical eligibility was extended by waiving excess resource limits for households that include elderly/disabled individuals receiving TANF-funded benefits.

2012

CalFresh Administration Base Veto

A total of \$63 million (\$23 million GF) CalFresh administration funding was vetoed in conjunction with the Legislature's action to revert \$45 million GF that was unexpended in prior years.

SFIS Elimination – *W&IC section 10830*

The SFIS requirement for CalFresh households was eliminated beginning January 1, 2012.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalFresh^{*}

History of Major Program Changes

2012 (CONTINUED)

AR/CO – *W&IC section 11265.45*

Effective October 1, 2012, reporting for CalWORKs child-only cases was reduced from four reporting periods and five reports under QR/PB to one reporting period and one report under AR/CO. California was unable to obtain federal waiver approval to fully align CalFresh reporting to CalWORKs. Therefore, CalFresh converted child-only CalWORKs cases to change reporting. All AR/CO CalFresh households converted to SAR for CalFresh purposes effective October 1, 2013.

2013

LIHEAP/Standard Utility Allowance (Heat and Eat) – *W&IC section 18901.2*

All CalFresh-eligible households were provided a nominal LIHEAP outreach service benefit, which then qualifies the households to have the Standard Utility Allowance used in the computation of their CalFresh benefit allotment, resulting in an increase in the amount of nutritional support or new eligibility for some households.

SAR – *W&IC sections 11265.1 and 11265.2*

The QR system for households was replaced with a SAR system, which reduces the number of required income reports for non-child-only CalWORKs and CalFresh recipients to twice per year. In addition, a new mid-period income reporting threshold was imposed for CalFresh when household earnings reach 130 percent of the FPL. CalFresh cases with an associated CalWORKs case have shifted to SAR.

Waiver of Recertification Interview for Certain Elderly/Disabled Households

Counties were allowed to waive the recertification interview for elderly/disabled households in which all adults are elderly/disabled and have no earned income, unless the household requests an interview or the county determines an interview is necessary.

CalFresh Simplifications (E-Notifications and Telephonic Signatures)

Counties were allowed to email notices (e-Notifications) in lieu of mailing hard-copy correspondence (NOA, informing notices, etc.) to households who elect this option. Counties were also allowed to implement the federal option to record signatures electronically, eliminating the need to send documents to households to sign and return.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalFresh^{*}

History of Major Program Changes

2014

SUAS – *W&IC section 18901.2 and section 4006 of the Agricultural Act of 2014*

CDSS implemented the SUAS effective July 1, 2014 replacing the former LIHEAP. CalFresh households who are not otherwise eligible for the Standard Utility Allowance in the computation of their CalFresh allotment, and who do not already receive the maximum allotment for their household size, are issued a \$20.01 cash payment once per year. Receipt of the SUAS payment allows such households to have the Standard Utility Allowance used in their benefit calculation.

Modified Categorical Eligibility for CalFresh – *W&IC section 18901.5*

Effective July 1, 2014, the gross income limit for the TANF/MOE-funded service that confers Modified Categorical Eligibility was increased for all CalFresh households (except those that have been disqualified or sanctioned) to the federally allowed maximum of 200 percent of the FPL.

2015

Drug Felon Eligibility for CalFresh – *W&IC section 18901.3*

Effective April 1, 2015, the lifetime ban on CalFresh benefits for those convicted of certain drug felonies was lifted. The change will bring greater stability to those released from prison as well as decreased recidivism.

Student Eligibility – *W&IC section 18901.11*

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. Statute expands CalFresh eligibility to students who participate in educational programs that could be a component of CalFresh Employment and Training. Effective October 1, 2015, students participating in certain educational programs qualify for an exemption. Eligible programs are determined by CDSS.

Fleeing Felon Eligibility for CalFresh – *PL 110-246 as implemented in 80 Federal Register 54410*

In September 2015 the FNS published new rules clarifying and narrowing the definition of fleeing felon. The new rules allow a majority of previously ineligible adults to become eligible for CalFresh benefits. The rules were effective November 9, 2015, and were implemented in California on December 1, 2015.

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California Work Opportunity and Responsibility to Kids (CalWORKs)*

History of Major Program Changes

1998

CalWORKs Implementation – W&IC sections 11200 through 11526.5

The CalWORKs program, California's version of the TANF program, was implemented.

CalWORKs 60-Month Time Limit – W&IC sections 11266.5, 11454, 11454.5 and 11495.1

Adults in the CalWORKs program were allowed to receive assistance for a maximum of 60 months, unless the individual was exempt or their cash aid grant was fully reimbursed by child support collection.

CalWORKs Single Allocation Reappropriation – W&IC section 15204.2

This legislation authorized unspent CalWORKs funding from one year to the next for three years from FY 1997-98 through FY 1999-00.

2002

County Performance Incentives Discontinued – W&IC section 10544.1

Legislation allowed counties to earn fiscal incentive payments for case exits due to employment, grant reductions due to earnings and the diversion of applicants from enrolling in CalWORKs. Counties earned approximately \$1.092 billion between January 1, 1998 and June 30, 2002. These incentives were discontinued due to budgetary constraints; approximately \$400 million of unspent incentives were allocated to counties to spend after June 30, 2002.

Base Budget for CalWORKs Single Allocation

The CalWORKs Single Allocation base funding for FY 2001-02 and all subsequent years was established at the FY 2000-01 funding level, which was formulated through the PCAB process and increased/decreased by caseload growth/decline.

2003

QR/PB – W&IC sections 11265.1 and 11265.2

The monthly reporting/retrospective budgeting system was replaced with a QR/PB system for the CalWORKs and CalFresh programs. Under QR/PB, recipients' eligibility and benefits are determined for a three month period using prospective budgeting and income averaging rules based on information reported by recipients once in the quarter; recipients have the option to report changes that would result in increased grant/benefits when they occur.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalWORKs^{*}

History of Major Program Changes

2004

Work Participation – W&IC section 11325.21

The original 18/24 month time limit was eliminated and counties were required to universally engage all non-exempt adults in work activities (WTW program) within 90 days of applying for CalWORKs. Unless exempt from work requirements, adults were required to participate in at least 20 hours per week of core activities (employment, work experience, on-the-job training, work-study, self-employment, community service), up to twelve months of vocational training, job search and job readiness assistance and 12 hours per week of core or non-core activities (predominantly educational activities).

Employment Services Augmentation – W&IC section 11325.22

An additional \$50 million in TANF funds was provided for Employment Services.

CalWORKs Single Allocation Reappropriation – W&IC section 15204.2

Unspent CalWORKs Single Allocation funds totaling \$40 million were reappropriated from FY 2003-04 for distribution and expenditure in FY 2004-05.

2005

CalWORKs Single Allocation Reappropriation – W&IC section 15204.2

Unspent CalWORKs Single Allocation funds totaling \$50 million were reappropriated from FY 2004-05 for distribution and expenditure in FY 2005-06 to offset the reduction in CalWORKs Eligibility Administration Basic and Prospective Budgeting savings.

2006

Administration Restoration – Budget Act of 2006 section 28.00

Funding was reestablished at the FY 2005-06 spending level with \$140 million restored for county CalWORKs administration.

2007

Employment Services Augmentation – W&IC section 10535

An additional \$90 million in TANF funds was provided for Employment Services to help improve client participation levels.

COLA Elimination to the CalWORKs MAP Levels – W&IC section 11453

The annual COLA to the CalWORKs MAP levels was eliminated effective FY 2007-08 and each FY thereafter.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalWORKs^{*}

History of Major Program Changes

2007 (CONTINUED)

Durational Sanctions – W&IC section 11327.5

Legislation removed the statutory requirement that noncompliant individuals in the CalWORKs WTW program be subject to financial sanctions of a minimum duration of three or six months for individuals in their second, third or subsequent instance of non-compliance, respectively. Instead, any sanction may end at the point the noncompliant individual performs the activity he or she previously failed or refused to perform.

CalWORKs Homeless Assistance Program – W&IC section 11450(f)(2)(A)(B)

Legislation increased the daily rate for temporary homeless assistance, redefined homelessness criteria to include families who receive a notice to pay rent or vacate, allowed up to two months of rent in arrears to prevent homelessness and allowed a higher rent threshold to secure permanent housing.

2008

Subsidized Employment – W&IC section 11322.63

Counties were provided funding outside of the CalWORKs Single Allocation to pay 50 percent of a CalWORKs WTW participant's wage subsidy while participating in public or private sector Subsidized Employment. Participation is limited to a maximum of six months for each WTW participant and the subsidy is limited to 50 percent of the family's MAP.

Employment Services Base Veto – Budget Act of 2008 section 103

The Governor vetoed \$60 million of the CalWORKs Single Allocation due to the state's budget crisis. This was reflected as a \$60 million reduction to Employment Services funding.

2009

Four Percent MAP Reduction – W&IC Section 11450, 11452 and 11453

All CalWORKs MAP levels (including exempt and non-exempt in Region One and Region Two) were reduced by four percent.

American Recovery and Reinvestment Act of 2009 – W&IC sections 11320.3 and 11454.5

CDSS was authorized to apply for the Emergency Contingency Fund under the American Recovery and Reinvestment Act, a multi-year, federal economic stimulus program. Emergency Contingency Fund programs included Basic Assistance, Subsidized Employment and Non-Recurrent Short-Term Benefits.

Temporary Suspension of Subsidized Employment – W&IC section 11322.64

Subsidized Employment was suspended while funds were available through the American Recovery and Reinvestment Act Emergency Contingency Fund.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalWORKs^{*}

History of Major Program Changes

2009 (CONTINUED)

WTW Temporary Exemptions for Parents of Young Children – W&IC section 11320.3(b)(7)

Parents with a child between one and two years old or with two children under six years old were exempted from WTW requirements to provide counties with a mechanism by which to absorb the \$376 million reduction to Employment Services and Stage One Child Care in the CalWORKs Single Allocation.

Mental Health and Substance Abuse Funding Flexibility – W&IC sections 11325.71 and 11329.5(e)

Counties were allowed the flexibility to redirect funding, both from and to, the CalWORKs Mental Health and Substance Abuse allocations and CalWORKs Employment Services Allocation for FY 2009-10 and FY 2010-11.

2010

TANF Emergency Contingency Fund

Continued implementation and expansion of CalWORKs subsidized employment programs provided through the TANF Emergency Contingency Fund as part of the American Recovery and Reinvestment Act of 2009.

2011

Eight Percent MAP Reduction – W&IC sections 11450, 11452 and 11453

All CalWORKs MAP levels (including exempt and non-exempt in Region One and Region Two) were reduced by eight percent.

CalWORKs 48-Month Time Limit – W&IC sections 11454, 11454.2 and 11454.5

The time limit for adults was reduced from 60 months to 48 months, counting all months on aid received in California since January 1, 1998, unless the adult has/had a time limit exemption.

EID Reduction – W&IC section 11451.5

The initial amount of non-exempt earned income disregarded when determining grant amounts decreased from \$225 per month to \$112 per month. The disregard of 50 percent of any additional non-exempt earned income was maintained.

Changes to the Cal-Learn Program – W&IC section 11334.8

Cal-Learn intensive case management services were suspended for one year. Pregnant and parenting teens continued to receive CalWORKs assistance and services in the WTW program.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalWORKs^{*}

History of Major Program Changes

2011 (CONTINUED)

Extend Mental Health and Substance Abuse Funding Flexibility – W&IC sections 11325.71 and 11329.5(f)

Legislation extended the flexibility to redirect funding both from and to the CalWORKs Mental Health and Substance Abuse allocations and the CalWORKs Employment Services allocation for FY 2011-12.

Changes to Subsidized Employment – W&IC section 11322.63

The state's maximum contribution (outside of the Single Allocation) toward wage subsidies under the Subsidized Employment program was increased to 100 percent of the computed grant for the participant's AU in the month prior to participation in Subsidized Employment. The eligible population was expanded to include individuals in the CalWORKs Safety Net program and individuals in WTW sanction status. Counties were allowed to continue Subsidized Employment for the entire duration of the placement for participants who became ineligible for CalWORKs due to their Subsidized Employment income.

Extend WTW Exemptions for Young Children – W&IC sections 11320.3(b)(7), 11320.3(f)(1) and 11320.3(g)

The \$376 million reduction to the CalWORKs Single Allocation was extended. The young children and good cause for lack of supportive service exemptions from WTW requirements were extended through June 1, 2012.

2012

End of WTW Temporary Exemptions for Young Children and Creation of New WTW Young Child Exemption – W&IC sections 11320.3(g), 11320.3(h) and 11320.3(b)(6)(A)(iv)

In accordance with SB 1041 (Chapter 47, Statutes of 2012), temporary exemptions for parents of young children were extended through the end of calendar year 2012; adults remain exempt past January 2013 until they have been re-engaged in a WTW plan. Counties were required to re-engage these previously exempted cases over a period of two years, with all cases being re-engaged by January 2015. Additionally, a new once-per-lifetime WTW exemption was created for parents of children under two years old.

WTW 24-Month Time Clock – W&IC sections 11320.8, 11322.85 and 11322.86

In accordance with SB 1041, the WTW participation requirements for adults in the CalWORKs program were changed to provide 24 months of aid under which WTW participants must meet state-defined flexible participation requirements and an additional 24 months of aid only if WTW participants meet federally defined work requirements. Counties have the option of extending the 24 month limit based on state requirements for 20 percent of the post-24 month caseload if the adult meets specific criteria that suggest additional months of assistance will provide significant progress toward self-sufficiency, or if the adult is facing uniquely adverse labor market conditions.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalWORKs^{*}

History of Major Program Changes

2012 (CONTINUED)

WTW Hourly Participation Requirements – *W&IC section 11322.8*

In accordance with SB 1041, the hourly work requirements for work-eligible adults in the CalWORKs program were aligned with federal hourly work requirements. However, no WTW core hours are required during the WTW 24-Month Time Clock. After exhausting the WTW 24-Month Time Clock, unless otherwise exempt or having received an extension, work-eligible adults must meet federal work requirements in order to continue receiving cash aid: single parents with no child under six must participate in a minimum of 30 hours each week, 20 hours for single parents with a child under six and 35 hours for two-parent families.

AR/CO – *W&IC section 11265.45*

In accordance with SB 1041, the number of reporting periods for child-only cases was reduced from four (under QR/PB) to one under AR/CO. Child-only cases are ones in which no adult is aided (safety net cases, undocumented citizens, non-needy caretaker relatives, recipients of SSI, etc., excluding WTW sanctioned cases).

Restoration of the Cal-Learn Program – *W&IC sections 11334.6, 11334.8 and 11454.5*

In accordance with SB 1041, intensive case management services for pregnant and parenting teens were restored. Counties began to phase their programs in throughout FY 2012-13.

Single Allocation Reappropriation – *AB 1477 (Chapter 630, Statutes of 2012)*

Legislation provides that \$80 million of unspent TANF funds from FY 2010-11 be reverted early to augment the Single Allocation.

2013

WINS – *W&IC section 15525*

A monthly additional food assistance benefit was provided to CalFresh households working sufficient hours to meet the TANF WPR. The W&IC section 15525 reduced the WINS benefit from \$40 to \$10 per household per month and changed the implementation date from October 1, 2013, to January 1, 2014.

EID Restoration to \$225 – *W&IC section 11451.5*

In accordance with SB 1041, the initial disregard of \$225 of non-exempt earned income was restored, rescinding the Legislature's prior action that reduced the EID to \$112. The disregard of 50 percent of all additional earned income was maintained.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalWORKs^{*}

History of Major Program Changes

2013 (CONTINUED)

SAR – W&IC sections 11265.1, 11265.2, 11265.3 and 11265.4

The QR/PB was replaced with a SAR system, which reduces the number of required income reports made by CalWORKs recipients to twice per year for an aided adult and WTW sanctioned cases. The SAR system imposes two additional income reporting thresholds: 55 percent of the monthly income of a family of three at the FPL plus the amount of earned and unearned income last used to calculate the CalWORKs grant or the level likely to render an AU ineligible for CalWORKs benefits.

OCAT – W&IC section 11325.2(b)

Funding was provided for the development and implementation of a statewide standardized appraisal tool, known as the OCAT, which will lead to more effective placement in work activities and referral to supportive services.

Expanded Subsidized Employment – W&IC section 11322.63

In order to expand Subsidized Employment program opportunities in California, counties were allocated additional funds independent of the CalWORKs Single Allocation.

Family Stabilization – W&IC section 11325.24

Family Stabilization provides intensive case management and services to ensure a basic level of stability within a family prior to, or concurrently with, participation in WTW activities.

2014

Vehicle Asset Limit Increase – W&IC section 11155

Effective January 1, 2014, the equity value limit of a vehicle was increased to \$9,500 and a new exemption was added for a vehicle given as a gift, family transfer or donation from a family member.

Exemption of Child-Only Safety Net and Drug/Fleeing Felon Cases from Child Support Requirements – W&IC sections 11251.3 and 11486.5

The Safety Net and felon adult CalWORKs cases are funded with non-MOE GF and are no longer required to assign their child support rights to the state as a condition of eligibility. Any receipt of child support that is reasonably anticipated would be considered unearned income and counted against the assistance payment. Counties must remove all child support related sanctions and penalties for these cases retroactively, effective back to June 1, 2014.

Changes in WTW Hourly Work Participation Determination – W&IC section 11322.8

The determination of hours per week that a work-eligible adult must participate in work activities changed from a weekly minimum requirement to an average per week during the month.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalWORKs*

History of Major Program Changes

2014 (CONTINUED)

Changes to Family Stabilization Compliance – W&IC section 11325.24

Family Stabilization was amended to provide housing assistance to families. Recipients who refuse or are unable to follow their family stabilization plans without good cause are returned to the WTW program.

CalWORKs Housing Support – W&IC section 11325.24(e)

Housing support, including rental costs, are provided to eligible CalWORKs recipients who are experiencing homelessness or housing instability that would be a barrier to self-sufficiency or child well-being. This is an county optional program.

Five Percent MAP Increase – W&IC section 11450.025

All CalWORKs MAP levels (including exempt, non-exempt, Region One and Region Two) were increased by five percent effective March 1, 2014.

ARC Funding Option – W&IC section 11461.3

At county discretion, the amount paid to ARCs for the in-home care of children placed with them will be equal to the basic rate paid to FC providers.

2015

Pregnant Women – W&IC section 11450

Expands eligibility for CalWORKs and the Pregnancy Special Needs Payment to all pregnant women who have no other eligible children beginning in their second trimester. Previously, this population was not eligible until the beginning of their third trimester.

Truancy – W&IC section 11253

Eliminates the school attendance requirement and penalty to caretaker relatives when a child under the age of 16 is not regularly attending school. Counties will inform the family of how to enroll the child, age 16 or older, in a continuation school within the county and the family may be screened to determine eligibility for family stabilization services.

Five Percent MAP Increase – W&IC section 11450.025

All CalWORKs MAP levels (including exempt, non-exempt, Region One and Region Two) were increased by five percent effective April 1, 2015.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalWORKs^{*}

History of Major Program Changes

2015 (CONTINUED)

CalWORKs Eligibility to Include Drug Felons – *W&IC section 11251.3 and 11486.5*

CalWORKs eligibility extended to drug felons, contingent upon compliance with all terms of probation or parole, including participation in drug treatment programs effective April 1, 2015.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

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CalWORKs Child Care Program^{*}

History of Major Program Changes

1998

Grandfathered Families – Education Code section 8263.1

Child care services were eliminated for families whose income was above 75 percent of the State Median Income. Families that were receiving child care on January 1, 1998, with income over 75 percent of the State Median Income, were grandfathered into the current system. These families continued to receive child care as long as they continued to meet the program requirements in place on December 31, 1997.

RMR Ceilings – Education Code section 8357

The RMR survey used to set child care reimbursement rates was updated to the 1998 survey.

1999

RMR Ceilings – Education Code section 8357

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2001

RMR Ceilings – Education Code section 8357

The RMR survey used to set child care reimbursement rates was updated to the 2001 survey.

2003-2004

Reimbursement Rate Changes – Education Code Section 8357

The maximum reimbursement for licensed providers was updated from the 93rd percentile of the 2001 RMR survey to the 85th percentile of the 2003 RMR survey.

Eliminated Child Care for Grandfathered Families – Education Code Section 8263.1

Child Care services were eliminated for families who were receiving child care because they were grandfathered into the current system under the 1998 CalWORKs implementation.

Age Eligibility for Child Care – Education Code section 8263.4

Child care services were eliminated for 13 year old children, except for children with special needs.

^{*} Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

CalWORKs Child Care Program^{*}

History of Major Program Changes

2004-2005

Age Eligibility for Child Care – Education Code section 8263.4

Preferred placement in before and after school programs was mandated for 11 and 12 year old children who are eligible for subsidized child care in order to generate savings in the subsidized child care program.

2005-2006

Age Eligibility for Child Care – Education Code section 8263.4

Before and after school programs became the primary child care placement for 11 and 12 year olds. If the placement in the before and after school program did not meet the needs of the parents, they were required to certify the necessity for alternate arrangements.

2006

Reimbursement Rate Changes – Education Code Section 8357

The RMR survey used to set child care reimbursement rates was updated to the 2005 RMR survey.

2008

Family Fees and Reimbursement Rate Changes – Education Code sections 8273.1(d) and 8447

The family fee requirement for child care no longer applied to families receiving CalWORKs cash aid. Additionally, the requirement that the RMR survey must be conducted annually was changed to once every two years. This change aligned state statute with federal regulations.

2009-2010

WTW Exemptions for Parents of Young Children – W&IC section 11320.3(b)(7)

Parents with a child between one and two years old or parents with two children under six years old were exempted from WTW requirements to provide counties with a mechanism by which to absorb a \$376 million reduction to Employment Services and Stage One Child Care in the CalWORKs Single Allocation. Of the total reduction, Stage One Child Care absorbed \$215 million of the decrease.

2010-2011

Reimbursement Rate Changes – Education Code Section 8357

The payment ceiling at which license-exempt child care providers are reimbursed was reduced from 90 to 80 percent of the RMR payment ceilings established for family child care homes.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalWORKs Child Care Program^{*}

History of Major Program Changes

2010-2011 (CONTINUED)

Elimination of Stage Three Child Care Funding – California Department of Education Management Bulletin 10-12

Funding for the CalWORKs Stage Three Program was eliminated effective November 1, 2010, and then restored on April 1, 2011.

2011-2012

Reimbursement Rate and Income Threshold Changes – Education Code Section 8263.1 and 8357

The payment ceiling at which license-exempt child care providers are reimbursed was reduced from 80 to 60 percent of the RMR payment ceilings established for family child care homes. The income threshold for subsidized child care eligibility was lowered from 75 percent to 70 percent of the FY 2007-08 State Median Income.

Extend WTW Exemptions for Young Children to Absorb Child Care Funding Reduction W&IC sections 11320.3(b)(7), 11320.3(f)(1) and 11320.3(g)

The \$215 million reduction to Stage One Child Care (of the total \$376 million CalWORKs Single Allocation reduction) was extended. The young children and good cause for lack of supportive services exemptions were extended through June 1, 2012.

2012-2013

End of WTW Exemptions for Young Children – W&IC sections 11320.3(g), 11320.3(h) and 11320.3(b)(6)(A)(iv)

Legislation extended the temporary exemptions for parents of young children through the end of calendar year 2012; adults remained exempt past January 2013 until they were reengaged in a WTW plan or deemed to qualify for another exemption. Counties were required to reengage these previously exempted cases over a period of two years, with all cases reengaged by January 2015.

2013-2014

Reimbursement Rate Changes – Education Code Section 8357

Legislation required California to implement RMR ceilings at the 85th percentile of the 2009 RMR survey, reduced by 10.11 percent on January 1, 2015. If a calculated ceiling is less than the one provided before January 1, 2015, then the previous ceiling (from the 2005) survey is used.

Family Fee – Education Code Section 8273

Legislation required California to develop a new family fee schedule that was simple and easy to implement. This change affects former CalWORKs families and families in CDE child care programs.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

CalWORKs Child Care Program^{*}

History of Major Program Changes

2015

Reimbursement Rate Changes – *Education Code Section 8357*

The RMR ceilings increased by 4.5 percent of either the 85th percentile of the 2009 RMR survey for that county, reduced by 10.11 percent, or the 85th percentile of the 2005 RMR survey for that county, whichever is greater. Additionally, the reimbursement ceilings for license-exempt child care providers increased from 60 to 65 percent of the family child care home ceiling. These changes to the RMR ceiling were effective October 1, 2015.

** Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.*

Community Care Licensing (CCL) Family Child Care Homes^{*}

History of Major Program Changes

1998

Administering Inhaled Medication – *Health and Safety Code sections 1596.798 and 1596.8661*

Statute permits licensees and staff of child care centers and family child care homes to administer inhaled medication to a child in care if certain requirements are met.

2003

Posting Notice of Site Visit and Licensing Reports – *Health and Safety Code sections 1596.817 and 1596.8595*

Statute requires CDSS to post a notice each time a site visit is made to a child care facility. In addition, if the facility is cited for any Type A deficiency, the facility report must be posted immediately by the licensee/facility representative. Licensees are also required to post a site visit report or any other document verifying the licensee's compliance or noncompliance with CDSS' order to correct a Type A deficiency. All notices and reports must be posted immediately upon receipt and remain posted for 30 consecutive days. Failure by the licensee to post any of the required site visit reports for 30 consecutive days result in an immediate civil penalty assessment of \$100.

License Fee Increase – *Health and Safety Code sections 1596.803, 1596.871, 1597.09 and 1597.55*

License and annual fees were increased and aggregate fees for licensees with multiple facilities were eliminated. In addition, a fee is charged by the DOJ for processing FBI fingerprints of any applicant serving six or fewer children, including applicants for a family child care license, or for obtaining a criminal record of an applicant. Also, triennial visits to facilities in which legal or compliance problems have been identified were eliminated. Annual visits were also required to be ten percent of the total number of licensed child care facilities identified using a random sample methodology.

2006

Parent Notification Requirements – *Health and Safety Code sections 1596.859, 1596.8595, 1596.8895 and 1597.05*

Statute was amended to improve the transparency of licensing records and to ensure that parents/guardians using licensed child care facilities are aware of situations that present the greatest danger to children. These situations include serious health and safety violations resulting in Type A citations, noncompliance conferences and efforts by CDSS to revoke a facility's license.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Community Care Licensing (CCL) Family Child Care Homes^{*}

History of Major Program Changes

2008

Immediate Civil Penalties – *Health and Safety Code sections 1596.818, 1596.8867, 1596.8899, 1596.98, 1596.99, 1597.56, 1597.58 and 1597.62*

Statute requires the assessment of an immediate civil penalty for designated serious violations and requires the moneys derived from civil penalties imposed on child care facilities to be deposited into the Child Health and Safety Fund to be expended exclusively for the technical assistance, orientation, training and education of child care providers. Revenues received by CDSS from payment of civil penalties imposed on all other licensed facility types shall be deposited into the Technical Assistance Fund and expended exclusively for the technical assistance, training and education of licensees. Unannounced follow-up visits must be made within 30 days after the effective date of a temporary license suspension or revocation, or within 30 days after service of an order of exclusion or removal of a person from a facility.

CDSS is also required to ensure a licensee's plan of correction is measurable and verifiable. The plan shall specify what evidence is acceptable to establish that a deficiency has been corrected, and requires CDSS to specify in its licensing reports all violations that, if not corrected, will have a direct and immediate risk to the health and safety, or personal rights of clients or children in care.

2011

Retention/Enrollment of Non-minor students in School-Age Child Care Centers
Health and Safety Code sections 1596.785, 1596.7915 and 1596.862

CDSS was allowed to approve or deny written requests for the enrollment or retention of non-minor students at a School-Age Child Care Center. A non-minor student means a person 18 years of age or older who qualifies as an individual with exceptional needs, as defined in Education Code section 56026, and who qualifies for services from a regional center as a person with a developmental disability, as defined in W&IC section 4512 (a).

2013

Child Day Care: Childhood Nutrition Training – *Health and Safety Code sections 1596.865, 1596.866 and 1596.8661*

For licenses issued on or after January 1, 2016, at least one director or teacher from each day care center and each family day care home who provides care is required to have at least one hour of childhood nutrition training as part of the preventive health practices course(s).

Sex Offenders: FC Homes and Child Day Care Facilities – *Penal Code sections 3003.6*

Individuals' required to register as a sex offender whose offense was against a minor are prohibited from residing, working or volunteering in a child day care facility or children's residential facility. Violation of this prohibition is a misdemeanor.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Community Care Licensing (CCL) Family Child Care Homes^{*}

History of Major Program Changes

2014

Juveniles – *W&IC sections 241.1, 635, 636, 730.6, 4096.5 and 11469; Health and Safety Code sections 1536 and 1538.7*

Youth in FC are protected from being arrested and having charges filed against them due to minor incidents at group care facilities. The juvenile court is required to determine whether a delinquency petition, based on allegedly unlawful conduct by a foster youth at a group home, should be dismissed and the incident addressed through the group home's internal therapeutic and behavioral management program. CDSS and related stakeholders are also required to develop additional performance standards and outcome measures to determine the effectiveness of the care and supervision provided by group homes.

Family Day Care Home: Smoking Prohibition – *Health and Safety Code section 1596.795; Labor Code section 6404.5*

Statute prohibits anyone from smoking tobacco in a private residence that is licensed as a family day care home.

Care Facilities: Carbon Monoxide Detectors – *Health and Safety Code sections 1503.2, 1597.45, 1597.46, 1568.043, 1569.311, 1596.954 and 1597.543*

Day care centers and family day care homes are required to have one or more functioning carbon monoxide detectors that meet specific statutory requirements in the facility. CDSS is required to account for the presence of the detectors during inspections.

Care Facilities – *Health and Safety Code sections 1522, 1568.09, 1569.17 and 1596.871*

CDSS is prohibited from issuing a criminal record clearance to a person with a record of an arrest prior to the completion of an investigation of that arrest record when licensing community care facilities, foster family homes, certified family homes, residential care facilities and child care centers.

2015

Public Health: vaccinations – *Health and Safety Code sections 120325, 120335, 120370, 120375, 120338 and repeal Section 120365*

Statute eliminates the exemption to immunizations for children attending public school and child care based upon personal beliefs. Statute continues to allow a medical exemption.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Community Care Licensing (CCL) Family Child Care Homes^{*}

History of Major Program Changes

2015 (CONTINUED)

Day care facilities: immunizations exemptions – Health and Safety Code sections 1597.055, 1597.54, 1596.7995 and 1597.622

Statute prohibits a person from being employed or volunteering at a child care facility if he or she has not been immunized against influenza, pertussis and measles. Statute provides specific circumstances under which a person would be exempt from the immunization requirement, based on medical safety, current immunity, declining the influenza vaccination or the date upon which he or she was hired.

Care facilities: civil penalties, deficiencies and appeal procedures – Health and Safety Code sections 1548, 1568.0822, 1569.35, 1569.49, 1596.842, 1596.99 and 1597.58

Statute establishes a process for a licensee to submit a written request for a formal review of a deficiency finding at a care facility. The review process of an assessment of a civil penalty for an incident involving death, physical abuse and/or serious injury, in care facilities was revised. An appeal process for civil penalties was also established.

Care facilities: civil penalties – Health and Safety Code sections 1548, 1568.0822, 1569.49, 1596.99 and 1597.58

Statute increases the amount of civil penalties that may be imposed for a violation that the CDSS determines resulted in death, or serious injury at a care facility.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Community Care Licensing (CCL) Foster Family Homes*

History of Major Program Changes

1999

Fingerprint Background Check – *Health and Safety Code section 1522*

Background check requirements were reinstated for licensed foster family homes, as well as other community care facilities, on an emergency basis. Statute required federal and state background checks for all new facility applicants as well as any staff person, volunteer or employee who has client contact. Fingerprints must be submitted to the California DOJ before a person's employment, residence or initial presence. There is an immediate civil penalty of \$100 for each person who is not fingerprinted. If caregivers were found to be out of compliance, licensing staff were advised to cite caregivers and assess the civil penalty.

2001

Revised Standards for Relatives and Non-Relative Foster Family Homes – *Health and Safety Code section 1505, 1521.5, 1521.6 and 1525.5; W&IC sections 309, 319, 361.2, 361.3, 362.7, 366, 366.1, 727, 11400, 11401, 11402, 11461, 16504.5, 16507.5 and 16518*

The approval process for California's relative caregivers and non-relative extended family member caregivers was required to employ the same health and safety standards used to license foster family homes to ensure continuing compliance with the Federal Adoptions and Safe Families Act of 1997. Core requirements for caregivers, relatives and non-relative extended family members were subsequently consolidated into Article 3 of the foster family home regulations.

Rights of Foster Children – *W&IC section 16001.9*

Community care facilities licensed by CDSS were required to inform children being placed in FC of their personal rights. The information was required to address each child's questions and concerns in an age and developmentally appropriate manner. Any facility licensed to provide FC for six or more children was also required to post a listing of FC children's personal rights. Statute was added, listing 21 personal rights for foster children, most of which were already in the CCL Division regulations and enforced by the CCL Division.

Crimes: Unattended Children in Vehicles – *Vehicle Code Division 6.7*

The Unattended Child in Motor Vehicle Safety Act known as "Kaitlyn's Law" was added to the Vehicle Code, and stipulates that any parent, legal guardian or other person responsible for a child who is six years of age or younger may not leave the child inside a motor vehicle without the supervision of a person who is 12 years of age or older under specified conditions. These specified conditions include those that present a significant risk to the child's health or safety, the vehicle's engine is running or the vehicle's keys are in the ignition or both. If caregivers are found to be out of compliance, licensing staff were advised to cite caregivers for lack of supervision.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Community Care Licensing (CCL) Foster Family Homes^{*}

History of Major Program Changes

2002

In-Home Interview – *Health and Safety Code section 1521.5*

Statute was amended to delete the requirement that an in-home interview be conducted by the placement agency in counties that have not contracted with the state to license foster family homes. This change allowed state licensing staff to conduct an in-home interview with caregivers to collect basic information on their ability, willingness and readiness to be licensed to care for foster children. Licensing staff were advised to provide a copy of the completed In-Home Interview Form (LIC 861) to the county placement agency.

2003

Anti-Discrimination on the Basis of Sexual Orientation or Gender Identity

W&IC section 16001.9

Statute was amended to add an additional right to the personal rights for foster children. The additional right was “fair and equal access to all available services, placement, care, treatment and benefits and to not be subject to discrimination or harassment on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity, Human Immunodeficiency Virus status or mental or physical disability.” Amendments were also made to training requirements for caregivers to include training on anti-discrimination in regards to sexual orientation and gender identity. Caregivers were granted anti-discrimination rights. Licensing staff were advised to make caregivers aware of the personal right of foster children and, if noncompliance was found, to cite caregivers under applicable statute.

2004

Civil Penalty Increase for Background Check Violations – *Health and Safety Code section 1522, 1568.09, 1569.17 and 1596.871*

Various amendments were made to the Health and Safety Code to increase the existing civil penalty for allowing an individual who does not have a criminal record clearance or exemption to work or reside in a licensed facility. The existing immediate \$100 civil penalty per individual violation was increased to an immediate \$100 per day civil penalty applicable for a maximum of five days for first violations and a maximum of 30 days for subsequent violations. If caregivers were found to be out of compliance, licensing staff were advised to identify how long a person without clearance has been living in the home, cite caregivers for the deficiency and assess the civil penalty as specified.

^{*} Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

Community Care Licensing (CCL) Foster Family Homes^{*}

History of Major Program Changes

2004 (CONTINUED)

Education Information for Foster Children – W&IC section 16001.9

Statute was amended to add an additional right to the personal rights for foster children. The additional right provided that, at 16 years of age or older, children in FC have the right to access existing information regarding the educational options available, including, but not limited to, the coursework necessary for vocational and postsecondary educational programs and information regarding financial aid for postsecondary education. If caregivers were found to be out of compliance, licensing staff were advised to cite applicable statute pending regulations.

2005

Foster Children – Injections – Health and Safety Code section 1507.25

Statute was amended to authorize specified caregivers who are not licensed health care providers to administer emergency medical assistance and/or injections for specific reasons to a foster child in placement. If caregivers are trained by a licensed health care professional practicing within his or her scope of practice, they may administer specified emergency medical assistance and/or injections and supportive activities for specified conditions. If caregivers were found to be out of compliance, licensing staff were advised to cite caregivers under applicable statute pending regulations.

Use of Occasional Short-Term Babysitters – W&IC section 362.04

Statute was added to require caregivers to use a reasonable and prudent parent standard in determining and selecting appropriate babysitters for occasional short-term use. Caregivers are also required to provide specified information to babysitters when leaving a foster child in a babysitter's care. Babysitters are not required to be subject to a criminal background check, a health screening or cardiopulmonary resuscitation/first aid certification or training. If caregivers were found to be out of compliance, licensing staff were advised to cite caregivers under the applicable statute or regulations.

AFDC-FC: Pregnant and Parenting Foster Youth – W&IC sections 300, 362.1, 11400, 11401, 11465 and 16501.25

Various sections of the W&IC were amended to create “whole foster family homes,” which are defined as family homes, approved relative caregiver or non-relative extended family members' homes or certified homes that provide FC for minor parents and their children. These homes were to be specifically recruited and trained to be of assistance to minor parents in developing skills needed to provide a safe, stable and permanent home for their children. Statute also required that a “shared responsibility plan” be developed to avoid any confusion about the roles and responsibilities of caregivers and teen parents in providing care for the teen parent's child. If caregivers were found to be out of compliance, licensing staff were advised to cite caregivers under the care and supervision authority.

^{*} Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

Community Care Licensing (CCL) Foster Family Homes^{*}

History of Major Program Changes

2006

Children's Residential Regulations Review Workgroup and Placement Criteria – *Health and Safety Code section 1530.3; W&IC section 361.2*

The Health and Safety Code section 1530.3 was added, which required CCL Division to report to the Legislature on the progress of the Children's Residential Regulations Review Workgroup, which was subsequently tasked with a global revision of the regulations for licensed foster family homes. The W&IC section 361.2 was also amended to require that children be placed in homes where caregivers are able to: 1) meet the health, safety and well-being needs of the child; 2) maintain the least restrictive and most family-like environment; 3) permit the child to participate in reasonable, age-appropriate, day-to-day activities; and 4) use the reasonable and prudent parent standard to determine activities that are age-appropriate and meet the child's needs.

2007

Smoking in Vehicle with Minor Passengers – *Health and Safety Code section 1550*

Statute made it an infraction for a person to smoke a cigar, cigarette or pipe in a moving or stationary vehicle with a minor present. If caregivers were found to be out of compliance, licensing staff were advised to cite caregivers for conduct harmful to the health of the child in care.

Compliance with the federal Adam Walsh Child Protection and Safety Act and the Intercounty Adoption Act of 2000 – *Health and Safety Code sections 1522 and 1522.1*

Statutes were amended to enhance the criminal record clearance requirements to be met by foster family homes prior to being licensed. California and FBI criminal background checks, a check of the California Child Abuse Registry and a check of registries in each state in which the prospective caregiver has lived in the past five years are required. The passage of this section resulted in a new form, the Out-of-State Disclosure and Criminal Record Statement (LIC 508D), to check criminal record information in other states where caregivers have lived.

CWS: Resource Family Approval Program – *W&IC section 16519.5*

The W&IC section 16519.5 was amended to require CDSS, in consultation with stakeholders, to implement a three year Resource Family Approval implementation program in up to five counties. This program was intended to establish a single comprehensive Resource Family Approval process for FC and adoption that would replace the existing separate processes for licensing foster family homes, approving relatives and non-relative extended family members and approving adoptive families. A resource family has to meet both home approval standards and permanency assessment criteria to provide care to a child and be exempt from licensure, relative approval and adoption approval.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Community Care Licensing (CCL) Foster Family Homes^{*}

History of Major Program Changes

2008

Immediate Civil Penalties; CDSS Use of Civil Penalty Moneys; Unannounced Facility Visits; Plans of Correction; Licensing Report Requirements – *Health and Safety Code sections 1530.5 and 1548*

Statutes were amended to require licensed foster family homes, along with other community care facilities, be subjected to the immediate assessment of civil penalties for designated serious “zero tolerance” violations. “Zero tolerance” violations include fire clearance violations, absence of supervision, accessible bodies of water, accessible firearms or ammunition, refusing entry to an agent of CDSS and presence of an excluded person on the premises. If caregivers are found to be out of compliance, licensing staff were advised to assess caregivers a civil penalty in the amount of \$150 per day, per violation, until corrected.

Transfer of Existing License to a New Location – *Health and Safety Code section 1524*

Statute was amended to permit licensed foster family homes to transfer their existing license to a new location while requiring them to continue meeting all applicable laws and regulations at their new location. Licensing staff are instructed to: request that foster family homes submit an updated foster family home Application (LIC 283) and documentation for their new location; make an announced relocation case management visit to ensure compliance with licensing laws and regulations at the new location; and transfer the existing license to the new location by updating the address on record while retaining the existing foster family home license number and effective date of licensure. If foster family homes are found to be out of compliance at the new location, licensing staff were advised to cite caregivers according to the applicable licensing laws and regulations.

Training on California Student Safety and Violence Prevention Act of 2000 – *Health and Safety Code section 1529.2*

The existing training requirements for caregivers in licensed foster family homes were amended to require the initial 12-hour foster parent training include training in the California Student Safety and Violence Prevention Act of 2000. If caregivers are found to be out of compliance, licensing staff were advised to cite caregivers for not completing the training.

^{*} Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

Community Care Licensing (CCL) Foster Family Homes^{*}

History of Major Program Changes

2010

California Fostering Connections to Success Act – *W&IC sections 11400 and 11403*

California law was aligned to act in accordance with the federal Fostering Connections to Success and Increasing Adoptions Act of 2008 (PL 110-351). Statutes were amended to phase in the eligibility of a non-minor dependent to remain in FC up to age 19 beginning January 1, 2012, up to age 20 beginning January 1, 2013, and with approval by the Legislature, up to age 21 beginning January 1, 2014. Licensing staff are advised that: 1) non-minor dependents may remain in or return to care in licensed foster family homes and other Children's Residential community care facilities and homes; 2) while non-minor dependents, as clients, would be exempt from criminal background clearances, a pre-placement appraisal is required to assist in determining whether a placement is appropriate; and 3) health and safety standards apply to non-minor dependents in care.

2012

Minors and Non-Minor Dependents: Out-of-Home Placement – *Health and Safety Code sections 1502, 1505 and 1559.100; W&IC sections 11400 and 11403*

FC is extended up to age 21. Responsibility for Transitional Housing Placement Plus FC, originally a county-administered program for non-minor dependents, is transferred to the CCL Division. Remote site model placement, permitted for minors placed prior to October 1, 2012, is only available to non-minor dependents on or after that date and the transitional housing placement provider is required to have a staffing ratio of case manager to client of no more than 1:12 for minors and non-minor dependents. Transitional housing placement providers serving minors in a Transitional Housing Placement Program or non-minor dependents in a Transitional Housing Placement Plus FC are to be licensed as Transitional Housing Placement Program and, until regulations are further developed, AB 12 Interim Licensing Standards for the Transitional Housing Placement Program are to be applied to non-minor dependents in Transitional Housing Placement Plus FC.

FC Services: Cultural Competency – *Health and Safety Code section 1529.2; W&IC section 16001.9*

The existing training requirements for caregivers in licensed foster family homes was amended by requiring the initial 12-hour foster parent training and the annual eight hour foster parent training to include training in cultural competency and sensitivity. The training must relate to and include best practices for providing adequate care to lesbian, gay, bisexual and transgender youth in out-of-home care. Statute was also amended to add the right of every child in FC to have caregivers and access to child welfare personnel who have received this training. Licensing staff were advised that if foster family homes are found to be out of compliance with this training requirement, caregivers are to be cited for not completing the training.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Community Care Licensing (CCL) Foster Family Homes^{*}

History of Major Program Changes

2012 (CONTINUED)

Foster Homes: Residential Capacity – *W&IC section 17732.2*

Existing law was clarified to require licensed specialized foster family homes not exceed a total of six children living in the home. Consistent with existing law, it continued to permit two, and up to three, foster children with or without special health care needs to be in a specialized foster family home under specified conditions. However, non-foster children living in the same home must be considered when making a capacity determination. Licensing staff were advised that if foster family homes are found to be out of compliance by having too many children in the home, caregivers were to be cited under the applicable regulations.

Immediate Civil Penalties – *Health and Safety Code section 1530.5*

The assessment of civil penalties for designated serious “zero tolerance” violations was applied to licensed foster family homes. Statute was amended to exempt foster family homes from most civil penalties, except those that result from fingerprint violations and unlicensed care operations. As a result, foster family homes are no longer subject to immediate civil penalties for any violation of Health and Safety Code section 1548. Licensing staff were advised effective January 1, 2013, that caregivers shall no longer be assessed immediate civil penalties for these violations.

2013

FC Services: Smoke-Free Environment – *Health and Safety Code section 1530.7*

Effective January 1, 2014, statute was amended to require that specified children’s residential facilities maintain a smoke-free environment. Further, individuals licensed or certified to provide care to foster children are prohibited from smoking or permitting any other person to smoke inside the home, or outside when a child is present. The law also prohibits smoking in any motor vehicle regularly used to transport children. Pending the development of regulations, licensing staff will be instructed to cite caregivers if it is ascertained that smoking is taking place in violation of the law.

^{*} Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

Community Care Licensing (CCL) Foster Family Homes^{*}

History of Major Program Changes

2014

FC Providers: Criminal Records – *Health and Safety Code section 1522.08; W&IC section 16504.7*

Statute was amended and added relating to the criminal background check of a prospective foster parent, adult member of the prospective foster parent's household or employee of a foster family agency's criminal background. CDSS is required, upon request by CWDs, to provide a list of individuals who are granted criminal record exemptions and are associated with state licensed foster family homes, certified family homes of licensed foster family agencies and group homes. In addition, the law requires CDSS to share summary information used in making the decision to grant a criminal record exemption. The law requires CDSS to issue an ACL on or before March 1, 2015, to specify how a county may request summary information, how the information will be used by CDSS and how the information may be used by a county. This law further allows CDSS and CWDs to share any information regarding an individual subject to an administrative action. Existing law requires CDSS to maintain a centralized database for the monitoring and tracking of administrative actions taken, that will be used by other departments. The centralized database is contingent upon funding. Once a centralized database is developed, CDSS and CWDs will share any information regarding an individual's administrative actions.

2015

CCR – *Health and Safety Code sections 1524, 1529.2 and 1536*

A foster family home license is forfeited when the licensee becomes an approved resource family. Existing foster parent training requirements sunset on January 1, 2017, and were replaced with revised and restructured requirements, intended to be flexible to meet the specialized needs of individual children and families. The revised training requirements become effective January 1, 2017, and sunset January 1, 2019, unless extended or deleted by a later statute. Professional organizations educating foster parents, including the Foster and Kinship Care Education Program of the CCC are allowed to request and receive the names and addresses of foster parents in California.

Gender Identity – *Health and Safety Code section 1502.8; W&IC sections 16001.9 and 16006.*

Personal rights for foster children were amended to include the right to be placed in out-of-home care according to their gender identity, regardless of the gender or sex listed in their court or child welfare records. The mandate that children and non-minor dependents be placed according to gender identify was reiterated with the addition of W&IC section 16006. Health and Safety Code section 1502.8 was added, requiring CDSS to adopt regulations consistent with this new personal right.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Community Care Licensing (CCL) Foster Family Homes^{*}

History of Major Program Changes

2015 (CONTINUED)

Psychotropic Medication – *Health and Safety Code section 1529.2; W&IC section 16501.4*

Existing pre-placement and post placement training requirements for foster parents on health issues in FC were expanded to include instruction on the oversight of psychotropic medications that are prescribed for children in care. CDSS is required to consult with the DHCS and other specified stakeholders to develop training for foster parents and others that addresses issues related to psychotropic medication such as authorization, risks, benefits, assistance with self-administration, oversight, substance use disorders and mental health treatments.

Reasonable and Prudent Parent Standard – *Health and Safety Code section 1522.44; W&IC section 362.05*

Licensed and certified foster parents are required to receive training related to the reasonable and prudent parent standard consistent with section 671(a) (24) of Title 42 of the United States Code. The training is to include knowledge and skills relating to the reasonable and prudent parent standard for the participation of foster children in age or developmentally appropriate activities. Training includes applying knowledge and skills relating to the developmental states of the cognitive, emotional, physical and behavioral capacities of a child. Training also includes applying the reasonable and prudent parent standard to decisions such as whether to allow the child to engage in extracurricular, enrichment, cultural and social activities, including sports, field trips and overnight activities. Aspects of the caregiver training requirements and of the reasonable and prudent parent standard itself are clarified in amendments to W&IC section 362.05.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

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Child Welfare Services (CWS)*

History of Major Program Changes

1993

Federal Family Preservation and Support Act – PL 103-66

States were encouraged to use funds to create a continuum of family-focused services for at risk children and families and were required to engage in a comprehensive planning process to develop more responsive family support and preservation strategies. In addition, the Act encouraged states to use funds to integrate prevention services into treatment-oriented child welfare systems, improve service coordination within and across state service agencies and engage broad segments of the community in program planning at state and local levels.

1997

Federal Adoption and Safe Families Act – PL 105-89

This Act reauthorized the federal Family Preservation and Support Services Program and ensured safety for abused and neglected children by adding “safety of the child” to every step of the case plan and review process and requiring criminal record checks for foster/adoptive parents who receive federal funds on behalf of a child. In addition, this Act: 1) promoted adoptions by rewarding states that increased adoptions with incentive funds; 2) prohibited states from delaying/denying placements based on the geographic location of the prospective adoptive families; and 3) required the federal DHHS to establish new outcome measures to monitor and improve state performance.

2000

CWS Stakeholders Group – Budget Act of 2000

The Budget Act of 2000 directed the California Legislature to establish the CWS Stakeholders Group directed by CDSS. This group directed the CWS system and made recommendations for its improvement. Approximately 60 individuals, representing all aspects of the child welfare community, convened to examine CWS programs. The stakeholders laid foundational work in the development of assumptions, a vision, a mission statement and guiding values.

2001, 2004

Child Welfare System Improvement and Accountability Act – W&IC section 10601.2

The statewide accountability system, which went into effect January 2, 2014, was designed to improve outcomes for children in the child welfare system, while holding county and state agencies accountable for the outcomes achieved. This system is an enhanced version of the federal oversight system mandated by Congress and used to monitor states' performance. In January 2004, the implementation of W&IC section 10601.2 brought a new CWS Outcome and Accountability System to California. This new Outcomes and Accountability System, also known as the California Child and Family Services Review System, focuses primarily on measuring outcomes in the areas of safety, permanency and child and family well-being. By design, the California Child and Family Services Review System closely follows the federal emphasis on safety, permanency and well-being. The new system operates on a philosophy of continuous quality improvement, interagency partnerships, community involvement and public reporting of program outcomes.

* Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

Child Welfare Services (CWS)*

History of Major Program Changes

2001

PSSF Amendments of 2001 – PL 107-133

The amendments reauthorized the PSSF program with mandatory funding increases for FFYs 2002 through 2006 as well as, reauthorizing a set aside for Indian Tribes. New provisions of this law include the Infant Safe Haven program, services to strengthen parental relationships and healthy marriages as part of family support services and the ability to implement a corrective action plan resulting from a Child and Family Services Review. Additionally, this created the ETV program.

2002

Child and Family Services Review

The 1994 Amendments to the Social Security Act authorized the United States DHHS to review state child and family service programs to ensure conformity with the requirements of Titles IV-B and IV-E of the Social Security Act. In March of 2000, the DHHS established a new approach to monitoring state child welfare programs known as the Child and Family Services Review. States are assessed for substantial conformity with certain federal requirements for child protective services, FC, adoption, family preservation, family support and independent living services with an emphasis on the safety, permanency and well-being of children and families served through CWS. The federal Children's Bureau, within the DHHS, conducts the reviews in partnership with state child welfare agency staff and consultant reviewers who supplement the federal review team. California began its first round of the Child and Family Services Review in 2002. The reviews are structured to help states identify strengths and areas needing improvement within their agencies and programs in order to develop a Program Improvement Plan to address any areas needing improvement.

2006

Safe and Timely Interstate Placement of Foster Children Act of 2006 – PL 109-239

The Act required states to complete FC and adoption home studies requested by other states within 60 days. It does not require the parts of the home study that involve education and training within the 60 days, these components may be done within 180 days. States must accept studies received from other states within 14 days unless found to be contrary to the well-being of the child. The Act also authorized incentives to states that complete interstate home studies within 30 days and increased the frequency of state caseworker visits for children in out-of-state FC placements. This provision was slated to sunset on October 1, 2010.

Child and Family Services Improvement Act – W&IC section 16501.1(k)

Statute appropriated funds through the PSSF fund to support monthly caseworker visits with children in FC with a primary emphasis on activities designed to improve caseworker retention, recruitment, training and ability to access the benefits of technology. Each state plan for CWS is required to describe standards for the content and frequency of caseworker visits for children in FC.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Child Welfare Services (CWS)*

History of Major Program Changes

2008

Fostering Connections to Success and Increasing Adoptions Act – PL 110-3510

The Act assisted hundreds of thousands of children and youth in FC by promoting permanent families for them through relative guardianship, adoption, improving education and health care. The Act also extended federal support for youth up to age 21 offering important federal protections and support to American Indian children. Additionally, this Act required a transitional plan for foster youth 90-days prior to aging out of FC.

2010

Patient Protection and ACA – PL 111-148

The Act extended Medicaid coverage to former FC children younger than age 26.

2011

Child and Family Services Improvement and Innovation Act – PL 112-34

The Act required states to: 1) coordinate health care services to monitor and treat the emotional trauma needs of children in FC and develop protocols for monitoring the use of psychotropic medications; 2) reduce the length of time in FC for children without a permanent placement under the age of 5 to address their developmental needs; 3) meet the educational stability case plan requirements for children in FC at the time of each placement change; 4) increased services to parents and caregivers for time-limited FR services to improve timely reunification; and 5) to facilitate visitation between children in FC with their parents and siblings. The Act also revised: 1) provisions and extended requirements for the completion of monthly caseworker visits of children in FC; 2) requirements ensuring that each child age 16 and older in FC receive a free copy of their credit report each year until discharged from FC; and 3) to receive aid in interpreting and resolving any inconsistencies.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Child Welfare Services (CWS)*

History of Major Program Changes

2011 (CONTINUED)

Child Welfare Realignment – Family Code sections 8506, 8509, 8513, 8515, 8521, 8524, 8530, 8600.5, 8608, 8619, 8620, 8621, 8700, 8701, 8702, 8703, 8704, 8705, 8707, 8708, 8709, 8710, 8710.1, 8710.3, 8712, 8713, 8715, 8716, 8717, 8720, 8730, 8732, 8733, 8735 and 9205; Government Code sections 29553, 30061 and 30070; Health and Safety Code sections 1502, 1505, and 1559.110; Penal Code sections 1465.8 and 13821; Revenue and Taxation Code sections 6051.15 and 6201.15; W&IC sections 293, 294, 305.6, 358.1, 361, 361.5, 366.21, 366.22, 366.24, 366.25, 366.26, 366.3, 450, 727.3, 727.31, 10101, 10101.2, 10103, 10103.5, 10104, 10553.1, 10553.11, 10601.2, 10605, 10606.2, 10609.3, 10609.4, 10609.9, 11214, 11215, 11400, 11402, 11402.6, 11403, 11403.1, 11403.2, 11403.25, 11403.3, 11403.4, 11461, 11461.2, 11462.05, 11463, 11466.23, 11467, 11469, 13754, 13757, 15200, 15204.25, 15204.9, 16002, 16100, 16101, 16105, 16118, 16119, 16120, 16120.1, 16121.05, 16122, 16123, 16133, 16135, 16135.26, 16135.10, 16135.16, 16500.5, 16500.51, 16500.55, 16500.65, 16500.8, 16501.1, 16501.3, 16501.5, 16501.8, 16508.1, 16508.3, 16516.5, 16519.5, 16522, 16522.1, 16522.2, 16522.5, 16525.10, 16525.25, 16605, 17601.20, 18220, 18220.1, 18250, 18254, 18255, 18257, 18358.30, 18960, 18961, 18962, 18987.7 and 18987.72

The funding for the CWS program was realigned from the state to the county. With this implementation, counties are no longer required to contract for services, but are able to use their funds in-house for direct services as long as federal match requirements are still met. For more information, refer to the 2011 Realignment tab.

2014

Foster Youth Credit Reports – W&IC section 10618.6

Statute requires county caseworkers to request credit reports for foster youth and provide assistance with interpreting the consumer credit report and resolving any inaccuracies.

After 18 Terminated Guardianship and Adoption – W&IC sections 388.1 and 11403

Statute requires a non-minor in a guardianship or adoption to re-enter into FC if the guardian(s) or adoptive parent(s) is (are) failing to provide ongoing support between the ages of 18 and 21 years old.

Sibling Visitations – W&IC sections 358.1, 361.2, 362.1, 366, 366.1, 366.3, 388, 706.6, 778 and 16002

Statute requires caseworkers to assess and document dependent-dependent and dependent-nondependent sibling relationships and visitations.

The CSEC Program – W&IC sections 300(b)(2) and 16524.6-16524.11

The W&IC was amended to include children who are commercially sexually exploited as dependents of the court, to be served by the state child welfare system. To adequately serve children who have been commercially sexually exploited, the Legislature declared it necessary for counties to develop and utilize a multidisciplinary team approach to case management, service

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Child Welfare Services (CWS)*

History of Major Program Changes

2014 (CONTINUED) The CSEC Program

planning and provision of services, and that counties develop and utilize interagency protocols to ensure services are provided as needed to this population. The CSEC is an optional program for counties which provides funding for implementation, training, prevention and intervention services related to children who are victims, or at risk, of commercial sexual exploitation.

Preventing Sex Trafficking and Strengthening Families Act – PL 113-183

Federal law amended Title IV-E of the Social Security Act to require states to: 1) develop and implement policies and procedures to identify, document and serve minor victims of sex trafficking; 2) collect and report on data associated with minor victims of sex trafficking; 3) report to law enforcement no later than 24 hours on identified minor sex trafficking victims; and 4) develop protocols that include ascertaining whether foster children absent from care were sex trafficking during their time away from care.

2015

FR Services Extension to Dependent Parents – *W&IC sections 366.21 through 366.22*

Statute extends FR services from 18 months to 24 months when the minor parent or non-minor dependent parent makes substantial progress on their court ordered FR plan and the courts determine extending FR services is in the best interests of the minor parent's or non-minor dependent parent's child.

Psychotropic Medications – *Health and Safety Code section 1529.2, W&IC section 16501.4*

Health and Safety Code section 1529.2 was amended to expand existing pre-placement and post placement training requirements for foster parents on health issues in FC to include instruction on information in W&IC section 16501.4(d). The W&IC section 16501.4 was added to ensure the oversight of psychotropic medications that are prescribed for children in care, and subdivision (d) requires CDSS to consult with the DHCS and other specified stakeholders to develop training for foster parents and others that addresses issues related to psychotropic medication such as authorization, risks, benefits, assistance with self-administration, oversight, substance use disorders and mental health treatments.

CCR – *AB 403 (Chapter 773, Statutes of 2015)*

Various provisions of statute were added or amended to implement recommendations put forward in CDSS's 2015 report: California's Child Welfare Continuum of Care Reform. The report outlined a comprehensive reform effort to make sure that youth in FC have their day-to-day physical, mental and emotional needs met; that they have the greatest chance to grow up in permanent and supportive homes; and that they have the opportunity to grow into self-sufficient, successful adults. For CWS, AB 403 improves the training and support to families who provide FC, now known as resource families, so they are better prepared to care for youth living with them as well as recruitment and retention of foster family homes.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

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Foster Care (FC)*

History of Major Program Changes

1982

Public System of Statewide CWS – *W&IC section 16500*

CDSS and the CWDs were required to establish and support a statewide system of CWS. Each county must maintain four specialized components: ER, FM, FR and PP.

1989

GH Rate Structures – *W&IC section 11462*

The FC group home rate structure was established and the CWS/CMS was authorized.

1997

Concurrent Planning – *Evidence Code section 1228.1; Family Code sections 8614, 8700 and 8714; Health and Safety Code sections 1502, 1505 and 1505.2; W&IC sections 300, 316.2, 361, 366, 387, 11400, 16206 and 16501.1*

Existing law was amended to mandate concurrent planning to increase the likelihood that children who are unable to reunify with birth parents achieve permanency with relatives.

1998

Adoption and Safe Families Act – *Family Code sections 8700, 8707, 8708, 8710.1, 8710.2, 8710.3, 8710.4 and 8711; Health and Safety Code sections 1505, 1530.8 and 1502.6; W&IC sections 319, 361.3, 361.5, 366, 366.1, 366.22, 366.26, 366.3, 366.4, 10950 and 11155.5, 11400, 14401, 11404.1, 11478.1, 16100, 16120, 16501.1, 16131 and 16508.1.*

The federal Adoption and Safe Families Act was implemented in California to include shortened timeframes for reunification.

FC Ombudsman – *Education Code sections 48850, 49069.5, 56140, 56200, 56205, 56366 and 56366.8; Family Code sections 7911, 7911.1 and 7912; Health and Safety Code sections 1520.1, 1520.11, 1522, 1522.02, 1522.03, 1522.04, 1522.41, 1522.42, 1522.43, 1522.1, 1522.4, 1534, 1534.5, 1538, 1538.5, 1548, 1550, 1558, 1558.1, 1563, 1568.042, 1568.082, 1568.09, 1568.092, 1568.093, 1569.1515, 1569.17, 1569.172, 1569.50, 1569.58, 1569.59, 1569.617, 1596.603, 1596.871, 1596.8713, 1596.877, 1596.885, 1596.8897, 1596.8898 and 1596.952; Penal Code section 11174.3; W&IC sections 366, 727.1, 827, 10609.3, 11402, 11404.5, 11461, 11462, 11463, 11465, 16501.1, 18358.30, 361.21, 5867.5, 11466.21, 11467, 16501.2, 16516.5, 16160 and 18987.6*

The group home reforms were enacted and the FC Ombudsman program was established to provide a way to resolve issues affecting foster youth and caregivers.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Foster Care (FC)*

History of Major Program Changes

2001

Child and Family Review Systems – *W&IC section 10601.2*

A statewide system was established to review county systems and to provide assistance in meeting state and federal outcome measures.

The ETV Program – *PL 107-133*

This program was added to the Chafee FC Independence Program Act of 1999 (PL 106-169) via PL 107-133. The ETV program provides additional funding to meet the educational and training needs of youth who aged out of FC after the age of 16 or youth that are in extended FC. The law authorizes states to use the specified funding to provide vouchers of up to \$5,000 per year to financially assist eligible foster youth pursuing secondary education or job training programs after the age of 18 and up to age 23 years old.

2003

Safe Surrender of a Newborn – *Health and Safety Code section 1255.7; Penal Code section 271.5*

Statute permitted the surrender of a newborn to a safe-surrender site. Other provisions required certain information regarding the surrendering individual be kept confidential and safe-surrender sites post signs using certain specified signage.

Education for Foster Children – *Education Code sections 48850(a)(1) and 48853.5(a-d); W&IC sections 16010(a) and 16501.1(f)(8)*

New rights and duties concerning the education of foster children were created including the right to a least restrictive educational program; same access to resources, same services and activities as other pupils, educational liaison, continuation in school of origin despite changes in FC placement if requested and approved by education rights holder and immediate enrollment in school at the time of placement or placement change. Courts, education rights holders, school districts, caregivers and child welfare agencies are tasked to work together to advocate for educational needs of foster youth including consideration of education matters at all juvenile court hearings.

2004

Psychotropic Medication – *W&IC section 369.5(c)*

Judicial time frames were established within which to approve/deny a request to authorize psychotropic medication for a foster child.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Foster Care (FC)*

History of Major Program Changes

2006

Child Welfare Leadership and Performance Accountability – *W&IC section 16540, 16541, 16541.5, 16543, 16543.5, 16544 and 16545*

The Child Welfare Council was established as an advisory body responsible for improving collaboration among multiple agencies and the courts in the child welfare system. The Council was required to adopt outcome measures by 2008.

Indian Children – *Family Code sections 3041, 7810, 7821, 7822, 7892.5, 7907.3, 8606.5, 8616.5, 8619.5, 8620, 8710, 9208, 9209 and 9210; Probate Code sections 1449, 1459, 1459.5, 1460.2, 1474, 1500.1, 1510, 1511, 1513, 1516.5, 1601 and 2112; W&IC sections 110, 224, 224.1, 224.2, 224.3, 224.4, 224.5, 224.6, 290.1, 290.2, 291, 292, 293, 294, 295, 297, 305.5, 306.6, 317, 360.6, 361, 361.31, 361.7, 366, 366.26, 727.4, 10553.1 and 16507.4*

Certain provisions of the federal Indian Child Welfare Act were codified, including tribal jurisdiction, notice of an intervention in child custody proceedings, entitlement of tribal acts and proceedings, placement preferences and unsealing of adoption records.

2007, 2012

Resource Family Approval – *W&IC sections 16519 and 16519.5*

Statute was amended to authorize CDSS, in consultation with county welfare agencies, stakeholders and interested parties, to implement a three-year pilot program to establish a unified, family friendly and child-centered resource family approval process in up to five counties. This unified process would replace the multiple existing processes for all related and non-related families who want to provide care to children who are dependents or wards of the court. The single standard for approval applies to all caregivers regardless of the child's case plan and approved resource families would not be required to undergo any additional approvals to care for children in FC. The W&IC section 16519.5 amended the Resource Family Approval program from a pilot program to an early implementation program.

2009

Health Care Coordination and Oversight – *W&IC sections 16010.2 and 16010.3*

Statute was amended to provide consistency with the federal Fostering Connections Act requiring CDSS to develop a plan, in consultation with pediatricians, health care experts, FC experts and recipients of FC, for the ongoing oversight and coordination of health care services for youth in FC.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Foster Care (FC)*

History of Major Program Changes

2010-2013

Federal Fostering Connections to Success Act – PL 110-35; Family Code section 17552; Health and Safety Code sections 1501.1, 1502, 1505, 1502.7, 1536.1 and 1559.110; Penal Code section 11170; W&IC sections 241.1, 293, 295, 297, 300.3, 303, 317, 358.1, 360, 361.45, 361.5, 366, 366.21, 366.22, 366.25, 366.3, 366.31, 366.4, 388, 391, 450, 451, 452, 607.2, 607.3, 727.2, 727.3, 727.31, 728, 781, 785, 826, 10101.2, 10609.4, 11008.15, 11155.5, 11217, 11253, 11253.3, 11363, 11364, 11365, 11376, 11386, 11387, 11400, 11401, 11401.05, 11401.1, 11401.4, 11401.5, 11402, 11402.2, 11403, 11403, 11403.01, 11403.2, 11403.25, 11405, 11450, 11450.16, 11454.5, 11461, 11464, 11465, 11466.21, 11466.23, 11466.24, 13754, 13757, 16120, 16123, 16501, 16501.1, 16501.25, 16503, 16504, 16504.5, 16507.3, 16507.4, 16507.6, 16508, 16522 16600, 16601, 16602, 16604 and 16604.5

New state statutes were enacted to exercise the option in the federal Fostering Connections Act to extend FC up to age 21 as allowed via PL 110-351. The W&IC section 11400 amended the FC program, implemented on January 1, 2012, to allow foster youth (including those supervised by probation) to remain in care up to age 21 if they meet one of the five criteria described in the federal law. AB 12, along with follow up legislation (AB 212, AB 1712 and AB 787) created new placement options for youth aged 18 to 21 in the FC, adoptions assistance and Kin-GAP programs. Additionally, foster youth who exit care on or after their 18th birthday are allowed to re-enter FC at a later date prior to reaching age 21. This aspect of the program is a unique shift in child welfare policy.

2012-2013

CCR – W&IC section 319.2, 319.3, 361.2, 727, 11461.2, 11462.05 and 11463; Health and Safety Code section 1530.8

The CCR is focused on recommending changes to the state's current rate setting system, and services and programs serving children and families in the continuum of AFDC-FC eligible placement settings. The CCR implemented new criteria and approval requirements for placement of dependent children ages 12 and under in a group home.

2014

ARC Funding Optional Program – W&IC sections 11461.3 and 11253.4

The program became effective January 1, 2015, and increases payments to children placed in FC with relative caregivers when the children are not eligible for federal FC benefits. Those federal benefits are higher than the CalWORKs grants these caregivers typically receive.

This county-optional program provides state funding for participating counties to make per-child, per-month payments to ARCs in an amount equal to the basic federal FC rate. A county may "opt-out" of the program at any time, but must meet notification and other requirements.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Foster Care (FC)^{*}

History of Major Program Changes

2015

CCR – AB 403 (*Chapter 773, Statutes of 2015*)

Various provisions of statute were added or amended to implement recommendations put forward in CDSS's 2015 report: California's Child Welfare Continuum of Care Reform. The report outlined a comprehensive reform effort to make sure that youth in FC have their day-to-day physical, mental, and emotional needs met; that they have the greatest chance to grow up in permanent and supportive homes; and that they have the opportunity to grow into self-sufficient, successful adults. For FC, AB 403 advances California's long-standing goal to move away from the use of long-term group home care by increasing youth placement in family settings and by transforming existing group home care into places where youth who are not ready to live with families can receive short term, intensive treatment.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

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In-Home Supportive Services (IHSS)*

History of Major Program Changes

1973

IHSS Program – W&IC sections 12300 through 12314, 14132.95 and 14132.956

The IHSS Program was created to enable elderly, blind and disabled individuals to live independently in the community.

1978-1981

Equity Assessment Project

This was a three-year project conducted by UC Berkeley, in three counties (Alameda, Contra Costa and Marin). Historical needs assessment data was used to predict recipients' level of need for IHSS services. The project also permitted similar awards to individuals with similar needs, thus promoting equity (beginning of IHSS Assessment Uniformity).

1981

Domestic Services Standard – W&IC section 12310

The first state time-per-task standard, known as the Domestic Services Standard, was introduced.

1992

Non-Profit Consortia and Public Authority – W&IC section 12301.6

Statute was added to allow a County Board of Supervisors to contract with a non-profit consortium, or to establish by ordinance a public authority for the delivery of IHSS.

Federal Funding Approved for the IHSS PCSP

On November 2, 1992, a State Plan Amendment was approved by the CMS allowing most IHSS services to be considered a Medi-Cal benefit under the new IHSS PCSP.

1993

PCSP – W&IC section 14132.95

The PCSP was implemented April 1, 1993.

1998

Expansion of PCSP Eligibility – W&IC section 18937

Statute was amended, expanding PCSP eligibility to include medically needy aged, blind and disabled persons (previously, only categorically-eligible persons were eligible).

Waivers for Personal Care Services – W&IC section 14132.97

The Waivers for Personal Care Services, as defined under the Medi-Cal program, were required to be provided to persons meeting specified requirements.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

In-Home Supportive Services (IHSS)*

History of Major Program Changes

1999

State Plan Amendment

On April 1, 1999, a State Plan Amendment was approved by CMS expanding PCSP eligibility to include income-ineligible recipients (i.e., recipients with a share of cost).

Employer of Record – *W&IC sections 12301.6, 12303.4, 12301.3, 12301.4, 12301.8 and 12302.25*

Counties were required to act as or to establish an employer of record for IHSS providers for purposes of collective bargaining. Counties that had not established a public authority for the provision of IHSS services were required to establish an advisory committee to provide recommendations on modes and delivery of IHSS services. The IHSS Registry sales tax subaccount was also eliminated from the LRF and remaining funds were transferred to the GF.

2000

IHSS Non-federal Sharing Ratios and State Participation in Wages and Benefits

W&IC sections 12306.2 and 12306.3

This bill established the nonfederal share to be paid by the state and counties for any increases in provider wages and benefits and associated taxes. Limits were also defined for state participation in increases to wages and benefits.

Non-Public Authority Counties

Effective January 1, 2001, participation in the nonfederal portion of any county-implemented increase in IHSS provider wages, benefits and associated taxes was set at 65 percent state and 35 percent county. Wage increases were at county discretion and limited to no more than three percent above the statewide minimum wage.

Public Authority Counties – *W&IC sections 12301*

Participation in the nonfederal portion of any increases in wages, benefits and associated taxes that are negotiated by a public authority or a non-profit consortium was set at 65 percent state and 35 percent county participation. Increases in wages and benefits were subject to the following limits:

- The state would participate in wages up to \$7.50 per hour and in individual health benefits up to \$0.60 per hour for all public authority and non-profit consortium providers.
- The state would participate in total wages and health benefits up to \$9.10 per hour if wages reached at least \$7.50 per hour. Gradual increases to wage and benefits were allowed for these specified providers over the four years following FY 2000-01, up to total combined wages and health benefits of \$12.10 per hour in the fourth year.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

In-Home Supportive Services (IHSS)*

History of Major Program Changes

2000

Public Authority Counties (CONTINUED)

- State participation in subsequent year increases would only occur if wages had already reached \$7.50 per hour and GF revenue had exceeded the previous FY's GF revenue by at least five percent.
- State participation in wage and benefit increases in any FY would be limited to a maximum increase of \$1.00 per hour.

Contract Counties

Funding was provided in FY 2000-01 for the increased state share of cost for existing contract counties that elected to increase their maximum allowable contract rates. Wages and benefits for contract providers are negotiated between the contractor and their local unions.

IHSS Advisory Committee – *W&IC sections 12301.3 and 12301.4*

Each county that had not established a public authority was required to establish an advisory committee. The advisory committee in each county was also required to provide recommendations on certain modes of service to be utilized in the county for IHSS. The advisory committee membership would have to include one IHSS provider for a county that has an IHSS caseload of less than 500 and two IHSS providers for a county that has an IHSS caseload of more than 500. Reimbursement of the advisory committee's administrative costs was also allowed.

2004

Improve Quality of IHSS – *W&IC sections 12301.21, 12305.7, 12305.71, 12305.72, 12305.8, 12305.81, 12305.82, 12305.83, 12317, 12317.1 and 12317.2*

CDSS, counties and DHCS were required to perform a number of activities that would focus on improving the quality of IHSS. The key provisions included:

- Ongoing statewide social worker training.
- State oversight and monitoring of county QA activities.
- Hourly task guidelines, with exception criteria to promote accurate and consistent assessments, to provide social workers a tool for conducting assessments and service authorizations.
- Fraud prevention and detection activities that include collaboration among agencies to prevent/detect fraud and to maximize recovery of overpayments.
- Annual error-rate studies and data-match activities.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

In-Home Supportive Services (IHSS)*

History of Major Program Changes

2004 (CONTINUED)

IPW – W&IC section 14132.951

The IPW State Plan Amendment was approved, allowing most residual recipients to be served in this waiver program (i.e., services provided by a spouse and/or parent of a minor child, or to those receiving Restaurant Meal Allowance or Advance Pay). The IPW was approved for five years, from August 1, 2004, through July 31, 2009, and extended until September 30, 2009.

2009

Key Provisions of Fraud – W&IC sections 12301.15, 12301.22, 12301.25, 12301.6, 12305.7, 12305.71, 12305.73, 12305.82, 12305.85 and 12305.86

CDSS, counties and DHCS were required to improve detection, referral, investigation and prosecution of fraud in the IHSS program, communication and to develop collaboration between state and county agencies. The key provisions included:

- Provider Orientation.
- Provider enrollment including fingerprinting and background checks, enrollment form and signed agreement.
- Provider appeals.
- Fraud prevention protocols clarifying state/county roles and responsibilities including targeted mailings, unannounced home visits and county anti-fraud training.
- Policy guiding the use of Post Office boxes.
- Creation of the NOA to inform providers of recipient's authorized hours/services.

County Fraud Plan Funding

In FY 2009-10, CDSS approved county fraud plan funding for 45 counties to enable the development of the infrastructure necessary to support future fraud prevention operations.

The IHSS Plus Option – W&IC sections 14132.952

The IHSS Plus Option State Plan Amendment was approved on September 29, 2009, and the IHSS Plus Option became effective on October 1, 2009. The Social Security Act section 1915(i), Self-Directed Personal Assistance Services State Plan Option, was identified as the best replacement for the expiring IPW program.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

In-Home Supportive Services (IHSS)*

History of Major Program Changes

2009 (CONTINUED)

Statutory Reductions and Court Injunctions

A minimum Functional Index Score threshold was created for IHSS Program services and this became the *Oster I* Lawsuit. The state financial participation rate for IHSS provider wages was capped at \$10.10 effective July 1, 2010. This became the *Dominguez v. Schwarzenegger* lawsuit. The “Share of Cost Buyout” program was eliminated.

2011

Statutory Reductions and Court Injunctions

A 3.6 percent reduction in hours was implemented in February 2011 and a 20 percent reduction in hours was triggered by the Budget Act in December 2011. This became the *Oster II* Lawsuit and part of 2013 litigation settlement.

Health Care Certificate Requirement

The IHSS recipients were required to provide a Health Care Certificate from a licensed health care professional beginning August 2011.

Changes to Provider Enrollment Background Checks

Tier 1 – Specified Child Abuse, Elder Abuse and Fraud against government health care or supportive services.

Tier 2 – Other items identified in a background check could be waived by the IHSS recipient.

2011, 2013

CFCO – W&IC section 14132.956

The ACA of 2010 (enacted March 23, 2010) established a new State Plan Option entitled CFCO. The CFCO provides home and community based attendant services and supports and also provides increased federal funding in the form of a six percent increase in the FMAP for CFCO eligible recipients. CDSS and DHCS submitted a State Plan Amendment to CMS on December 1, 2011. The State Plan Amendment was approved August 31, 2012, with implementation retroactive to December 1, 2011.

On August 31, 2012, the federal CMS approved State Plan Amendment 11-034 for CFCO, allowing the state to obtain increased federal funding for eligible PCSP and IHSS Plus Option program recipients. The CMS approved State Plan Amendment 13-007 effective July 1, 2013, and updated eligibility language for compliance with the federal Social Security Act, section 1915(k)(1) and 42 CFR section 441.510.

* Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

In-Home Supportive Services (IHSS)*

History of Major Program Changes

2012-2013

CMIPS II Launched – W&IC section 12302.2

The CMIPS II launched in pilot counties Merced and Yolo in July 2012. In September 2012, San Diego joined the pilot. Extensive work and training has been conducted with counties/public authorities, labor organizations health benefit administrators and IHSS recipient/providers. In March 2013 group one launched eight additional counties followed by 20 additional counties in group two in May 2013. Group three (Los Angeles County) launched in August 2013 followed by the remaining 24 counties in group four in November 2013.

2013

Oster I, Oster II and Dominguez Lawsuits Settlement Process

The IHSS Settlement Agreement, filed March 28, 2013, received preliminary approval on April 4, 2013. Court and legislative action was required by May 24, 2013. This lawsuit resulted in an eight percent reduction to IHSS Recipients hours effective July 1, 2013, through June 30, 2014. The reduction decreased to seven percent effective July 2014 and will be ongoing, unless action is taken to offset the reduction.

CCI – *Government Code 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, a Medi-Cal managed care plan, changed state statute related to the IHSS program. The CCI began phasing in the eight pilot counties April 2014. The implementation process, including stakeholder meetings, is ongoing. As the IHSS program moves eligible recipients into CCI, it will remain very similar to the current program. The CCI legislation requires the Cal Medi-Connect plan to administer IHSS in accordance with current IHSS program standards and requirements. The plan will ensure access to, provision of and payment for recipients who meet the eligibility criteria for IHSS.

Key Provisions of CCI include the following:

- The IHSS recipients will retain the responsibilities as the employer of the IHSS provider for the purposes of hiring, firing and supervising their provider, appealing any action relating to his or her application for or receipt of services and the ability to request a reassessment.
- IHSS providers will continue to adhere to the IHSS provider enrollment requirements set forth in existing statute.
- Care coordination teams will be established, as needed, and subject to the consumer's consent for individual care plan development. The teams will include county IHSS social workers, consumers and their representatives, managed care health plans and may include IHSS providers and others as applicable.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

In-Home Supportive Services (IHSS)*

History of Major Program Changes

2013

CCI (CONTINUED)

- CDSS will retain program administrative functions, in coordination with DHCS, including policy development, provider appeals and general exceptions, quality assurance and program integrity for the IHSS.
- The CCI shifts the responsibility of collective bargaining functions (wages, benefits and other terms and conditions of employment) from county Public Authority to a Statewide Authority. This shift will occur for each county when enrollment of dual eligibles into Cal Medi-Connect is complete. This establishes a new Advisory Committee for the Statewide Authority.
- Each county will be responsible for paying a MOE instead of paying a percentage of program costs. Each county's MOE is based on program expenditures in FY 2011-12, which was adjusted to reflect savings based on the additional six percent FMAP for CFCO eligible cases, county negotiated wage increases and an annual 3.5 percent inflation factor starting July 1, 2014. This MOE requirement applies to all 58 counties effective July 1, 2012, regardless of when the county will begin participating in the CCI.
- CDSS, in consultation with DHCS, shall certify any agency that is contracting with Cal Medi-Connect for the provision of IHSS. CDSS shall also develop a written appeal process for any agency dissatisfied with the decision from CDSS regarding certification.
- As required by CCI, CDSS has, in consultation with stakeholders, developed voluntary provider training available January 2014. Three stakeholder workgroup meetings were held between May 29, 2013, and December 3, 2013. The workgroup meetings included at least one participant from each of the following groups: public authorities, providers, recipients, county representatives, recognized employee representatives and DHCS.
- On March 27, 2013, the Dual Demonstration MOU was approved to integrate dual eligible beneficiaries as a component of CCI.
- In an effort to ensure that data-sharing needs are identified and addressed prior to the implementation of the CCI in 2014 CDSS is holding data sharing stakeholder workgroups, the first of which took place November 30, 2012.
- A stakeholder workgroup has been established to develop the universal assessment process, including a universal assessment tool for home and community-based services. The first stakeholder workgroup meeting was held September 20, 2013.
- The W&IC sections 12300.7, 12306, 12306.1 and 12306.15 were amended and delinked CCI components to allow the mandatory enrollment of Medi-Cal and Medicare beneficiaries (dual eligible) into Medi-Cal managed care, the integration of long-term supports and services into managed care plans and the commencement of the IHSS Statewide Public Authority to proceed separately from Cal Medi-Connect.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

In-Home Supportive Services (IHSS)*

History of Major Program Changes

2013 (CONTINUED)

FLSA Final Rules Concerning Domestic Workers – *W&IC section 12300.41, 12301.1 and 12301.24*

On October 1, 2013, the United States Department of Labor issued its Final Rule concerning domestic workers under the FLSA. The regulations were scheduled to implement January 2015 containing several significant changes impacting the IHSS program, including more clearly defining the tasks that comprise “companionship services” and 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, CDSS is required to pay IHSS providers overtime wages and compensate providers for wait time during medical accompaniment and commute time between multiple recipients. CDSS is evaluating implementation options for compliance with FLSA regulations. Policy changes to IHSS provider workweek limitations and provider orientation were made.

Statutes were amended and added to provide a limitation of the hours an IHSS provider can work in a week contingent upon implementation of the FLSA ruling. Providers cannot work more than 66 hours each week, less the seven percent reduction while it is in effect (61 Hours). The 66/61 hour limit is based on the statutory maximum hours (283) an IHSS recipient can receive, divided by 4.33 weeks per month. It allows payment to IHSS providers for travel time, limited to seven hours per week, when traveling directly between different recipients on the same day. CDSS or a county may terminate a provider from the IHSS program if he/she continues to violate the overtime/travel time limitations. The legislation also established a three month grace period for IHSS provider overtime changes, in which providers will be compensated for overtime. Statute was amended to require onsite orientation, completion of the IHSS provider application prior to attendance, oral presentations and written material translated into the IHSS threshold languages in the county. Statute also permits presentations by representatives of recognized employee organizations in the county.

2014-2015

FLSA Final Rules Concerning Domestic Workers – *W&IC section 12300.41, 12301.1*

On December 22, 2014 and January 14, 2015, the United States District Court for the District of Columbia vacated the Final Rule. As a result of the District Court’s decision, on January 15, 2015, CDSS Director Will Lightbourne announced a halt to the implementation of the changes related to overtime and travel time compensation for all IHSS providers which had been initially scheduled to go into effect on January 1, 2015.

2015-2016

FLSA Final Rules Concerning Domestic Workers – *W&IC section 12300.41, 12301.1*

On August 21, 2015, the Appellate Court for the District of Columbia Circuit reversed the District Court’s decisions. This decision effectively reinstated the final rule described above adopted by the United States Department of Labor. As a result of this reversal, CDSS is reinstating implementation of the overtime and travel time policies for IHSS providers in the State of California.

* Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

In-Home Supportive Services (IHSS)*

History of Major Program Changes

2015-2016

FLSA Final Rules Concerning Domestic Workers (CONTINUED)

Although the National Association for Home Care & Hospital and the other co-plaintiffs in the lawsuit filed an Emergency Application to Stay the Court of Appeals ruling with the U.S. Supreme Court on September 28, 2015, the stay was not issued and the new rules regarding overtime, travel time, and wait time compensation for home health care workers went into effect on October 13, 2015, although the United States Department of Labor delayed implementation for 30 days after that date to allow states the time necessary to implement the new rules.

On November 6, 2015, the State announced that the payment of overtime, travel time, and wait time compensation to home health care workers (including IHSS providers) would be implemented as of February 1, 2016. On November 19, 2015, the National Association for Home Care & Hospital filed a Writ of Certiorari with the U.S. Supreme Court to request the Court to review the appeal. The Supreme Court review of the appeal is entirely discretionary, and no announcement has yet been made on the Court's decision to review the case.

On February 1, 2016, CDSS implemented the provisions of SB 855 and SB 873 based on the Federal FLSA which required that IHSS providers be compensated for overtime, in addition to travel and wait time. In addition, the statute established limits on the number of authorized hours providers are permitted to work in a workweek. Under the new rules, the maximum amount of time that an individual is allowed to work providing services for two or more IHSS recipients in a single workweek is 66 hours.

Beginning May 1, 2016 after a three month hold harmless period for overtime violations, providers who submit timesheets reporting work that exceed the workweek limits will accrue violations that could result in an IHSS provider's program eligibility being suspended or terminated up to one year.

CDSS will establish two exemptions from workweek limits beginning May 1, 2016 in an effort to maintain continuity of care and to ensure that IHSS recipients are able to remain safely in their homes. The specific requirements for these exemptions were provided in ACL No.16-07 and forthcoming ACL.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

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Kinship Guardianship Assistance Payment (Kin-GAP)*

History of Major Program Changes

1998

Implementation – W&IC sections 11360 through 11370

The state Kin-GAP program was established with an implementation date of June 1, 1999.

1999

Rate Implementation – W&IC sections 11364, 11370 and 11373

The Kin-GAP program implementation was delayed until January 1, 2000. The Kin-GAP rate was established to be equivalent to the basic FC rate. CDSS was required to report program outcomes to the Legislature two and five years after program implementation.

2000

Exemptions – W&IC sections 11374 and 11375

The Kin-GAP program was exempted from CalWORKs provisions, with certain exceptions. Recipients were authorized to request and receive independent living services and retain certain cash savings.

2001

Exemptions of Fingerprints – W&IC section 11372

The Kin-GAP program exempted adult caregivers for recipients of program benefits from the requirement to be fingerprinted in order to establish legal guardianship.

2006

Expanded for Probation Youth – W&IC sections 11363 and 11364

The Kin-GAP program was expanded to include probation youth. Recipients were allowed to continue to receive a SCI, if paid, while in FC and were provided a \$100 annual state supplemental clothing allowance.

2010

Established a Federally-Funded Program – W&IC sections 11385 and 11393

The Kin-GAP program was modified, effective January 1, 2011, following enactment of the federal Fostering Connections to Success and Increasing Adoptions Act (PL 110-351) that permitted FFP for states that opt in by meeting federal requirements. A federally-funded Kin-GAP program was established and amendments were made to the state-funded Kin-GAP program. Time in care with the prospective relative guardian was reduced from 12 months to six months. Interstate portability of benefits for recipients who move out of state/country was added. Renegotiation of benefit amount based on changes in youth's/non-minor former dependent's needs or changed circumstances of relative legal guardian was permitted. This bill also extended the benefit payments until age 21 for minor/non-minor former dependents meeting specific criteria.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Kinship Guardianship Assistance Payment (Kin-GAP)^{*}

History of Major Program Changes

2011

Nonrecurring Costs – W&IC section 11364

The Kin-GAP program was modified to conform with federal law providing reimbursement to relative legal guardians for reasonable and verified nonrecurring expenses incurred for legal guardianships established after January 1, 2012. The “High School Completion Rule” was also restored for the Kin-GAP population.

2012

Expanded Definition of Relative – W&IC section 11391

The Kin-GAP program was modified to expand the definition of "relative" for purposes of the federally-funded Kin-GAP program to include a non-relative extended family member, tribal kin or a current caregiver of a foster child as specified.

2013

Successor Guardianship – W&IC section 388.1

The Kin-GAP program was modified to allow re-entry into non-minor dependency for non-minor former dependents whose legal guardian died before the non-minor former dependent's 21st birthday.

^{*} Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

Office of Child Abuse Prevention (OCAP)*

History of Major Program Changes

1978**OCAP** – *W&IC sections 18950 and 18952*

The OCAP was established to address growing concern about child abuse in the state of California. These statutes task OCAP with planning, improving, developing and carrying out programs and activities relating to the prevention, identification and treatment of child abuse and neglect.

1974**CAPTA** – *PL 111-320*

The CAPTA provides for, and guides, child protection at the federal and state level. It provides federal funding to states in support of prevention, assessment, investigation, prosecution and treatment activities and also provides grants to public agencies and nonprofit organizations, including Indian Tribes and Tribal organizations, for demonstration programs and projects. The CAPTA also set forth a minimum definition of child abuse and neglect as follows: any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act which presents an imminent risk of serious harm.

1979**Application for Federal Funds** – *W&IC section 18958*

California statute directs OCAP to apply for federal funding for the administration of its functions and duties, specifically: technical assistance to public and private agencies and organizations; training for relevant personnel; program coordination; innovation; and relevant research and data to determine program efficacy.

1982**CAPIT** – *W&IC sections 18960 through 18964*

The CAPIT funds agencies to address the needs of children at high risk of abuse or neglect and their families. Funds are also used to fulfill federal CBCAP grant matching and leveraging requirements. As such, these funds cannot be used as a match for other federal funds. Funds shall be used for CAPIT services as described in statute and regulation.

1983**County Children's Trust Funds** – *W&IC sections 18966 through 18968.5*

Statute allows for a county board of supervisors to establish a County Children's Trust Fund to be used for child abuse and neglect prevention and intervention programs. Each county shall also fund Child Abuse Prevention Coordinating Councils from its County Children's Trust Fund.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Office of Child Abuse Prevention (OCAP)*

History of Major Program Changes

1983 (CONTINUED)

State Children's Trust Fund – W&IC sections 18969 through 18971

A Children's Trust Fund, to be administered by CDSS, is established within the State Treasury. The State Children's Trust Fund shall be used for innovative and distinctive child abuse and neglect prevention and intervention projects.

1988

State Family Preservation – W&IC sections 16500.5 through 16500.8

State Family Preservation is a state funded program aimed at reducing the necessity of out-of-home placement of children who have experienced child abuse or neglect within the family and, when appropriate, at expediting the reunification of children with their families when the children are in out-of-home placements. CDSS utilizes State Family Preservation local expenditures to meet MOE requirements for the PSSF Program as well as the federal match for PSSF.

1993

PSSF – PL 109-288

The PSSF federal program under Title IV-B, subpart 2 of the Social Security Act provides funding for states to operate coordinated child and family services. Services include community-based family support, family preservation, time-limited FR, adoption promotion and support to prevent child maltreatment among at-risk families, assure safety and stability of maltreated children and support adoptive families.

1996

CBCAP – PL 111-320

The CBCAP is Title II of CAPTA and is used: to support community-based efforts to develop, operate, expand, enhance and coordinate initiatives, programs and activities to prevent child abuse and neglect; to support the coordination of resources and activities to better strengthen and support families to reduce the likelihood of child abuse and neglect; and to foster understanding, appreciation and knowledge of diverse populations in order to effectively prevent and treat child abuse and neglect.

1997

PSSF – PL 105-89

The program was reauthorized under the Adoption and Safe Families Act (PL 105-89) and was renamed the PSSF program with two additional service components put in place: time limited reunification and adoption support services.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Office of Child Abuse Prevention (OCAP)^{*}

History of Major Program Changes

2010

CAPTA Reauthorization Act – PL 111-320

Congress strongly encouraged state and local child protective services agencies to utilize the practice of differential response. Differential response is described as “a state or community-determined formal response that assesses the needs of the child or family without requiring a determination of risk or occurrence of maltreatment.” One goal of the act is to develop differential response systems so that more preventative services can be offered to strengthen families and protect children from harm.

2011

Child Welfare Realignment – W&IC sections 18960, 18961, 18962 and 18963.

The funding for the CWS program, which includes CAPIT and State Family Preservation, was realigned from the state to the county. With this implementation, counties are no longer required to contract for services, but are able to use their funds in-house for direct services as long as federal match requirements continue to be met. For more information refer to the 2011 Realignment tab.

^{*} Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

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Supplemental Security Income/State Supplementary Payment (SSI/SSP)*

History of Major Program Changes

1972-1974

SSI Program – PL 92-603

Under PL 92-603, the federally administered SSI program was established by Congress in 1972 and payments began in 1974. In the 50 states and the District of Columbia, it replaced the former federal-state programs of Old-Age Assistance, Aid to the Blind and Aid to the Permanently and Totally Disabled.

States were given the option of providing SSPs both to recipients transferred from the former federal-state program and to those newly eligible for SSI. When SSPs are federally administered, as in California, the SSA makes eligibility and payment determinations for the state. Basic SSI/SSP eligibility cannot be modified without a change in federal law, although states set their own living arrangements payment categories and SSP rates that are subject to certain federal limitations.

1972

COLAs – PL 92-336

Federal law was enacted to provide COLAs, which allow Social Security and SSI benefits to keep pace with inflation and established the procedures for issuing automatic COLAs each year, beginning in 1975. The SSI COLAs are based on increases to the CPI for Urban Wage Workers and Clerical Workers. The SSP COLAs are based on the CNI.

1976

SSP MOE Set at December 1976 Levels – PL 94-585

Federal law requires states to maintain SSPs at the level of December 1976 ("maintenance of payments") or to continue to pay in supplements the same total annual amounts ("maintenance of expenditures") when the federal SSI payment level is increased and thereby pass through any increases in federal benefits without reducing state supplements.

1983

SSP MOE Adjusted to December 1983 Levels – PL 98-21

Federal pass-through law was adjusted under PL 98-21 by substituting the SSP levels in effect in March 1983 for those in effect in December 1976 as the levels that states must maintain in complying with the pass-through requirements.

1991-1998, 2004, 2006-2009

Suspension of State COLA Increases to SSPs – W&IC section 12201

Statute authorizes the COLA for SSP recipients based on the CNI and specifies calendar years which receive no adjustment under this section.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Supplemental Security Income/State Supplementary Payment (SSI/SSP)*

History of Major Program Changes

1993, 1997

Administrative Fees for SSPs – PL 103-66 and PL 105-33

In 1993, federal law required states to pay fees for federal administration of their SSP under the Omnibus Reconciliation Act. In 1997, the schedule of pre-payment fees was revised for federal administration of SSP for FFY 1998 through 2002 and provided a formula for determining the fee beyond FFY 2002.

2010

Reductions of SSP Grant to the MOE Floor – Title XX of the CFR section 416.096

To assist in balancing the 2009-10 Governor's Budget, SSP grants were reduced. Federal funding for Medi-Cal would be lost if a state reduces SSP payments below MOE levels. The SSP grants were reduced to the minimum levels.

2011

Elimination of Statutory Requirement to Provide State COLAs to SSPs

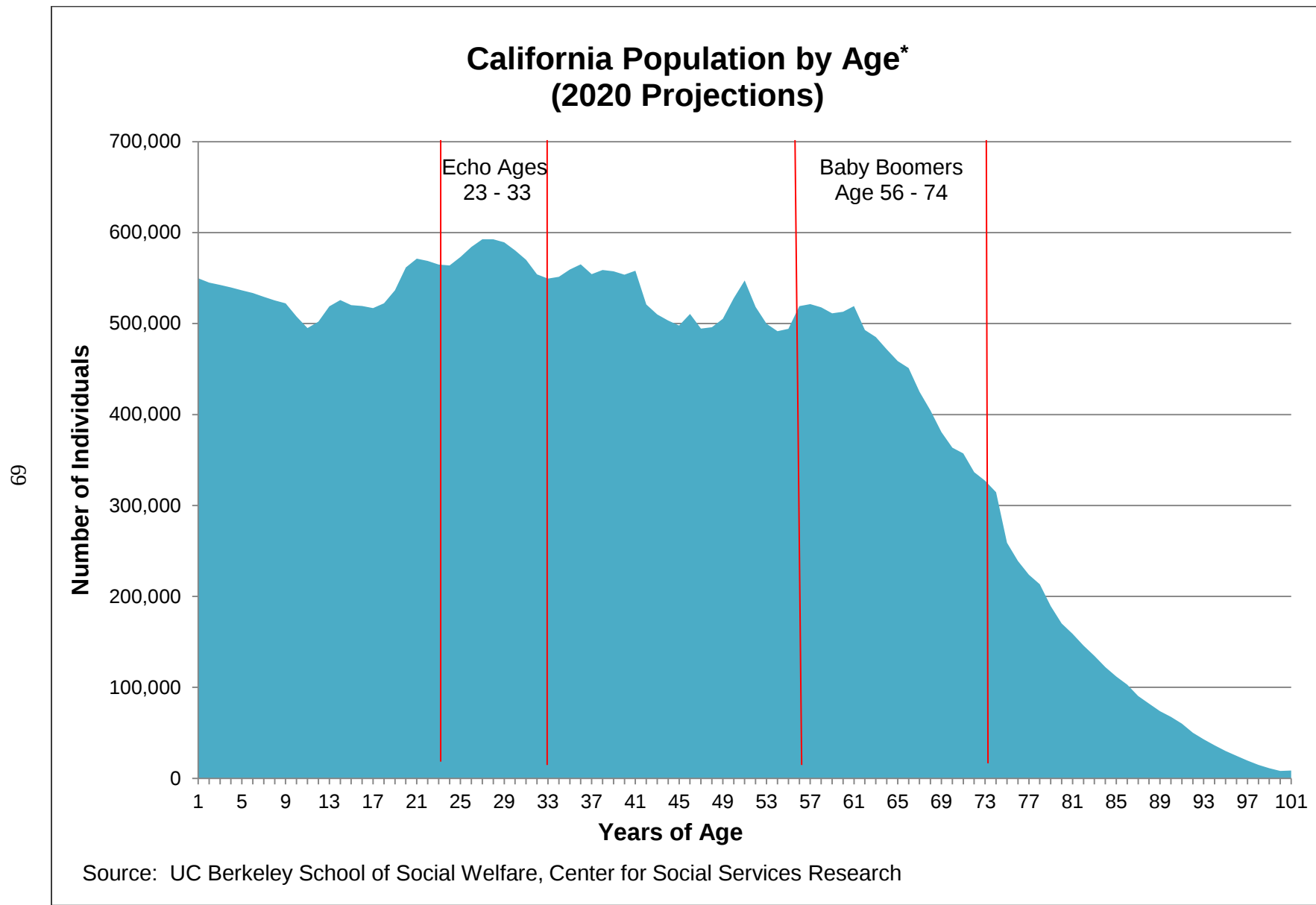
W&IC section 12201(g)(1)

Statute was amended to clarify that no adjustment to SSP benefits amounts shall be made unless otherwise specified by statute.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Caseload Characteristics/Demographics

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* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

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Characteristics of TANF/MOE Funded Cases in CalWORKs^{*}

Source: RADEP Sample FFY 2015

Some of the CalWORKs cases (Safety Net, Fleeing Felons and Long-Term Sanctioned) are now funded by Non-MOE GF and therefore are no longer included in the pool of cases included in the RADEP Sample. The Long-Term Sanctioned cases were shifted in March 2015, so they are partially reflected in the data below. There were about 84,650 cases funded with Non-MOE GF (annual monthly average) in FFY 2015.

Characteristic ¹	Single-Parent	Two-Parent	Sanctioned (No Aided Adult)	Other Child-Only	All TANF/MOE Cases
Number of Cases	206,405	52,462	29,408	159,952	448,227
Average Grant/Benefit	\$529	\$611	\$426	\$467	\$510
Average AU Size	2.8	3.8	1.9	2.1	2.6
Average # of Children in AU	1.8	2.2	1.9	2.1	2.0
Average Age of Head of Household	30.7	30.4	31.1	40.3	34.1
Age of Children					
Percent with Children Under 1 Year	16.4%	23.7%	5.6%	5.8%	12.8%
Percent with Children Under 6 Years	66.1%	77.2%	42.6%	39.7%	57.4%
Average Age of Oldest Child	7.3	7.1	8.3	11.1	8.7
Average Age of Youngest Child	4.6	2.0	5.4	7.6	5.6
Earnings					
Percent with Monthly Earnings	25.5%	40.1%	11.2%	9.9%	20.7%
Average Monthly Earnings of Cases w/ Earnings	\$980	\$1,183	\$603	\$1,002	\$1,017
Gender/ Race/ Ethnicity					
Female	90.9%	82.6%	89.2%	92.0%	90.2%
Hispanic	50.0%	43.3%	51.1%	75.9%	58.5%
Non-Hispanic Black	21.5%	12.2%	18.5%	9.7%	16.0%
Non-Hispanic Asian	3.4%	6.3%	4.6%	1.6%	3.2%
Non-Hispanic White	22.7%	35.0%	23.3%	12.0%	20.3%
Non-Hispanic Other	2.3%	3.2%	2.5%	0.9%	1.9%
Language Spoken					
English	88.7%	83.8%	94.5%	38.1%	70.4%
Spanish	9.0%	6.6%	4.8%	60.1%	26.7%
Other	2.4%	9.6%	0.8%	1.8%	2.9%
Education					
Percent of Head of Household Completing High School or Equiv.	55.6%	51.8%	40.4%	12.7%	38.8%
% Unknown	2.3%	1.2%	9.9%	53.7%	21.0%
Citizenship Status of Head of Household					
Citizen	89.8%	84.4%	92.2%	32.0%	68.7%
Legal Non-Citizen	7.8%	15.4%	7.8%	2.8%	6.9%
Other/Unknown	2.4%	0.3%	0.0%	65.2%	24.4%

¹ Percentages may not add to 100% due to missing/unknown values or rounding

** Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.*

Characteristics of CalWORKs Cases^{*}

Source: March 2016 MEDS Extract

“Time on Aid” is the total number of months a case has received assistance during the look-back period. It is a different calculation than the CalWORKs 48 Month Clock, as a case may receive assistance in a month that does not count toward their 48-Month Clock due to a qualifying exemption. Time on aid for Single-Parent and Two-Parent cases is calculated by the aided adult on aid longest (as an adult) since the beginning of the look-back period. Time on aid for CalWORKs non-MOE cases (Safety Net, Fleeing Felon and Long-Term Sanction) as well as the Child-Only cases is determined by the child member on aid longest since the beginning of the look-back period.

“Average Months on Aid” is most useful for mathematical calculations (i.e., for developing budget estimates).

“Median Months on Aid” is most useful for describing a typical case, as most of the caseload would be found near this center point.

	Single-Parent	Two-Parent	Child-Only	Non-MOE	All Cases
Months of Aid Since 1998					
<u>Average</u> Months on Aid	41.2	31.7	78.0	100.3	61.9
<u>Median</u> Months on Aid	35.0	25.0	71.0	97.0	52.0
Months of Aid in Last 8 Years					
<u>Average</u> Months on Aid	32.9	27.7	58.9	69.1	46.9
<u>Median</u> Months on Aid	28.0	23.0	64.0	74.0	43.0
Months of Aid in Last 6 Years					
<u>Average</u> Months on Aid	29.5	25.6	49.0	55.4	39.8
<u>Median</u> Months on Aid	26.0	22.0	57.0	62.0	40.0

^{*} Please refer to the first tab titled “[Acronyms](#)” for a full description of acronyms.

Characteristics of CalWORKs Stage One Child Care Cases^{*}

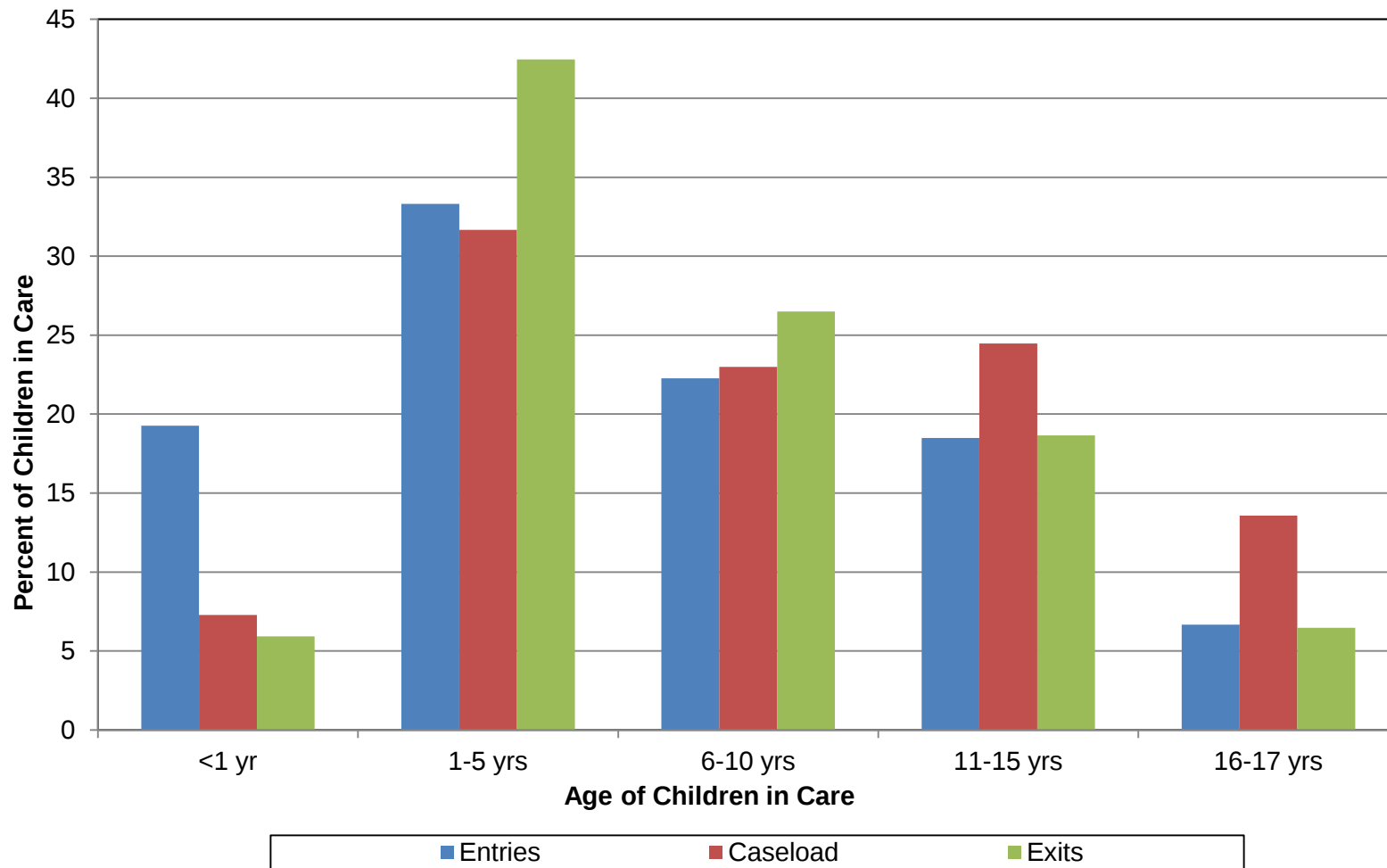
Characteristic	Proportion of Statewide Caseload
Age of Child	
0-24 Months	17%
2-5 Years	54%
6 Years and Older	29%
Child Care Setting	
License-Exempt	49%
Child Care Centers	27%
Family Child Care Homes	24%
Time in Care	
Full Time	61%
Part Time	39%

Data Source: Characteristics based on calendar year 2014 SAWS Consortia data, extrapolated statewide. The CalWIN portion of caseload only represents data from seven counties.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

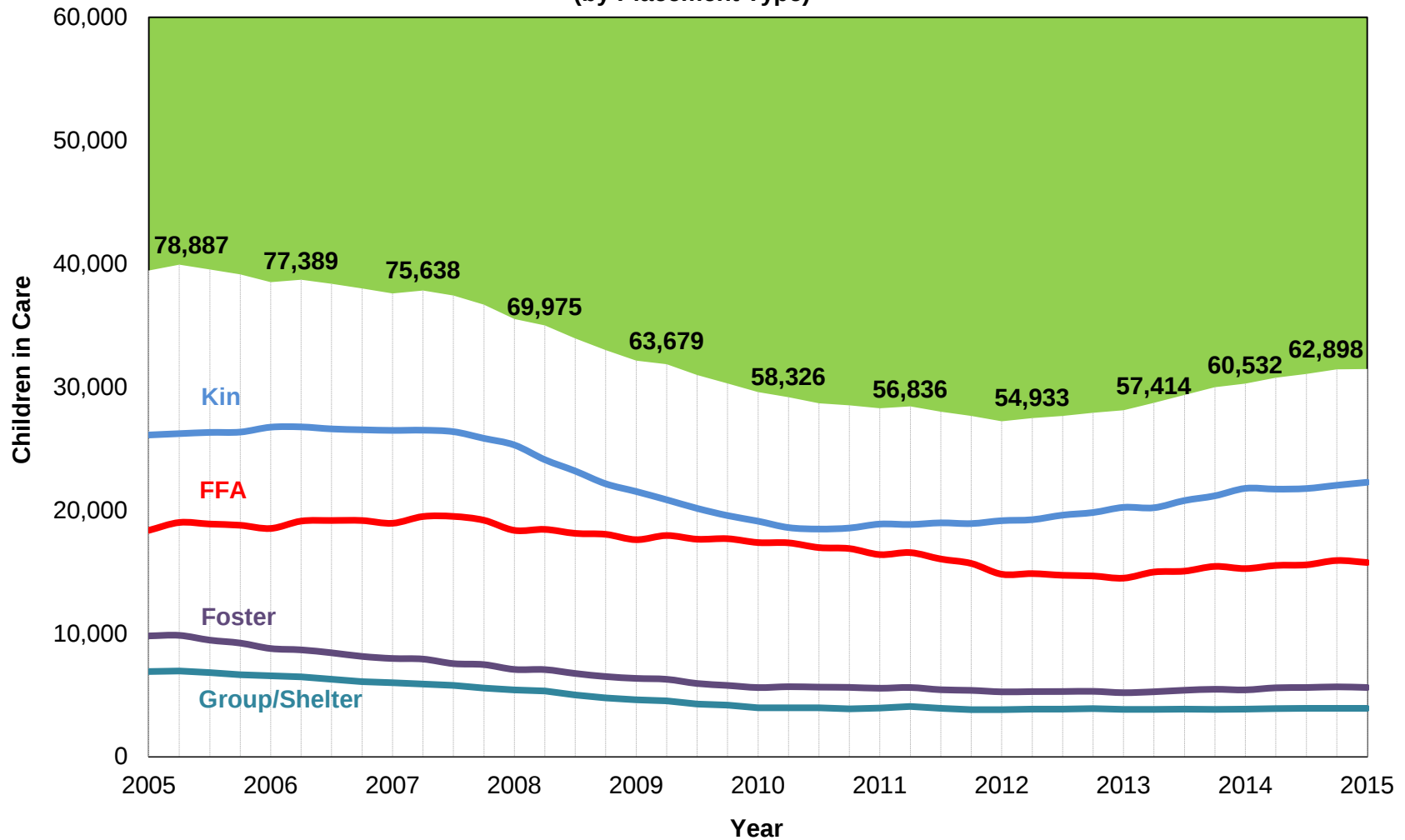
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California: Age of Children in Foster Care*
(2014 Entries, July 1, 2014 Caseload, 2014 Exits)



Source: UC Berkeley School of Social Welfare, Center for Social Services Research

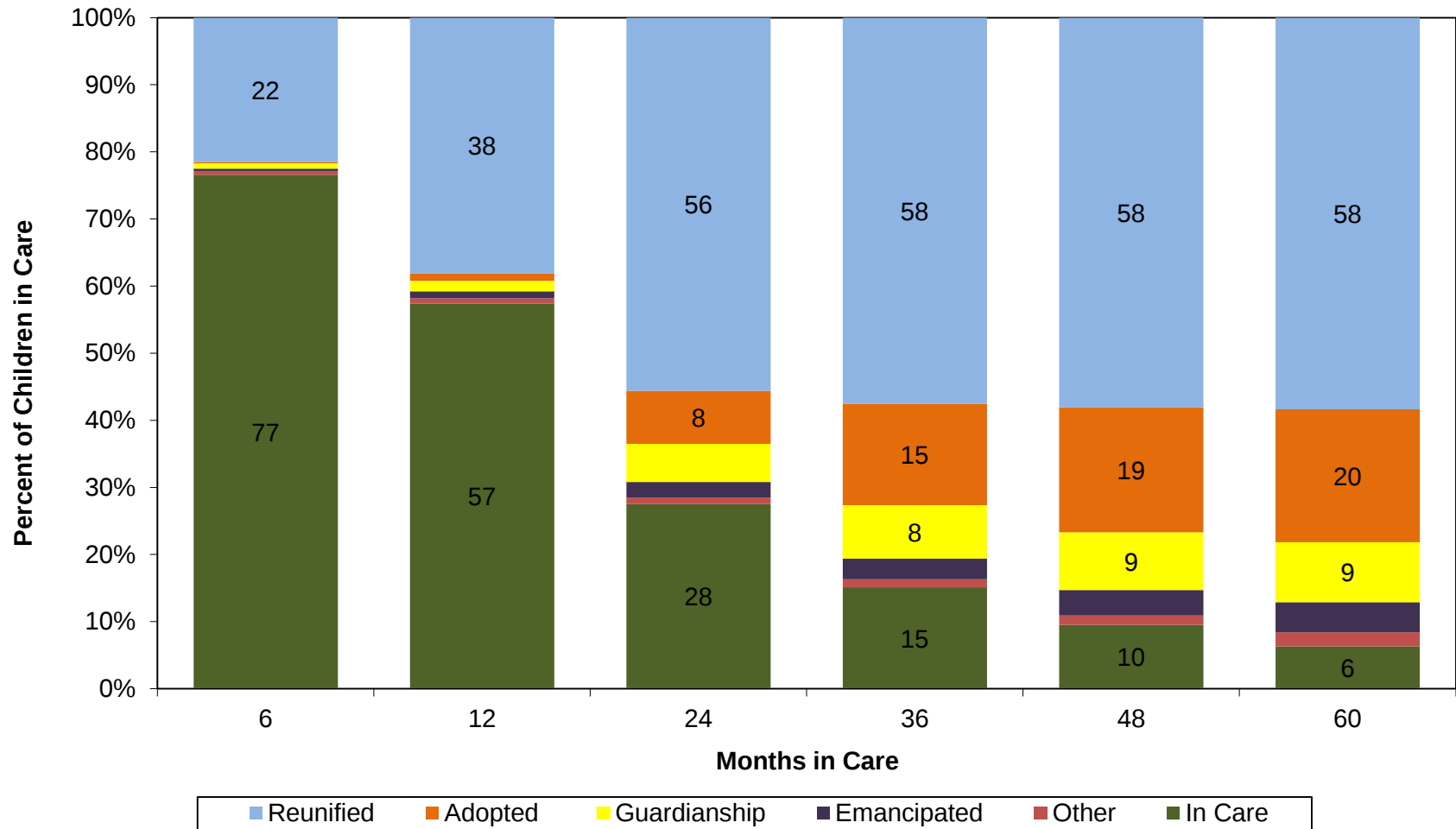
* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

California: Out-of-Home Caseload Over Time*
(by Placement Type)

Source: UC Berkeley School of Social Welfare, Center for Social Services Research

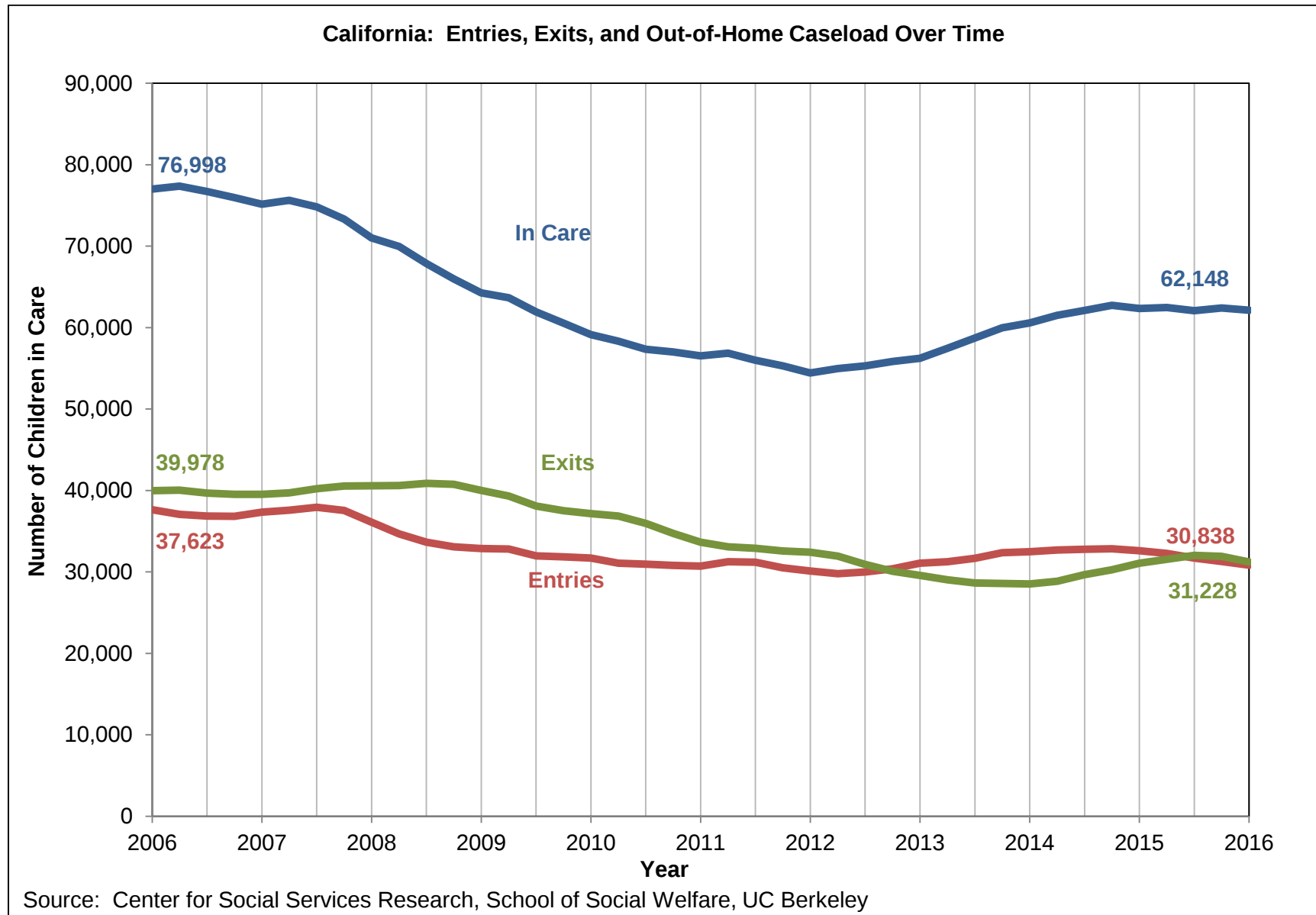
* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

**California: Percent Exited to Permanency 60 Months From Entry
(January 1, 2010 to December 31, 2010, n=26,872)**



Source: Center for Social Services Research, School of Social Welfare, UC Berkeley

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

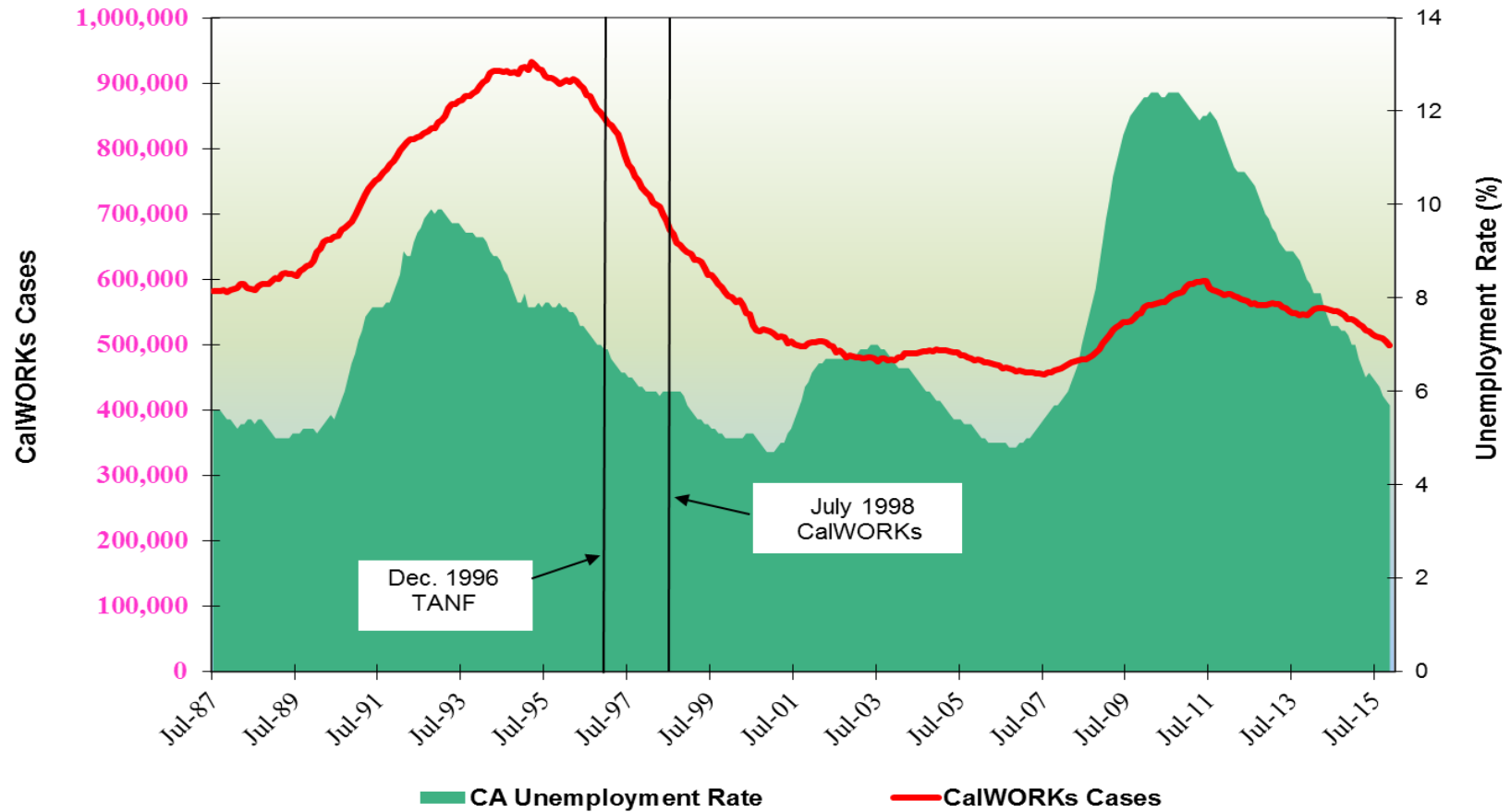


* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

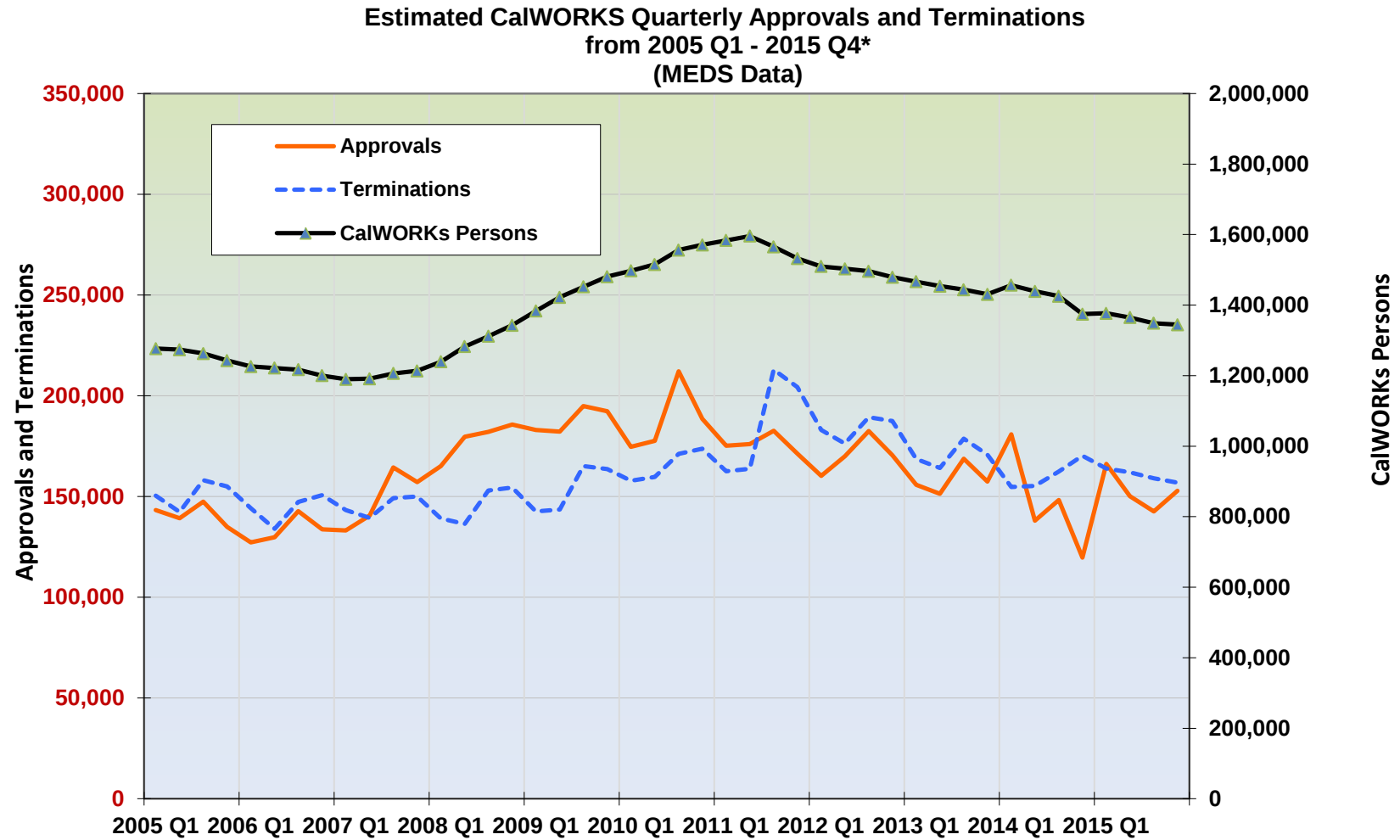
Program Data

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TANF/CalWORKs Program Caseload and Unemployment Rate

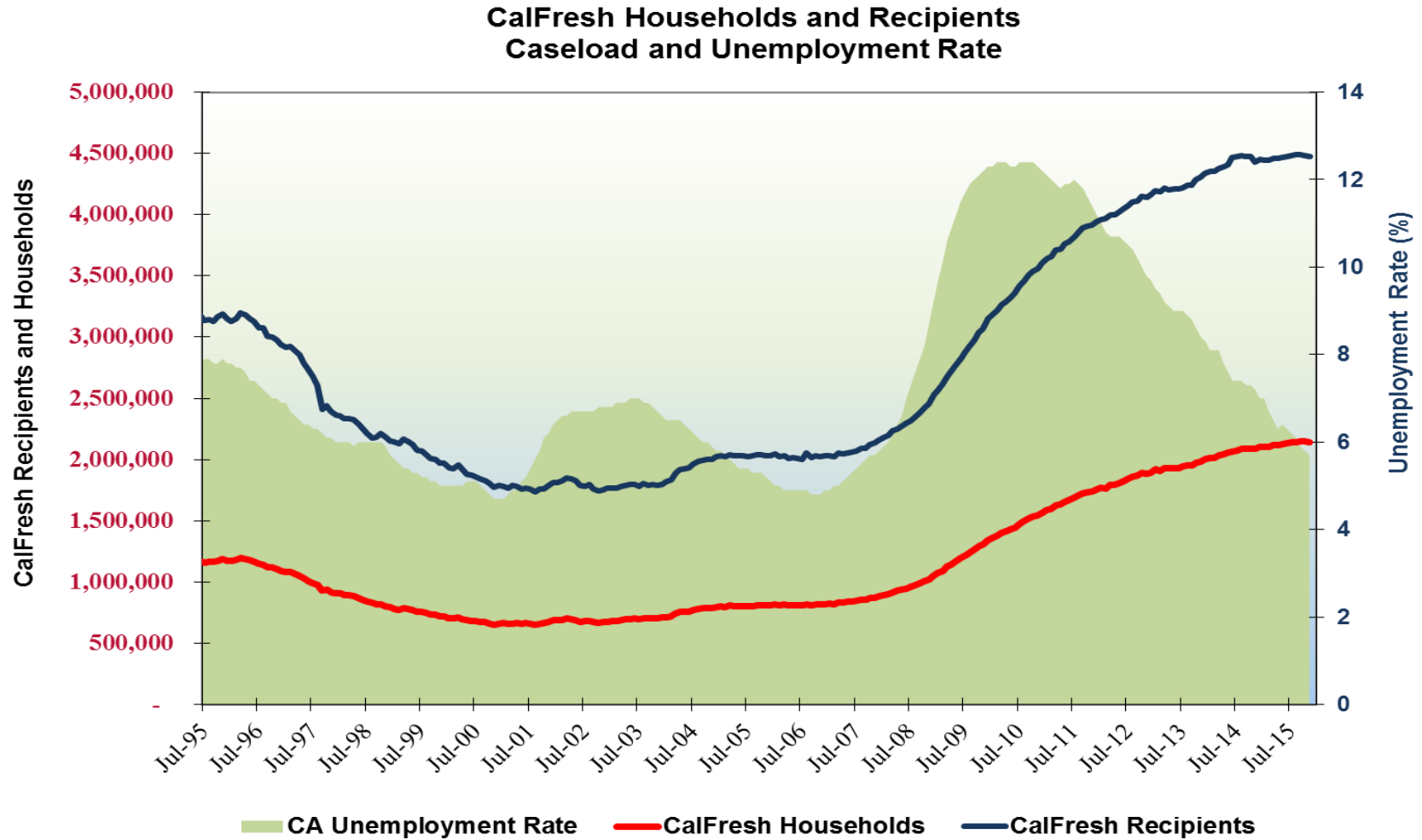


Note: Reflects caseload and unemployment rate data through November and December 2015, respectively.
Source: CA 237 CW Monthly Caseload Data Report and EDD data.



Note: Estimated numbers based on MEDS data through the fourth calendar quarter of 2015.

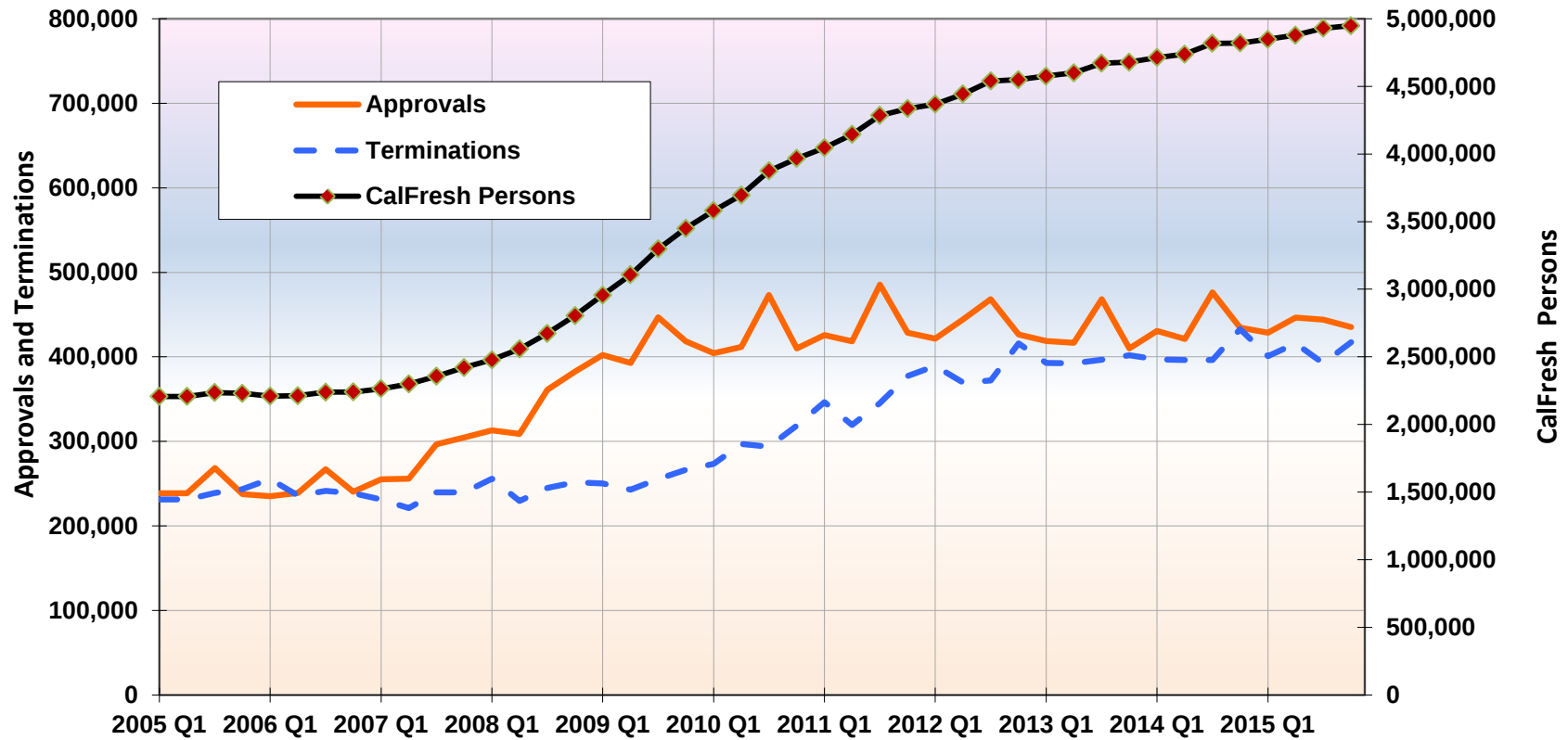
* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.



Note: Reflects caseload and unemployment rate data through November and December 2015, respectively.
Source: DFA 256 Monthly Caseload Data Report and EDD data.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

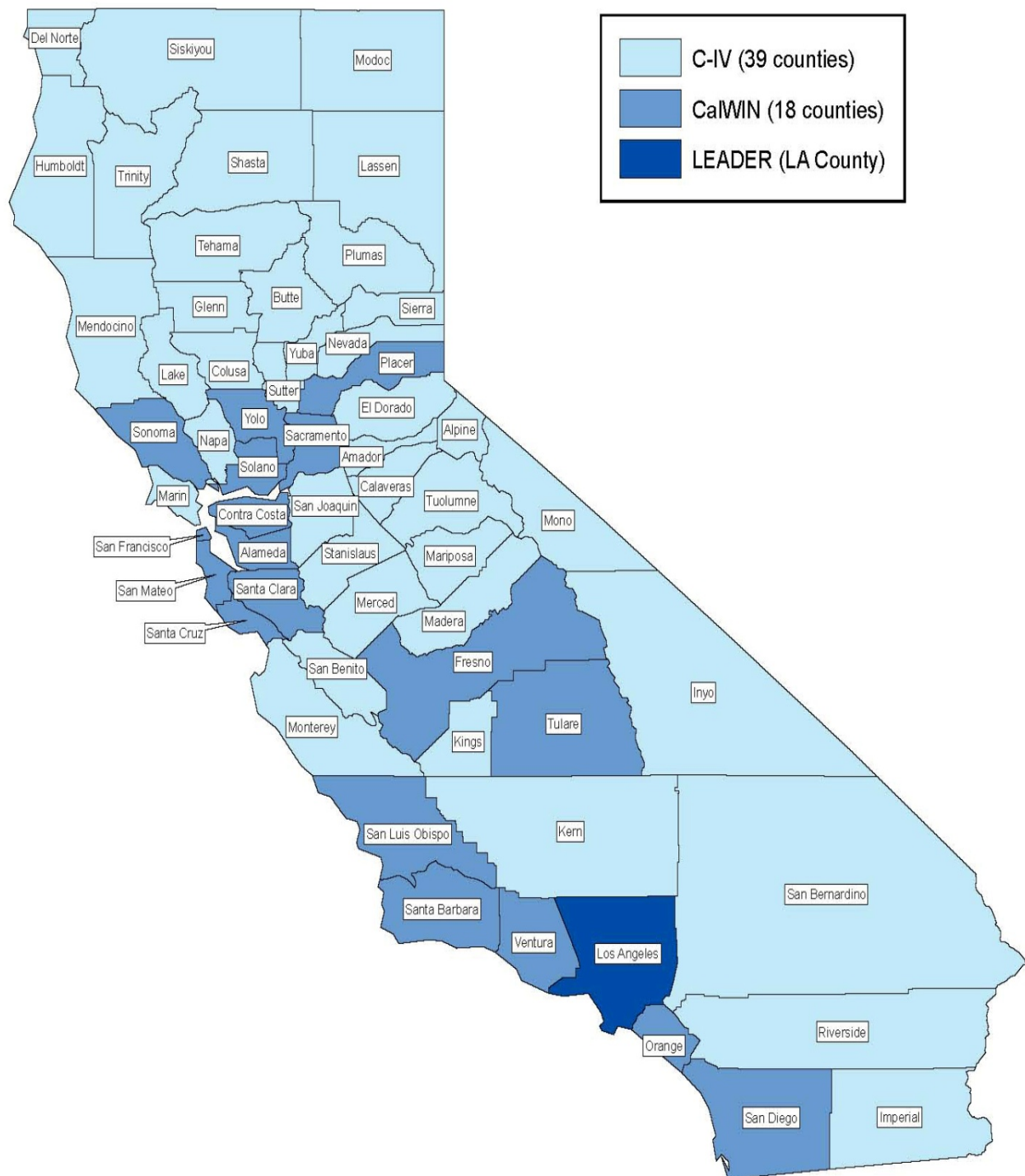
Estimated CalFresh Quarterly Approvals and Terminations
from 2005 Q1 - 2015 Q4*
(MEDS Data)



Note: Estimated numbers based on MEDS data through the fourth calendar quarter of 2015.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

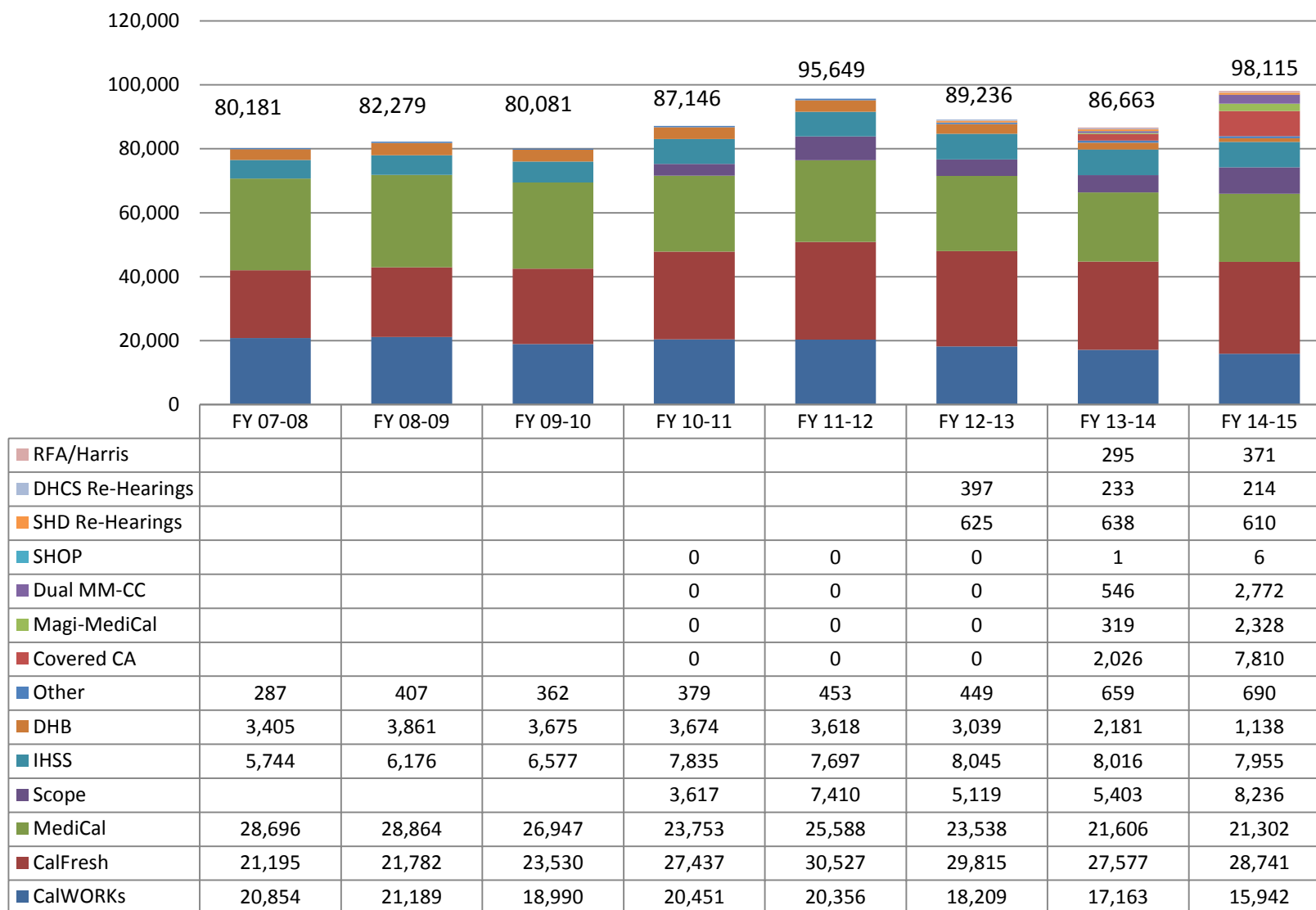
Statewide Automated Welfare Systems by County*



* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

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Hearing Requests Filed by Program*



* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

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California's TANF Work Participation Rate*

FFY 1997 - 2006 (Pre-Deficit Reduction Act)

All Families WPR										
FFY	1997	1998	1999	2000 ¹	2001 ¹	2002 ¹	2003 ¹	2004 ¹	2005 ¹	2006 ¹
Required Rate	25.0%	30.0%	35.0%	40.0%	45.0%	50.0%	50.0%	50.0%	50.0%	50.0%
Caseload Reduction Credit	5.5%	12.2%	26.5%	32.1%	39.0%	43.3%	44.2%	46.1%	45.5%	44.9%
State Adjusted Required WPR	19.5%	17.8%	8.5%	7.9%	6.0%	6.7%	5.8%	3.9%	4.5%	5.1%
California's WPR	29.7%	36.6%	42.2%	27.5%	25.9%	27.3%	24.0%	23.1%	25.9%	22.2%
Two-Parent WPR										
FFY	1997	1998	1999	2000 ¹	2001 ¹	2002 ¹	2003 ¹	2004 ¹	2005 ¹	2006 ¹
Required Rate	75.0%	75.0%	90.0%	NA	NA	NA	NA	NA	NA	NA
Caseload Reduction Credit	34.2%	42.3%	53.1%							
State Adjusted Required WPR	40.8%	32.7%	36.9%							
California's WPR	42.3%	36.2%	54.3%							

FFY 2007-2016 (Post-Deficit Reduction Act)

All Families WPR										
FFY	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Required Rate	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%
Caseload Reduction Credit	17.7%	21.0%	21.0% ²	21.0% ²	21.0% ²	0.0%	0.0%	0.0%	0.0%	
State Adjusted Required WPR	32.3%	29.0%	29.0%	29.0%	29.0%	50.0%	50.0%	50.0%	50.0%	
California's WPR	22.3%	25.1%	26.8%	26.2%	27.8%	27.2%	25.1%	29.8%	55.1%	
Two-Parent WPR										
FFY	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Required Rate	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%
Caseload Reduction Credit	90.0%	90.0%	90.0% ²	90.0% ²	90.0% ²	0.0%	0.0%	0.0%	0.0%	
State Adjusted Required WPR	0.0%	0.0%	0.0%	0.0%	0.0%	90.0%	90.0%	90.0%	90.0%	
California's WPR	31.7%	26.5%	28.6%	35.6%	33.9%	30.8%	30.9%	25.5%	60.7%	

¹ From FFY 2000 through FFY 2006, California moved two-parent cases to Separate State Program -MOE funding, which removed them from the WPR calculation requirements. Since these cases were no longer in the State's TANF program, no two-parent participation rates were published by ACF. Starting in 2007, California again received a rate for its two-parent caseload, as per requirements of the Deficit Reduction Act of 2005. The Deficit Reduction Act required that Separate State Program -MOE funded programs be subject to TANF WPR requirements.

² Due to the American Recovery and Reinvestment Act, states received the Caseload Reduction Credit from either 2007 or 2008, whichever is most beneficial to the state. For California, the caseload reduction credit for 2008 provides the most benefit to the state's WPR. Actual Calculated caseload reduction credits were: FFY 2009, 6% overall rate and 9.5% two-parent rate; FFY 2010, 0.1% both rates; FFY 2011, 0% both rates.

Data Source: Quarter 5 (from 1997 through 2006) and RADEP (from 2007 to present) California's WPR for FFY 2014 and FFY 2015 is preliminary.

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Multi-State Comparison of TANF Programs*

State TANF Benefit Level for a Family of Three (Ranked by MAP Level)

State Ranking	2015 MAP Level
1. Alaska ¹	\$923
2. New York	\$789
3. Hawaii	\$763
4. California	\$704
5. New Hampshire	\$675
6. Wisconsin	\$653
7. Wyoming ²	\$652
8. Vermont	\$640
9. Maryland	\$636
10. Massachusetts ³	\$633
11. South Dakota	\$599
12. Connecticut	\$597
13. Montana	\$586
14. Minnesota	\$532
15. Washington	\$521
16. Oregon	\$506
17. Utah	\$498
18. Michigan	\$492
19. North Dakota	\$486
20. Maine	\$485
21. Ohio	\$473
22. New Mexico	\$447
23. District of Columbia	\$441
24. Nebraska	\$436
25. Rhode Island	\$432
26. Illinois	\$432
27. Kansas	\$429
28. Iowa	\$426
29. New Jersey	\$424
30. Pennsylvania	\$403
31. Nevada	\$383
32. Colorado	\$372
33. West Virginia	\$340
34. Delaware	\$338
35. Virginia	\$323
36. Texas	\$313
37. Idaho	\$309
38. Florida	\$303
39. Missouri	\$292
40. Oklahoma	\$292
41. Indiana	\$288
42. South Carolina	\$282
43. Georgia	\$280
44. Arizona	\$278
45. North Carolina	\$272
46. Kentucky	\$262
47. Louisiana	\$240
48. Alabama	\$215
49. Arkansas	\$204
50. Tennessee	\$185
51. Mississippi	\$170

Source: Telephone/email survey conducted in October 2015 by CDSS' CalWORKs Eligibility Bureau.

¹ Single adult with two children. Two parent AU with one child the maximum payment is \$821 maximum.

² Adjusted annually each July 1 with cost of living index.

³ If adult(s) are exempt from work requirements. If not exempt, the maximum payment is \$618

Multi-State Comparison of TANF Programs*

States with the Highest Percentages of Welfare Recipients¹

State	Percent of Population on Welfare	2015 MAP for an Assistance Unit (AU) of Three
1. California	3.24%	\$704
2. District of Columbia	2.48%	\$441
3. New Mexico	1.73%	\$447
4. Hawaii	1.68%	\$763
5. Tennessee	1.61%	\$185
6. Oregon	1.36%	\$506
7. New York	1.32%	\$789
8. Massachusetts	1.14%	\$633
9. Maine	0.87%	\$485

¹The percentage of welfare recipients was calculated by dividing average TANF/MOE-Separate State Program caseload data for calendar year 2014 (from the ACF) by estimated population data as of July 2014 (from the U.S. Census Bureau).

Ten Largest States (Ranked by MAP Level, not Population)

State	2015 MAP for an AU of Three	National Ranking of MAP Level
1. New York	\$789	2
2. California	\$704	4
3. Michigan	\$492	18
4. Ohio	\$473	21
5. Illinois	\$432	26
6. Pennsylvania	\$403	30
7. Florida	\$303	38
8. Texas	\$313	36
9. Georgia	\$280	43
10. North Carolina	\$272	45

Source: Telephone/email survey conducted in October 2015 by CDSS' CalWORKs Eligibility Bureau.

States with the Highest MAP Level

State	2015 MAP for an AU of Three
1. Alaska	\$923
2. New York	\$789
3. Hawaii	\$763
4. California	\$704
5. New Hampshire	\$675
6. Wisconsin	\$653
7. Wyoming	\$652
8. Vermont	\$640
9. Maryland	\$636
10. Massachusetts	\$633

Source: Telephone/email survey conducted in October 2015 by CDSS' CalWORKs Eligibility Bureau.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

California Necessities Index (CNI)*

CDSS uses the CNI to adjust rates/grants in SSI/SSP, FC facilities and AAP.

CNI Data Period	CNI (Percent change)	Applicable Budget Fiscal Year (FY)
Dec. 1979 - Dec. 1980	11.19	1981-82
Dec. 1980 - Dec. 1981	8.13	1982-83
Dec. 1981 - Dec. 1982	5.79	1983-84
Dec. 1982 - Dec. 1983	5.56	1984-85
Dec. 1983 - Dec. 1984	5.74	1985-86
Dec. 1984 - Dec. 1985	5.15	1986-87
Dec. 1985 - Dec. 1986	2.62	1987-88
Dec. 1986 - Dec. 1987	4.74	1988-89
Dec. 1987 - Dec. 1988	4.61	1989-90
Dec. 1988 - Dec. 1989	4.62	1990-91
Dec. 1989 - Dec. 1990	5.49	1991-92
Dec. 1990 - Dec. 1991	1.81	1992-93
Dec. 1991 - Dec. 1992	2.37	1993-94
Dec. 1992 - Dec. 1993	1.69	1994-95
Dec. 1993 - Dec. 1994	1.48	1995-96
Dec. 1994 - Dec. 1995	0.52	1996-97
Dec. 1995 - Dec. 1996	2.60	1997-98
Dec. 1996 - Dec. 1997	2.84	1998-99
Dec. 1997 - Dec. 1998	2.36	1999-00
Dec. 1998 - Dec. 1999	2.96	2000-01
Dec. 1999 - Dec. 2000	5.31	2001-02
Dec. 2000 - Dec. 2001	3.74	2002-03
Dec. 2001 - Dec. 2002	3.46	2003-04
Dec. 2002 - Dec. 2003	2.75	2004-05
Dec. 2003 - Dec. 2004	4.07	2005-06
Dec. 2004 - Dec. 2005	3.75	2006-07
Dec. 2005 - Dec. 2006	3.70	2007-08
Dec. 2006 - Dec. 2007	5.26	2008-09
Dec. 2007 - Dec. 2008	1.53	2009-10
Dec. 2008 - Dec. 2009	1.57	2010-11
Dec. 2009 - Dec. 2010	1.92	2011-12
Dec. 2010 - Dec. 2011	2.98	2012-13
Dec. 2011 - Dec. 2012	2.65	2013-14
Dec. 2012 - Dec. 2013	2.17	2014-15
Dec. 2013 - Dec. 2014	2.56	2015-16

Forecast in 2016 May Revision		
Dec. 2014 - Dec. 2015	2.76	2016-17

Note:

The CNI is based on a market basket reflecting the spending patterns of low income households in the Los Angeles and San Francisco metropolitan areas. The CNI is calculated by DOF using the CPI for food, rent, fuel, apparel and transportation.

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

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Federal Discount Rate^{*}

Historical Federally Eligible Percent of FC/CWS Caseloads

ACTUALS				
	58 County	49 County	Cohort 1	Cohort 2
FY 2011-12	66%	68%	62%	66%
FY 2012-13	66%	68%	62%	66%
FY 2013-14	65%	68%	59%	67%
FY 2014-15	65%	68%	61%	66%

FORECAST IN 2016 MAY REVISION				
	58 County	49 County	Cohort 1	Cohort 2
FY 2015-16	65%	68%	62%	66%
FY 2016-17	66%	68%	62%	66%

Note:

The federal discount rate is based on the combined AFDC-FC foster family home, foster family agency and group home caseloads.

The Cohort 1 discount rate reflects Los Angeles and Alameda Counties' caseloads.

The Cohort 2 discount rate reflects Butte, Lake, Sacramento, San Diego, San Francisco, Santa Clara and Sonoma Counties' caseloads.

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

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Other Resources*

Adult Programs:

Services and Financial Support to Low-Income Aged, Blind and Disabled:

<http://www.cdss.ca.gov/agedblindddisabled/>

IHSS QA:

<http://www.cdss.ca.gov/agedblindddisabled/PG1815.htm>

IHSS Social Worker Training Academy:

<http://www.cdss.ca.gov/agedblindddisabled/PG1214.htm>

Adult Program Services:

<http://www.cdss.ca.gov/agedblindddisabled/PG889.htm>

IHSS Provider Information:

<http://www.cdss.ca.gov/agedblindddisabled/PG1788.htm>

IHSS Stakeholder Information (program changes):

<http://www.cdss.ca.gov/agedblindddisabled/PG2137.htm>

Fair Labor Standards Act Information:

<http://www.cdss.ca.gov/agedblindddisabled/PG3651.htm>

CalWORKs and CalFresh:

CalWORKs Annual Summary:

<http://www.cdss.ca.gov/research/PG278.htm>

Federal Poverty Measure:

<http://aspe.hhs.gov/poverty-guidelines>

California Programs Benefits Website:

<http://www.benefitscal.org>

Federal TANF Program:

<http://www.acf.hhs.gov/programs/ofa/programs/tanf>

Federal SNAP Data:

<http://www.fns.usda.gov/pd/snapmain.htm>

CalFresh Characteristics Reports:

<http://www.dss.cahwnet.gov/cdssweb/PG147.htm>

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Other Resources*

State SNAP Participation Rates:

<http://www.fns.usda.gov/sites/default/files/ops/Reaching2013.pdf>

CalFresh Program Data and Performance Home Page:

<http://www.cdsscounties.ca.gov/foodstamps/>

Eligibility and Issuance Requirements:

<http://www.cdss.ca.gov/foodstamps/PG841.htm>

Children's Programs:

OCAP:

<http://www.cdss.ca.gov/ocap/>

Title IV-E California Well-Being Project:

<http://www.childsworld.ca.gov/PG1333.htm>

Child Welfare Dynamic Report System (CDSS and UC Berkeley collaboration):

http://cssr.berkeley.edu/ucb_childwelfare/

ACF:

<http://www.acf.hhs.gov/>

Children and Family Services Division:

<http://www.childsworld.ca.gov/>

CCL:

CCL:

<http://cclcd.ca.gov/>

Other:

CDSS Local Assistance Estimates:

<http://www.cdss.ca.gov/cdssweb/PG106.htm>

CDSS Budget and Fiscal News:

<http://www.cdss.ca.gov/cdssweb/PG34.htm>

CDSS Program Research and Data Reports:

<http://www.cdss.ca.gov/research/>

* Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.

Other Resources^{*}

ACLs:

<http://www.dss.cahwnet.gov/lettersnotices/PG931.htm>

CFLs:

<http://www.dss.cahwnet.gov/lettersnotices/PG959.htm>

^{*} Please refer to the first tab titled "[Acronyms](#)" for a full description of acronyms.