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GOVERNOR

REASON FOR THIS TRANSMITTAL

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

DECEMBER 23, 2016

ALL COUNTY LETTER NO. 16-92

TO: ALL COUNTY WELFARE DIRECTORS
 ALL COUNTY CALWORKS PROGRAM SPECIALISTS
 ALL COUNTY CALFRESH COORDINATORS
 ALL COUNTY WELFARE TO WORK COORDINATORS
 ALL COUNTY CONSORTIUM PROJECT MANAGERS
 ALL COUNTY CHILD WELFARE SERVICES PROGRAM MANAGERS
 ALL COUNTY PROBATION OFFICERS
 ALL COUNTY ELIGIBILITY SUPERVISORS
 ALL FOSTER CARE MANAGERS
 ALL COUNTY SFIS COORDINATORS
 ALL COUNTY EBT PROJECT MANAGERS
 ALL CHILD WELFARE SERVICES NEW SYSTEM
 ALL TITLE IV-E AGREEMENT TRIBES
 ALL JUDICIAL COUNCIL STAFF

SUBJECT: APPROVED RELATIVE CAREGIVER FUNDING OPTION (ARC) PROGRAM

REFERENCE: [SENATE BILL \(SB\) 855](#) (CHAPTER 29, STATUTES OF 2014); WELFARE AND INSTITUTIONS CODE (W&IC) SECTIONS [309\(d\)](#), [319\(f\)\(2\)](#), [361.4](#), [11461](#), [11461.3](#), [11253.4\(a\)\(1\)](#), [11253.45](#) and [16519.5](#); ALL COUNTY LETTERS (ACL) [06-60](#), [14-89](#), [15-20](#), [15-20E](#), [15-54](#), [15-83](#), [16-57](#), [16-64](#) and [16-79](#); ALL COUNTY INFORMATION NOTICE (ACIN) [I-71-00](#); MPP SECTIONS [21-115](#), [42-431.22](#), [44-100 et seq.](#), [44-211](#), [44-315.7](#), [45-304](#), [45-305](#), [45-306](#), and [82-512](#)

The purpose of this letter is to provide up-to-date guidance regarding the ARC Program, including a summary of major program changes. This letter updates information contained in, and, where different, supersedes All County Letters (ACLs) 14-89, 15-20, 15-20E, 15-83 and 15-96. This letter does not supersede ACL 15-54, concerning Notices of Action (NOAs) to California Work Opportunity and Responsibility to Kids (CalWORKs) recipients who may also be caring for ARC-eligible children. This letter

also does not supersede County Fiscal Letter (CFL) 14/15-52, which provides claiming instructions for ARC payments.

Attached to this letter is an ARC Implementation Guide, which consolidates updates and corrects program guidance, originally provided by previous ACLs. This letter also provides a link to an updated Question and Answer (Q&A) document published online at http://www.childsworld.ca.gov/res/pdf/FAQ_Regarding_ARC.pdf, which addresses the most commonly-raised questions and issues surrounding the ARC Program.

Effective January 1, 2017, pursuant to WIC section 11235.45, counties that have not opted in to the ARC Program will also be required to pay approved relative caregivers of dependent children a per-child, per-month rate equal to the basic foster care rate paid to foster care providers pursuant to WIC section 11461(g). An ACL concerning the implementation of WIC section 11235.45 is forthcoming; however counties that have not opted in to the ARC Program should review the attached ARC Implementation Guide for applicable ARC policies and procedures. Additionally, a forthcoming CFL will provide additional information on claiming for these counties. Also please see CFL 16/17-41 for additional information regarding impacts to all counties.

Summary of Major Program Changes

The California Department of Social Services (CDSS) and stakeholders initially based procedures for the ARC Program either on foster care practice or CalWORKs/Temporary Assistance to Needy Families policies. Since January 2015, many counties have put the ARC Program into operation, which has allowed CDSS and counties to identify areas where those initial policy decisions have resulted in unexpected consequences or obstacles. Consequently, CDSS, in consultation with County Welfare Directors Association of California (CWDA), Statewide Automated Welfare System (SAWS) consortia and participating counties, has recently determined that two significant programmatic changes are warranted pertaining to 1) timing of payments and 2) method of payment. These changes are designed to reduce county workload and more closely align the ARC Program with foster care practices.

Timing of Payments

Background: Currently, ARC payments are made prospectively (at the beginning of each month for the ensuing month) and on a month-to-month basis based on eligibility on the first day of the month. As a result, if an ARC-eligible child is in a placement with an approved relative caregiver on the first of the month, the caregiver will receive a full ARC payment for that month, even if a placement change is made the next day. The initial decision to make ARC payments prospectively and on a monthly eligibility basis was made to be consistent with CalWORKs practice. However, implementation of

this policy has shown that alignment with foster care practice would be more appropriate, both from a programmatic and an operational point of view. Whereas CalWORKs provides cash aid and services to eligible needy families, the care and supervision of a dependent child is a function which is performed by a caregiver for a specific period of time, and for which specific reimbursement is appropriate. In addition, current practice gives rise to unintended consequences, such as overpayments (when circumstances such as an extended absence reduce the correct amount of a benefit which has already been paid) and inequities caused by mid-month placement changes (the new caregiver receives no reimbursement for care and supervision provided during the partial month, while the previous caregiver receives payment for the part of the month occurring after the child has been moved).

Policy Change: Counties are instructed to shift from the current payment schedule and methodology to a system under which ARC benefits are calculated for the days that a dependent child is actually in placement, and then paid to the caregiver in arrears. In order to minimize the period of disparate practices between counties, each county is encouraged to implement this shift as quickly as possible, while taking into consideration potential impacts to caregivers as discussed below. Retrospective payments will eventually be automated; in accordance with plans submitted by the SAWS consortia (see Automation Issues). However, any measures a county chooses to implement to ease the transition from prospective to retrospective payments must be undertaken outside the automation process, and therefore any county opting to put such measures in place should not wait for the automation process to be completed. **By June 30, 2017, all counties should be making retrospective payments to all ARC caregivers.**

County Responsibilities: The shift as to when benefits are paid will materially affect all current ARC caregivers during the transition period. When the shift occurs, a caregiver may face a span of approximately 30 additional days between benefit payments. (For example, if a county shifts from prospective payments in September to retrospective payments in October, caregivers will not receive a payment between September 1 and October 31.) Counties are not required to take any measures to mitigate financial difficulties for caregivers which may arise from this extended gap between payments, but are encouraged to do so if feasible. For example, a county may wish to gradually shift the date of payments over several pay cycles, thereby replacing one 30-day delay with several shorter delays, or may choose to use its own funds to issue an additional payment to caregivers during the extended period between regular ARC payments.

Additionally, counties are encouraged to take external factors into consideration when determining the timing of the payment shift. For example, counties may want to avoid making the shift during the holiday season or when children are returning to school, times when many families face higher expenses. Conversely, many individuals receive

income tax refunds during the spring, which could lessen the impact of the payment gap.

Finally, counties must give caregivers at least 90 days' notice of the impending shift. Attached to this letter is a template which counties may use to issue notices regarding this change and the discontinuance of electronic benefit transfer (EBT).

Method of Payment

Background: Because benefits for CalWORKs (which partially funds the ARC Program) are delivered via EBT cards, CDSS, in consultation with CWDA and counties, made an initial decision to utilize EBT to deliver ARC benefits.

However, a number of significant obstacles have arisen in the implementation of this policy decision. Some of these difficulties involve programming challenges faced by the SAWS consortia, while some involve tracking benefits and overpayments when there is a change in caregivers. Still others directly impact caregivers: for example, a caregiver for multiple ARC children must keep track of separate EBT cards and personal identification numbers for each child. Extensive discussions between CDSS, CWDA, counties and the SAWS consortia have revealed the intractability of many of these problems.

Policy Change: Due to the numerous difficulties surrounding the use of EBT to deliver ARC benefits, CDSS directs counties to cease using this method to make ARC payments as soon as administratively feasible, in accordance with plans submitted by the SAWS consortia (see Automation Issues).

County Responsibilities: For all ARC cases initiated after the date of this letter, counties should issue benefits via paper warrant or direct deposit, rather than issuing a new EBT card. Counties are encouraged to offer individual recipients the option of direct deposit of benefits. Counties must notify caregivers of the discontinuance of EBT (the notice template regarding the change in payment timing also contains placeholder language for this change, and counties may use a single notice for both purposes), and encourage them to spend down the remaining ARC benefits in their EBT account.

Automation Issues

Due to the automation requirements of the state's Continuum of Care Reform effort, the SAWS consortia are expected to face significant delays in programming the changes to the ARC Program set forth in this letter. Consequently, each SAWS consortium is directed to develop and submit to CDSS, by email to CFSARCFO@dss.ca.gov, a plan

outlining the timeframe for making the necessary ARC Program programming changes as soon as possible.

List of Attachments

Implementation Guide – 2016-17
Implementation History
Forms (3)
Brochure
NOAs (4)
Opt-In Letter Template
Opt-Out Letter Template
Opt-Out Notice to Caregivers Template
Notice to Caregivers of Major Program Changes Template

Contacts

Additional program changes are outlined throughout the ARC implementation guide. If you have questions regarding this letter or its attachments, please contact the Foster Caregiver Policy and Support Unit at (916) 651-7465 or CFSARCFO@dss.ca.gov.

Sincerely,

Original Document Signed By:

GREGORY E. ROSE
Deputy Director
Children and Family Services Division

ATTACHMENTS

Attachment A
ARC Implementation Guide
2016-17

Table of Contents

Program Background and Concept	3
Composition of Payments	4
Supplemental Allowances	4
Aid Codes.....	4
Jurisdiction and Inter-County Transfers.....	5
Eligibility	5
The ARC Program Application	6
ARC and Eligibility for CalWORKs	8
ARC Applicant Requirements and CalWORKs.....	8
Other Requirements	9
NMDs and ARC payments	9
Noncitizen Children	9
Periodic Redetermination of Eligibility	9
Caregiver Requirements	9
Benefits	10
Calculation of the Grant.....	10
Delivery of Benefits	11
Benefit Proration	11
Format of Examples and Proration Methodology.....	11
Consideration of Income and Other Offsets in Prorated ARC Payments.....	11
Rates and Levels Information Used in This Letter	11
No Attribution of CalWORKs in Mid-Month Proration Calculations for ARC Cases Whose Youth Are Transferring from Existing Placements (Revised Policy):	12
Proration Examples	12
Proration Example #1	12
Proration Example #2.....	14
Overpayments	17
Limitations on Collecting an OP	17
Recouping an ARC OP	18
Child Support	18
Tribal Children and ARC	19
Wraparound Services.....	19
Forms and Notices	19

ARC 1 – ARC Determination	19
ARC 1A – ARC Caregiver Rights and Responsibilities	19
ARC 2 – ARC Redetermination	20
PUB 468 – ARC Brochure	20
NA 1277 – ARC Program, Overpayment.....	20
Foster care rules	20
Fraud.....	20
NA 1278 – Approve ARC Payment	21
NA 1279 – Deny ARC Payment	21
NA 1280 – Discontinue ARC Payment.....	21
NA 1281 – Change in Amount of ARC Payment	21
Camera-Ready Copies and Translations.....	21
Glossary	22

Program Background and Concept

State law requires that preferential consideration for placement be given to a relative when a child is removed from the physical custody of a parent. It is estimated that 36 percent of all foster children in the state are in the care of a relative. An approved relative caregiver in California must meet health and safety standards that mirror those for a licensed foster parent, such as undergoing criminal background and child abuse index checks. Effective January 1, 2017, new relative placements will be assessed using the RFA process.

Although placement with a relative is the preferred placement, the funding associated with that placement depends on whether the child is eligible to receive federal Aid to Families with Dependent Children – Foster Care (AFDC-FC). While an approved relative may receive AFDC-FC payments on behalf of a federally eligible foster child, an approved relative caring for a non-federally eligible foster child is ineligible for AFDC-FC. For a non-federally eligible child in foster care, an approved relative may apply to receive California Work Opportunity and Responsibility to Kids (CalWORKs) benefits on behalf of the child. Unlike AFDC-FC, typical CalWORKs grants are not a per-child payment, but are based on the size of the family as a whole, and are less than the AFDC-FC rate.

To address this disparity, California enacted the Approved Relative Caregiver Funding Option (ARC) Program. This program provides funding to enable participating counties to make payments equal to the foster care rate to approved relative caregivers with whom a non-federally eligible foster child is placed. Such a child must reside in California and be under the jurisdiction of the California juvenile court.

The ARC Program is currently a county-optional program. A county that has elected to participate must agree to pay all approved relative caregivers with whom an eligible child is placed a per-child, per-month rate equal to the rate paid to foster care providers pursuant to [Welfare and Institutions Code \(W&IC\) section 11461\(g\)](#). This rate is intended to pay for the care and supervision of the eligible child. The county agrees to make these payments for the duration of the county's participation in the ARC Program, including during required notice periods if a county chooses to no longer participate in the program.

Effective January 1, 2017, counties which have not opted in to the ARC Program will also be required to pay approved relative caregivers of dependent children a per-child, per-month rate equal to the foster care rate, pursuant to [W&IC section 11253.45](#). To avoid unnecessary duplication, the ARC policies and procedures contained in this letter will generally apply to counties making foster care-equivalent payments under W&IC section 11253.45, rather than through the ARC Program. A forthcoming ACL concerning the implementation of W&IC section 11253.45 will identify what portions of this implementation guide (if any) do not apply to non-ARC counties, as well as other differences between the ARC Program and implementation of W&IC section 11253.45.

Composition of Payments: For both ARC and non-ARC counties, payments to approved relative caregivers on behalf of children who are not eligible to receive Title IV-E foster care funds include federal or state CalWORKs funds to the greatest extent possible. The amount that such a child receives (or would receive) per month from CalWORKs is applied toward his or her monthly payment. The balance of the monthly payment, up to the equivalent of the foster care rate, comes from other funds—for the ARC Program, SGF funds as specified in statute. For example, a payment on October 1, 2016 for a CalWORKs-eligible nine-year-old child under the jurisdiction of Monterey County—which is in CalWORKs Region 1 (the higher-cost counties)—would consist of the following: a CalWORKs Region 1 monthly payment of \$392, plus other resources of \$413, to bring the child’s total payment up to the foster care rate of \$805 for the child’s age group. It is critical to note, however, that although CalWORKs funds may be part of the payment, a child does not have to be eligible for CalWORKs to receive a foster care-equivalent payment either under the ARC Program or from a non-ARC county. CalWORKs eligibility only determines whether or not CalWORKs funds may make up part of the payment.

California’s CCR efforts include establishing a new foster care rate structure that is scheduled to begin phasing in on January 1, 2017. The new rate for resource families will be the HBFC rate, which is outlined in [ACL 16-79](#). Pursuant to the phase-in of the new rate structure, there will be an increase to the foster care rate established in W&IC section 11461. The increase over the previous foster care rate will be funded with SGF outside of existing funding. Please see CFL 16/17-41 for additional information.

Children receiving funding through either W&IC section 11461.3 or W&IC 11253.45 will be eligible to receive an LOC rate when the rate structure is fully implemented. Further guidance will be provided describing how the HBFC rate will be implemented.

Supplemental Allowances: Both ARC and non-ARC counties (effective January 1, 2017) are required to make per-child, per-month payments up to the foster care rate, as specified in [W&IC section 11461.3](#). The ARC Program does not permit any supplemental allowances (clothing allowance, SCI, etc.) to the rate to be paid from ARC funds. However, a county may choose to use its own funds to make supplemental payments for an ARC child. (For example, funding for the SCI was included in foster care costs that were realigned; therefore, counties may use LRF for this purpose.) Effective January 1, 2017, counties can supplement the ARC payment for any child receiving an HBFC rate with an SCI or a clothing allowance.

Aid Codes: Five aid codes have been assigned to the ARC Program. Effective January 1, 2017, these codes will also be used by non-ARC counties making foster care-equivalent payments to approved relative caregivers.

- 2S – ARC Funding Option + federal CalWORKs;
- 2T – ARC Funding Option + state CalWORKs;

- 2U – ARC Funding Option + state CalWORKs for (Non Minor Dependents (NMDs));
- 2P – ARC Funding only (SGF); and
- 2R – ARC Funding only (SGF) (for NMDs).

Jurisdiction and Inter-County Transfers

Although the county of residence is typically the county with payment responsibility for CalWORKs (with the exception of NMDs), the county of court jurisdiction will be the county with payment responsibility for the ARC Program. This includes the CalWORKs portion of the ARC payment.

The county of court jurisdiction (the county with placement and care responsibility over the child or the NMD), that has opted in to the ARC Program will make the ARC payment to the approved relative caregiver. The county of court jurisdiction will make the ARC payment even if the child is placed out-of-county, as long as the child is placed in California. In the event that the child's dependency proceeding is transferred to another county, the new county of court jurisdiction will be responsible for the ARC payment if that county has opted into the program. However, effective January 1, 2017, even if the new county of court jurisdiction has not opted into the program, the county will be required to pay the caregiver an amount equal to the foster care rate under W&IC section 11253.45.

Needy or non-needy caretaker relatives who receive CalWORKs for themselves and/or a child who is not participating in the ARC Program will continue to receive CalWORKs benefits from the county of residence.

Eligibility

To be eligible for the ARC Program, a child must meet all of the following criteria:

- The child must reside in California. That is, the child must be placed with an approved relative caregiver in California. Out-of-state placements are not eligible for the ARC Program.
- The child must be voluntarily or involuntarily placed in a foster care placement, consistent with [W&IC section 11401](#)(b), (c), or (e), with one limitation pertaining to voluntary placement agreements (see fourth sub-bullet below). Of special note, this includes the following:
 - An NMD pursuant to W&IC section 11401(e).
 - A child who has been removed from his or her home as the result of a judicial determination that continuance in the home would be contrary to the child's welfare and any of the following applies:

- The child has been adjudged a dependent child of the court on the grounds that he or she is a person described by section [300](#).
 - The child has been adjudged a ward of the court on the grounds that he or she is a person described by sections [601](#) and [602](#), or, on or after January 1, 2012, the nonminor is under the transition jurisdiction of the juvenile court pursuant to section [450](#).
 - The child has been detained under a court order, pursuant to section [319](#) or [636](#), that remains in effect.
 - The child's or nonminor's dependency jurisdiction, or transition jurisdiction pursuant to Section 450, has resumed pursuant to section [387](#), or subdivision (a) or (e) of section [388](#).
- A child who has been removed from his or her home as the result of a voluntary placement agreement. However, under W&IC sections 11461.3(b)(2)(B) and 11401(c), a child who has been voluntarily placed by his or her parent or guardian with the county child welfare department or the county probation department having responsibility for placement and care can only participate in the ARC Program under the voluntary placement agreement for up to six months pursuant to W&IC section 11401.1(b). After that, the child may continue in the ARC Program if the county files the appropriate petition on behalf of the child, seeking necessary judicial determinations. Note that under these circumstances, since the status of the case changes from voluntary placement to dependency, a new ARC 1 form must be completed.
- The child must not be federally eligible under Title IV-E of the Social Security Act while placed with an approved relative caregiver pursuant to W&IC section 11461.3(b)(1)(C).
 - An ARC Program application, including all necessary related information and documentation, must be completed for each child. If this is not done, an otherwise eligible child cannot participate in the ARC Program. Please refer to the attached form ARC 1 (*Statement of Facts Supporting Eligibility for the Approved Relative Caregiver (ARC) Funding Option Program*), which is hereinafter referred to as the ARC Program application.

The ARC Program Application: In order for an approved relative caregiver to receive the ARC payment on behalf of an eligible child, an ARC Program application (*Statement of Facts Supporting Eligibility for the Approved Relative Caregiver (ARC) Funding Option Program – ARC 1*), attached, must be fully completed, signed by the relative caregiver, and submitted to the CWD. **Although eligibility for CalWORKs is not a requirement for receipt of the ARC payment, each ARC-eligible child must be assessed in order to determine if CalWORKs funds may be utilized in the ARC payment.**

The child's social worker/probation officer should complete as much of the ARC Program application as possible. The ARC application consists of two parts:

- Part One establishes the child's eligibility for the ARC Program.
- Part Two establishes the child's eligibility for use of CalWORKs funds as part of the total ARC payment. Because the CWD should already have this information from the AFDC-FC determination, the forms [FC 2](#) (*Statement of Facts Supporting Eligibility for AFDC-Foster Care (FC)*) and [SOC 158A](#) (*Foster Child's Data Record and AFDC-FC Certification*) may be used as documentation. Typical verification documentation to determine eligibility for the CalWORKs portion of the ARC payment may include birth certificates, Social Security Number and proof of any income or resources of the child.

The ARC application may be completed for cases whose relative placements are pending approval. **However, payment may not begin until the relative caregiver has been approved, meaning the relative and home of the relative are approved as meeting health and safety standards that mirror those for a licensed foster parent or resource family.** The beginning date of aid for the ARC program is the date the **approved** relative caregiver signs the ARC application, or the date the relative is approved as meeting health and safety standards, whichever is later. **Until the relative caregiver is approved, the case is not eligible for ARC, regardless of the date the ARC 1 was signed.**

For **cases that are not currently receiving CalWORKs** at the time the ARC application is being filled out, Part One and Part Two of the application must be completed and signed by the relative caregiver.

- If the relative caregiver is non-needy and there are no children in the home who receive CalWORKs benefits (not including ARC-eligible children), only the ARC application needs to be completed.
- If the relative caregiver is needy and wishes to receive CalWORKs for him- or herself (separate from any ARC benefits received on behalf of the child), a [SAWS 2 Plus](#) form (for the caregiver) must be completed in addition to the ARC application (for the child).
- Needy relatives who receive CalWORKs benefits for themselves (apart from ARC benefits received on behalf of a child) must continue to follow CalWORKs rules. If the ARC child is the only eligible child for a needy caretaker relative, the needy caretaker relative is still eligible for CalWORKs and must apply for himself/herself and the ARC eligible child using the SAWS 2 Plus and the ARC application.

For **cases that are currently receiving CalWORKs** at the time the ARC application is being filled, only Part One of the ARC application must be completed and signed by the relative caregiver.

- Attach a copy of the child's most recent CalWORKs application (SAWS 2 Plus, [CW 2219](#), [CW 8](#), or [CW 8A](#)) in place of Part Two of the application. NOTE: If the relative caregiver has chosen to complete Part Two of the ARC application, a CalWORKs application does not need to be attached.

In a rare number of cases, the determination of eligibility for the CalWORKs portion of the ARC payment may still be pending after the child is determined to be ARC-eligible. In order to expedite issuance of payments, these cases should be temporarily identified using an ARC-only aid code (2P or 2R) until the CalWORKs determination is made. After the CalWORKs determination is made, the cases should be identified with the appropriate ARC aid code.

The ARC and Eligibility for CalWORKs: For ARC Program purposes, each participating child will be in an AU of one regardless of how many other persons in the family receive CalWORKs, including any siblings of the child. Needy caretaker relatives will still be eligible for CalWORKs if the only eligible child is the ARC youth (unless the youth is an NMD) and will receive the regional (county of residence) exempt/non-exempt rate as applicable. The CalWORKs grant for the relative caregiver will be calculated as normal, following CalWORKs rules. The ARC eligible child is included in the Minimum Basic Standard of Care for determining financial eligibility. The ARC payment will not be included as income when determining the relative caregiver's or other household member's eligibility for CalWORKs assistance.

The ARC Applicant Requirements and CalWORKs: When determining eligibility for the CalWORKs portion of the ARC payment, the following CalWORKs requirements will not apply to an approved relative caregiver applying for the ARC Program on behalf of an eligible child:

- Face-to-face interview
- Statewide Fingerprint Imaging System
- Photo-image of the approved relative caregiver
- Immunization
- School attendance
- Cal-Learn participation
- Welfare-to-Work

In addition, CalWORKs reporting requirements will not apply as ARC children meet with their social worker on a monthly basis. However, county child welfare staff should ensure that county CalWORKs staff are notified of any changes that could affect the

child's or the caregiver's eligibility for CalWORKs benefits, such as if the child exits care.

Please note: The caretaker relative must comply with these requirements if he or she receives CalWORKs benefits for him- or herself, or other children in the home receive CalWORKs benefits but do not participate in the ARC Program.

Other Requirements: W&IC section 11461.3(h) prohibits an approved relative caregiver receiving an ARC payment from receiving additional CalWORKs payments for the child. These additional CalWORKs payments are described in [MPP section 44-211](#), and include payments for special needs, emergencies, homeless assistance, and pregnancy special needs. Any statutory changes imposed on the CalWORKs grant levels, such as MAP increases, shall also be applied to the CalWORKs portion of the ARC payment.

The NMDs and ARC Payments: An NMD participating in the ARC Program is eligible to receive funding up to age 21. All ARC policies and procedures continue to apply to NMDs.

Noncitizen Children: A noncitizen child is eligible for the ARC Program if all ARC requirements are met. In addition, a child determined to be PRUCOL (Permanently Residing Under Color of Law), as specifically defined in [MPP section 42-431.22](#), may be eligible for CalWORKs. A noncitizen child who meets the requirements of MPP section 42-431.23 may also be eligible for CalWORKs; this section pertains to victims of trafficking, domestic violence, and other serious crimes. Please refer to [ACL 06-60](#) and [ACIN I-71-00](#).

Periodic Redetermination of Eligibility: Dependent children who receive federal or state AFDC-FC must have their eligibility for benefits redetermined by the county of jurisdiction annually. To maintain consistency with this practice, counties are required to annually redetermine the eligibility of children receiving benefits under the ARC Program. This redetermination is also accepted by the Department of Health Care Services as the required annual redetermination of Medi-Cal eligibility.

Caregiver Requirements

A relative caregiver with whom an eligible child is placed must be approved pursuant to W&IC sections [309\(d\)](#), [361.4](#), or [16519.5](#) (RFA). The approved relative caregiver must reside in California (because the child must reside in California). Relative approval standards, including RFA standards, remain the same under the ARC Program.

A "relative" is defined in W&IC section [319\(f\)\(2\)](#) as:

...an adult who is related to the child by blood, adoption, or affinity within the fifth degree of kinship, including stepparents, stepsiblings, and all

relatives whose status is preceded by the words “great,” “great-great,” or “grand,” or the spouse of any of these persons, even if the marriage was terminated by death or dissolution.

As clarification, approved NREFMs are not eligible to participate in the ARC Program; non-federally eligible children placed with an approved NREFM receive a state (non-federal) AFDC-FC payment.

Benefits

Calculation of the Grant: The total ARC payment made to approved relative caregivers will be equivalent to the foster care rate paid to federally eligible relative caregivers. (Effective January 1, 2017, this rate will be the new Home-Based Family Care Rate as contained in ACL 16-79.) The total ARC payment will be comprised of CalWORKs (if applicable) and ARC/SGF. For ARC Program purposes, each participating child will be in an AU of one regardless of how many other persons in the family receive CalWORKs, including any siblings of the child.

Eligibility for the CalWORKs portion of the ARC payment is based on the child's combined income and property resources and must total no more than \$10,000 in any given month when reported at annual redetermination or as determined by the social worker in their monthly visit. If the child has income and resources above \$10,000 it does not make him or her ineligible for ARC. However this will be coded as an ARC-only case paid solely by ARC/SGF. Income and property are to be identified and assessed value using AFDC-FC requirements.

If a child is determined eligible for CalWORKs, the CalWORKs portion of the ARC payment will be the applicable regional (county of jurisdiction) exempt MAP amount for an AU of one. For ARC Program purposes, the regional (county of jurisdiction) CalWORKs exempt MAP for an AU of one will also be applied to NMDs. Do not subtract income from the MAP. Do not apply disregards to the MAP.

The ARC/SGF portion of the ARC payment is subject to the same income deduction and offset rules as income under the foster care program for any income that the child receives, per [MPP Section 44-100](#) et. seq., except as otherwise noted in this letter. Income received by the child will not offset the CalWORKs portion of the ARC grant.

For example, an eligible six-year-old child with no income or resources is placed by Alameda County (Region 1), but lives in Fresno County (Region 2). The ARC payment for January 2016 consists of the monthly, exempt (Region 1) CalWORKs payment of \$387, plus ARC/SGF resources of \$357, to bring the child's total ARC payment up to the foster care rate of \$744 for the child's age group.

Delivery of Benefits: Counties shall deliver ARC benefits via paper warrant, unless (at the discretion of the county) the caregiver opts to receive ARC benefits via direct deposit.

Benefit Proration

The CalWORKs and ARC/SGF portions of prorated ARC payments are calculated separately and then added together for the total ARC payment. The CalWORKs portion is equal to the exempt MAP for an AU of one in the county of jurisdiction, prorated based on the number of days the child was in the ARC placement. The ARC/SGF portion is equal to the foster care rate, less the exempt MAP for an AU of one in the county of jurisdiction, prorated based on the number of days the child was in the ARC placement.

The methodology for computing proration of both the CalWORKs and ARC/SGF portions of ARC payments follows the general guidelines established in [MPP section 44-315.7](#), including its guidance on rounding procedures. When dividing dollar amounts to calculate a daily rate/grant amount, any fractional cents should be rounded up or down to the nearest whole cent. This differs slightly from the handbook guidance in MPP section 44-315.73, which allows for fractional cents. Once the daily rate/grant amount has been multiplied by the relevant number of days, the resulting prorated grant amount (either the CalWORKs portion or ARC/SGF portion of the ARC payment) attributable or payable to a caregiver should be rounded down to the nearest whole dollar. The guideline referenced in MPP 44-315.726 (MPP 44-315.5) regarding prorated grant amounts of less than ten dollars does not apply to ARC proration amounts.

Format of Examples and Proration Methodology: Each example consists of five different parts: the type of example, a more detailed scenario upon which the calculations will be based, a graphical formula or set of formulas depicting the calculation of the payments, step-by-step detailed explanations of the calculations and claiming instructions for the payments and, if applicable, certain portions of those payments.

Consideration of Income and Other Offsets in Prorated ARC Payments: Income received by the child does not affect the methodology used to calculate the amount of prorated ARC grant. Any reductions or offsets to the ARC payment amount occur after the prorated ARC grant amount has been calculated. As previously stated, income received by the child will not offset the CalWORKs portion of the prorated ARC grant.

Rates and Levels Information Used in This Letter: This guidance and these examples are based on the new HBFC rate and the most recent CalWORKs MAP level amounts. These MAP levels are described in [ACL 16-64](#), while the HBFC rate is described on pages five and six of [ACL 16-79](#). For the time period used in these

examples, an ARC AU of one includes the MAP of \$392 for Region 1 and the MAP of \$374 for Region 2.

No Attribution of CalWORKs in Mid-Month Proration Calculations for ARC Cases Whose Youth Are Transferring from Existing Placements (Revised Policy): When transferring youth out of an existing CalWORKs AU into an ARC AU mid-month, a portion or the entirety of the funds the CalWORKs AU received was previously considered “attributable” to a child (i.e., paid on their behalf, prospectively, for the entire month in which the transfer took place).

The CDSS is revising this policy, as follows:

Prospectively, for youth who are transferring from CalWORKs to the ARC Program, no portion of the original CalWORKs payment will be attributable to the youth and therefore will not impact the calculation of the prorated ARC grant amount. If multiple youth are transferring from a CalWORKs AU to individual ARC AUs, this policy applies to each transferring youth. The initiation of this policy corresponds to both the shift from prospective monthly eligibility to retrospective daily eligibility for the ARC grant and the waiving of the applicability of CalWORKs rules in W&IC section [11253.4\(a\)\(1\)](#).

Under this revised policy, the CalWORKs portion of the prorated ARC grant amount will be equal to an exempt CalWORKs MAP for an AU of one, prorated to the number of days the ARC placement was eligible for payment. Any offsets, due to either income or some other factor, apply after the prorated grant amount has been calculated. Any aid amounts received by the original CalWORKs AU, regardless of its composition, are not considered income to the ARC child and will not reduce the prorated ARC payment.

For transfers to or from placements such as other ARC relative placements or state AFDC-FC non-relative placements, the prorated amount of CalWORKs and/or ARC/SGF due to the ARC case in the new placement is unaffected by any funds the case previously received or might potentially receive. Furthermore, the initial ARC payment will not result in a CalWORKs overpayment.

Proration Examples

Proration Example #1

Type of ARC case for Proration Example #1:

CalWORKs AU of Three Converting into ARC AU of One with Same Caregiver (CalWORKs to ARC)

Scenario for Proration Example #1:

A 10 year-old who is currently living in a CalWORKs AU with two other CalWORKs recipients (non-exempt MAP for an AU of three, Region 1, under aid code 30) has an

ARC application submitted on the child’s behalf. On April 13, 2017, the 10 year-old meets all eligibility requirements, including an approved home placement, for a new ARC Program case under aid code 2S, with the same caregiver. The county of jurisdiction for the ARC Program is Region 2. The prorated ARC payment should be based on the MAP level for the county of jurisdiction since the county of residence’s CalWORKs payment amount does not affect the calculation. Full monthly amounts of both the CalWORKs and ARC portion of the child’s payment must be prorated and paid. The case is eligible for ARC Program payment for 18 days during the month of April under aid code 2S.

Formulas for Proration Example #1:

CalWORKs Portion (Steps A – C)	ARC/SGF Portion (Steps D – G)
$\begin{aligned} & \$374 - \text{exempt MAP for AU of 1, Region 2} \\ \div & \underline{30} - \text{number of days in April} \\ & \$12.47 - \text{daily rate} \\ \times & \underline{18} - \text{number of days eligible for ARC} \\ & \$224.46 - \text{prorated amount before rounding} \\ \\ & \$224 - \text{prorated amount after rounding} \end{aligned}$	$\begin{aligned} & \$889 - \text{Foster Care basic rate (age 10)} \\ - & \underline{\$374} - \text{exempt MAP for AU of 1, Region 2} \\ & \$515 - \text{amount of ARC/GF due for month} \\ \div & \underline{30} - \text{number of days in April} \\ & \$17.17 - \text{daily rate} \\ \times & \underline{18} - \text{number of days eligible for ARC} \\ & \$309.06 - \text{prorated amount before rounding} \\ \\ & \$309 - \text{prorated amount after rounding} \end{aligned}$
Total Prorated Amount (Step H)	
$\begin{aligned} & \$224 - \text{prorated CalWORKs amount} \\ + & \underline{\$258} - \text{prorated ARC/GF amount} \\ & \mathbf{\$482} - \text{total amount due to the case} \end{aligned}$	

Steps for Calculation of Proration Example #1:

To calculate the prorated ARC payment due to this case:

1. The county should take the CalWORKs exempt MAP level for an AU of one (\$374 in Region 2) and divide it by 30 (number of days in the month of April), which results in the amount of \$12.47 per day.
2. This daily amount (\$12.47) should be multiplied by 18 (number of days eligible for the month of April), which results in the prorated amount of \$224.46.
3. This amount is rounded down to the nearest dollar (\$224). **This is the CalWORKs portion of the prorated payment.**
4. The county should then identify the ARC/SGF amount by taking the CalWORKs exempt MAP level for an AU of 1 (\$374) and subtracting it from the Foster Care rate under ARC (\$889), generating the ARC/SGF amount due to the case for an entire month (\$515).

5. This amount (\$515) should be divided by 30 (number of days in the month of April), which results in the amount of \$17.17 per day.
6. This daily amount (\$17.17) should then be multiplied by 18 (number of days eligible for the month of April), which results in the prorated amount of \$309.06 for the month of April.
7. This amount is rounded down to the nearest dollar (\$309). **This is the ARC/SGF portion of the prorated payment.**
8. The CalWORKs portion (\$224) and the ARC/SGF portion (\$309) are added together and the total amount (\$533) is issued to the ARC case.

Claiming for Proration Example #1:

The entire payment amount (\$533) should be entered on the ARC claim on Line 2 (Current Month Supplemental Payroll) under aid code 2S. The CalWORKs portion of the payment (\$224 from Step C) should be entered on Line 14 (CalWORKs Portion) under aid code 2S.

Proration Example #2

Type of ARC case for Example #2:

ARC AU Changing Caregivers (ARC to ARC)

Scenario for Proration Example #2:

A 10 year-old who is currently living in an ARC placement changes to another ARC placement on April 13, 2016. The case is eligible for an ARC Program payment for 12 days in regards to the first placement and for 18 days in regards to the second placement during the month of April under aid code 2S.

Formulas for Proration Example #2:

First Placement:

CalWORKs Portion (Steps A – C)	ARC/SGF Portion (Steps D – G)
$\begin{aligned} & \$374 - \text{exempt MAP for AU of 1, Region 2} \\ \div & \underline{30} - \text{number of days in April} \\ & \$12.47 - \text{daily rate} \\ \times & \underline{12} - \text{number of days eligible for ARC} \\ & \$149.64 - \text{prorated amount before rounding} \\ \\ & \$149 - \text{prorated amount after rounding} \end{aligned}$	$\begin{aligned} & \$889 - \text{Foster Care basic rate (age 10)} \\ - & \underline{\$374} - \text{exempt MAP for AU of 1, Region 2} \\ & \$515 - \text{amount of ARC/GF due for month} \\ \div & \underline{30} - \text{number of days in April} \\ & \$17.17 - \text{daily rate} \\ \times & \underline{12} - \text{number of days eligible for ARC} \\ & \$206.04 - \text{prorated amount before rounding} \\ \\ & \$206 - \text{prorated amount after rounding} \end{aligned}$
Total Prorated Amount (Step H)	
$\begin{aligned} & \$149 - \text{prorated CalWORKs amount} \\ + & \underline{\$206} - \text{prorated ARC/GF amount} \\ & \mathbf{\$355} - \text{total amount due to the placement} \end{aligned}$	

Second Placement:

CalWORKs Portion (Steps I – K)	ARC/SGF Portion (Steps L – O)
$\begin{aligned} & \$374 - \text{exempt MAP for AU of 1, Region 2} \\ \div & \underline{30} - \text{number of days in April} \\ & \$12.47 - \text{daily rate} \\ \times & \underline{18} - \text{number of days eligible for ARC} \\ & \$224.46 - \text{prorated amount before rounding} \\ \\ & \$224 - \text{prorated amount after rounding} \end{aligned}$	$\begin{aligned} & \$889 - \text{Foster Care basic rate (age 10)} \\ - & \underline{\$374} - \text{exempt MAP for AU of 1, Region 2} \\ & \$515 - \text{amount of ARC/GF due for month} \\ \div & \underline{30} - \text{number of days in April} \\ & \$17.17 - \text{daily rate} \\ \times & \underline{18} - \text{number of days eligible for ARC} \\ & \$309.06 - \text{prorated amount before rounding} \\ \\ & \$309 - \text{prorated amount after rounding} \end{aligned}$
Total Prorated Amount (Step P)	
$\begin{aligned} & \$224 - \text{prorated CalWORKs amount} \\ + & \underline{\$309} - \text{prorated ARC/GF amount} \\ & \mathbf{\$533} - \text{total amount due to the placement} \end{aligned}$	

Steps for Calculation of Proration Example #2:

First Placement:

To calculate the prorated ARC payment due to this placement:

1. The county should take the CalWORKs exempt MAP level for an AU of one (\$374 in Region 2) and divide it by 30 (number of days in the month of April), which results in the amount of \$12.47 per day.
2. This daily amount (\$12.47) should be multiplied by 12 (number of days eligible for the month of April), which results in the prorated amount of \$149.64.
3. This amount is rounded down to the nearest dollar (\$149). **This is the CalWORKs portion of the prorated payment.**
4. The county should then identify the ARC/SGF amount by taking the CalWORKs exempt MAP level for an AU of 1 (\$374) and subtracting it from the foster care rate under ARC (\$889), generating the ARC/SGF amount due to the case for an entire month (\$515).
5. This amount (\$515) should be divided by 30 (number of days in the month of April), which results in the amount of \$17.17 per day.
6. This daily amount (\$17.17) should then be multiplied by 12 (number of days eligible for the month of April), which results in the prorated amount of \$206.04 for the month of April.
7. This amount is rounded down to the nearest dollar (\$206). **This is the ARC/SGF portion of the prorated payment.**
8. The CalWORKs portion (\$149) and the ARC/SGF portion (\$206) are added together and the total amount (\$355) is issued to the first ARC placement.

Second Placement:

To calculate the prorated ARC payment due to this placement:

- A. The county should take the CalWORKs exempt MAP level for an AU of one (\$374 in Region 2) and divide it by 30 (number of days in the month of April), which results in the amount of \$12.47 per day.
- B. This daily amount (\$12.47) should be multiplied by 18 (number of days eligible for the month of April), which results in the prorated amount of \$224.46.
- C. This amount is rounded down to the nearest dollar (\$224). **This is the CalWORKs portion of the prorated payment.**
- D. The county should then identify the ARC/SGF amount by taking the CalWORKs exempt MAP level for an AU of 1 (\$374) and subtracting it from the foster care rate under ARC (\$889), generating the ARC/SGF amount due to the case for an entire month (\$515).
- E. This amount (\$515) should be divided by 30 (number of days in the month of April), which results in the amount of \$17.17 per day.

- F. This daily amount (\$17.17) should then be multiplied by 18 (number of days eligible for the month of April), which results in the prorated amount of \$309.06 for the month of April.
- G. This amount is rounded down to the nearest dollar (\$309). **This is the ARC/SGF portion of the prorated payment.**
- H. The CalWORKs portion (\$224) and the ARC/SGF portion (\$309) are added together and the total amount (\$533) is issued to the second ARC placement.

Claiming for Proration Example #2:

The combination of both total payment amounts (\$888 [\$355 from Step H and \$533 from Step P]) should be entered on the ARC claim on Line 2 (Current Month Supplemental Payroll) under aid code 2S. The combination of both total CalWORKs portions of the payment (\$373 [\$149 from Step C plus \$224 from Step K]) should be entered on Line 14 (CalWORKs Portion) under aid code 2S.

Overpayments (OP)

In the ARC Program, when a caregiver receives a payment for an amount or a time period for which the child was ineligible, an OP is created.

Below are examples of scenarios that establish OPs in the ARC Program:

- Child begins to receive SSI/SSP, SSA, or other income (earned or unearned), and the approved relative caregiver does not report it.
- Child's combined monthly income and resources/property total more than \$10,000, and the approved relative caregiver does not report it.
- Child has been absent from the placement for 15 or more cumulative days in any given month and the approved relative caregiver does not report it. However, the hospitalization of a child for any length of time will not establish an overpayment.

Note that an ARC child who receives unreported income and/or possesses unreported resources/property can potentially cause an OP in the ARC Program and affect claiming procedures. An OP established due to any income or benefit received by the child may only reduce the non-CalWORKs portion of the ARC payment (W&IC section 11461.3(c)). Non-income related OPs, such as those established by an absence from the placement, should offset all portions of the ARC payment (CalWORKs and ARC/SGF) in equal proportion. In addition, a child is eligible for a CalWORKs-funded portion of the ARC payment only if the child's combined monthly income and resources/property total no more than \$10,000.

Limitations on Collecting an OP: W&IC section 11461.3(d) requires counties to recoup OPs in the ARC Program using the standards and processes for recoupment of OPs to an approved home of a relative in the foster care program. In the foster care program, an identified OP may not be collected when:

- The cost of the collection exceeds that amount of the OP that is likely to be recovered by the county.
- The child was temporarily removed from the home and payment was owed to the provider to maintain the child's placement, or the child was temporarily absent from the provider's home, or on runaway status and subsequently returned, and payment was made to the provider to meet the child's needs.
- The OP was exclusively the result of a county administrative error or both the county welfare department and the provider or non-minor dependent were unaware of the information that would establish that the foster child or non-minor dependent was not eligible for foster care benefits.
- The provider or non-minor dependent did not have knowledge of, and did not contribute to, the cause of the OP.
- The provider timely reported information that reduced the benefit amount, but the county did not have sufficient time to adjust the amount before the payment was issued.

Therefore, there may be circumstances in which an OP has been identified, but the county is unable to collect the OP. For more information about recoupment of OPs in the foster care program, see [MPP Sections 45-304 and 45-305](#).

If an OP is not collectable, the county should not issue an NOA to the caregiver regarding the OP.

Recouping an ARC OP: OPs may be recouped by the following methods:

- Voluntary lump sum repayment
- Voluntary repayment agreement
- Voluntary grant offset

If the relative refuses to enter into, or comply with, a voluntary repayment agreement, then an involuntary repayment agreement can be used. The involuntary repayment agreement consists of either a grant offset or possible civil judgment. Grant adjustments are capped at ten percent of the monthly payment. Tax intercepts are not used in ARC.

For more information, see MPP Sections 45-304 and 45-305.

Child Support

CWDs are reminded that ARC cases can be exempt from child support cooperation requirements in accordance with [MPP Section 82-512](#). Because of funding sources and applicable requirements for those funding sources, cases falling under aid codes 2S and 2T are referable. **However, a child support referral to the LCSA is not needed if the CWD determines cooperation is not in the best interests of the child,**

including an increased risk of harm to the child or when cooperation would pose a barrier to family reunification efforts. If a case is referred, assignment and recoupment for the ARC payment will follow CalWORKs processes. Child support will be recoupable for the entire ARC payment (including the state general fund portion), with the exception of NMDs and non-MOE countable ARC children. For ARC cases that are referred for child support services, the first \$50 of child support collected is to be passed through to the approved relative caregiver and is disregarded (not counted) as income against the ARC payment, per W&IC section [11253.4\(a\)\(2\)\(D\)](#). The [CW 2.1NA](#), *Notice and Agreement for Child, Spousal and Medical Support* and the [CW 2.1Q](#), *Child Support Questionnaire* are required if a case is referred to an LCSA.

Tribal Children and ARC

Tribes do not participate in the ARC program in the same manner as counties. However, any Native American child who is under the jurisdiction of the juvenile court in a participating county, and who meets all of the ARC requirements, is eligible for ARC payments in the same way as any other child. Effective January 1, 2017, non-federally-eligible Native American children under the jurisdiction of the juvenile court in a non-participating county who are placed with approved relative caregivers will be eligible for a payment equal to the foster care rate under W&IC section 11253.45.

Wraparound Services

The ARC children are eligible to receive wraparound services, though these services may not be paid for with ARC funds. Claiming information associated with the provision of wraparound will be provided under separate cover.

Forms and Notices

The following forms, which are either new or have been revised, are to be used by counties in administering the ARC Program. The brochure which describes the ARC Program has also been revised.

The ARC 1 – ARC Determination: Is a revised application form, which counties must use to make the required determination of eligibility for ARC. The form has been revised to accommodate the new ARC 1A form (see below). On page 2 of the ARC 1 form is a new highlighted line which acknowledges receipt and understanding of the ARC 1A form. This line must be initialed by the applicant. The ARC 1 form is not complete, and should not be processed, if the ARC 1A acknowledgement is not initialed.

The ARC 1A – ARC Caregiver Rights and Responsibilities: Outlines the rights and responsibilities of approved relative caregivers of children who are receiving ARC benefits. This form should be disseminated to all current ARC caregivers as soon as feasible (for example, during monthly social worker visits). It should be given to a

prospective ARC caregiver along with the ARC 1 form, and the prospective caregiver should be reminded that he or she must acknowledge receipt of the ARC 1A form on the ARC 1 form.

The ARC 2 – ARC Redetermination: This form is based upon the foster care eligibility redetermination form (FC 2), but includes only those criteria relevant to redetermining ARC eligibility. This form must be signed by the caregiver; however, the child's social worker can complete the form if he or she is knowledgeable of the child's circumstances, and the ARC 2 form can be processed without the caregiver's signature if it contains all of the information required to redetermine eligibility.

The PUB 468 – ARC Brochure: A revised brochure (PUB 468) which provides general information to approved relative caregivers of children who may be eligible for benefits under the ARC Program.

Five NOA forms are also to be used in connection with the ARC program:

- NA 1277: ARC Program, Overpayment
- NA 1278: Approve ARC Payment
- NA 1279: Deny ARC Payment
- NA 1280: Discontinue ARC Payment
- NA 1281: Change in Amount of ARC Payment

These ARC NOA forms are to be used in conjunction with CalWORKs NOA messages M40-171D, M82-832E and M82-832F, which are described in ACL 15-54. These CalWORKs NOA messages were revised due to the implementation of the ARC Program.

The NA 1277 – ARC Program, Overpayment: For use when collecting an overpayment that occurred because a payment was made to an approved relative caregiver participating in the ARC Program when an eligible child was no longer placed with the caregiver. Counties must recoup these overpayments unless certain conditions exist (see the Overpayments section of this letter).

Foster care rules: For the purposes of collecting overpayments under the ARC Program, and as specified in W&IC sections 11461.3(d) and 11466.24, foster care rules apply. The overpayment rules and requirements in MPP sections 45-304, 45-305 and 45-306 should be followed.

Fraud: In addition to the proper collection and documentation of evidence supporting the issuance of the NA 1277, counties should consult with their county counsel on whether that evidence supports a determination that the approved relative caregiver engaged in fraudulent activities; and, if so, whether further actions in addition to overpayment collection, such as criminal prosecution, are warranted.

The NA 1278 – Approve ARC Payment: For use in approving cash aid under the ARC Program. This form includes related instructions about Medi-Cal and Cal-Fresh benefits.

The NA 1279 – Deny ARC Payment: For use in denying cash aid under the ARC Program, and indicating the reason(s) why the cash aid is being denied.

The NA 1280 – Discontinue ARC Payment: For use in discontinuing cash aid under the ARC Program, and indicating the reason(s) why the cash aid is being discontinued.

The NA 1281 – Change in Amount of ARC Payment: For use in changing the amount of cash aid under the ARC Program, and indicating the reason(s) why the amount of cash aid is being changed.

Camera-Ready Copies and Translations: For a camera-ready copy of the forms in English, contact the CDSS Forms Management Unit at fmudss@dss.ca.gov. If your office has internet access, you may obtain these forms from the CDSS webpage at <http://www.cdss.ca.gov/cdssweb/PG167.htm>.

When translations are completed, per MPP section 21-115.2, they are posted on an ongoing basis on the CDSS webpage. Copies of translated forms can be obtained at: http://www.dss.cahwnet.gov/cdssweb/FormsandPu_274.htm.

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

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

Glossary

ACIN – All County Information Notice
ACL – All County Letter
AFDC-FC – Aid to Families with Dependent Children—Foster Care
ARC – Approved Relative Caregiver (Program)
AU – assistance unit
CalWORKs – California Work Opportunity and Responsibility to Kids (Program)
CCR – Continuum of Care Reform
CFL – County Fiscal Letter
CNI – California Necessities Index
CWDA – County Welfare Directors Association (of California)
HBFC – home-based foster care
ICT – inter-county transfer
LCSA – local child support agency
LOC – level of care
LRF – Local Revenue Fund
MAP – maximum aid payment
MOE – maintenance of effort
MPP – Manual of Policies and Procedures
NMD – nonminor dependent
NOA – Notice of Action
NREFM – nonrelative extended family member
OP – overpayment
RFA – Resource Family Approval (Program)
SCI – Specialized Care Increment
SGF – State General Fund
SSA – Social Security Administration (benefits)
SSI/SSP – Supplemental Security Income/State Supplementary Payment
WIC – Welfare and Institutions Code

Attachment B ARC Implementation History

A county that elected to participate in the ARC Program was required to notify CDSS in writing of its decision on or before October 1, 2014, unless CDSS determined that good cause existed to extend the deadline pursuant to WIC section 11461.3(c)(1). County participation would be effective January 1, 2015.

For the initial year of the ARC Program, CDSS determined that good cause existed for extending the October 1, 2014, deadline for counties to elect to participate in the program. The revised deadline(s)—for calendar-year 2015 only—was the first day of any month starting December 1, 2014 until March 1, 2015, with participation in the county to commence at the start of the month following notification. For example, if a county notified CDSS on January 1, 2015, that it wished to participate in the ARC Program, county participation would have commenced on February 1, 2015.

The new deadlines gave CDSS more time to provide implementation instructions for the ARC Program and the counties more time to evaluate all available information before deciding whether to participate. In the interim, counties submitted non-binding letters of interest to CDSS.

SGF Appropriation and Base Caseload Amount: As part of SB 855, the Legislature made a \$30 million appropriation from the SGF for the ARC Program for the period of January 1, 2015 through December 31, 2015. This was an ongoing appropriation that is adjusted annually by the CNI. The Legislature intended this appropriation to fully fund the base caseload of approved relative caregivers as of July 1, 2014, subject to the “true-up” process described below. Funds from this appropriation were distributed to counties participating in the ARC Program via county-specific allocations using the methodology described below. The \$30 million appropriation from the SGF was not part of the 2011 Realignment. Thus, a county that opted in to the ARC Program received its full allocation of 2011 realignment funds in addition to its share of ARC funds. Further, Title IV-E California Well-Being Project counties (waiver counties) were able to participate in the ARC Program as long as their cases were not eligible for federal Title IV-E or state AFDC-FC foster care funds and the county had opted in. Waiver counties that opted in to the ARC Program received their normal allocation of federal waiver dollars. CalWORKs and state general funds associated with the ARC Program were provided as a non-waiver allocation.

Required/Requested County Data: To accurately determine whether the \$30 million state general fund base ARC funding amount needed to be adjusted on or before October 1, 2015, it was necessary to obtain caseload data as of July 1, 2014 for all counties, regardless of whether a county was opting in or not. This ensured adequate funding for the ARC Program. To aid in this effort, CDSS developed a template for capturing county caseload data that all opt-in counties were required to complete and return to CDSS. Counties that did not elect to participate in the ARC Program for calendar year 2015 were also asked to complete and return the template to CDSS. Even if a county did not opt in in 2015, it may want to opt in to the program in a subsequent year. Thus, it was in the best interests of all counties to submit county

caseload data to CDSS. Numerous inquiries were received by CDSS about how the data submitted by the counties would be reviewed and utilized. The data provided by counties was compared with state data, and variances were discussed and resolved based on agreements reached between CWDA, the counties and CDSS.

One-Time Opportunity to Adjust State General Fund Appropriation (“True-Up”): A one-time opportunity was provided by SB 855 to ensure that the ongoing SGF appropriation for the ARC Program was sufficient to fund the base caseload of approved relative caregivers as of July 1, 2014. This process was called the “true-up.” The true-up was scheduled in law to occur on or before October 1, 2015. To the extent that the SGF appropriation was found to be insufficient to fund the base caseload—as jointly determined by CDSS and CWDA, and as approved by the California Department of Finance—the amount of the ongoing SGF appropriation would have been increased pursuant to WIC section 11461.3(e)(1)(B). Such an increase would have been made retroactively for all counties that participated in the ARC Program in calendar year 2015 and prospectively for all participating counties in the future. However, the true-up data did not result in any adjustment to the appropriation (i.e., the initial \$30 million figure was found to be sufficient to fully fund the actual caseloads of all counties).

There will be no further adjustments to the SGF appropriation for the ARC Program, except for the annual CNI adjustment specified in statute. New legislation would be required to increase or decrease the amount of the appropriation.

Retroactivity Option: CWDs were given the option to make retroactive payments back to January 1, 2015, provided the CWD implemented the ARC Program prior to July 1, 2015 and informed the California Department of Social Services of their decision no later than September 30, 2015. An approved relative caregiver was eligible to receive retroactive payments for an eligible child who was currently placed with the approved relative caregiver when a completed and signed ARC application was received by the CWD on or before September 30, 2015. Approved relative caregivers only received retroactive payments for the months the child was placed with them. Retroactive payments were not issued after December 31, 2015.

How Far Back in Time Did Retroactivity Apply? Counties which chose to make retroactive ARC payments were required to make retroactive payments only to eligible children from the date of January 1, 2015, or the earliest date the child met all ARC eligibility requirements, whichever was later. For example, if a child did not meet all ARC eligibility requirements until March 1, 2015, the retroactive ARC payments for the child were paid back only to March 1, 2015. Conversely, if a child met all ARC eligibility requirements on November 1, 2014, the retroactive payments for the child were paid back to January 1, 2015, the effective date of the ARC Program.

Retroactive Payments Versus Back Payments: Issuing retroactive payments is distinct from issuing back ARC payments to eligible children. Retroactive payments were intended to bridge the possible payment gap created between January 1, 2015

and the county's ARC program implementation date, provided the county implemented ARC prior to July 1, 2015. Back payments were intended to bridge the payment gap between the county's implementation date and the date the county actually issued ARC payments. For example, a county that implemented the ARC program effective June 1, 2015 but was not able to issue payments until August 10, 2015 was obligated to make back payments to eligible children for June and July. This requirement to issue back ARC payments existed whether or not a county opted to make retroactive payments.

CalWORKs Eligibility: Retroactive ARC payments were not contingent upon a child's eligibility for CalWORKs. Retroactive ARC payments consisted entirely of ARC state general funds. (CalWORKs cannot be paid retroactively.) However, if an eligible child was already receiving CalWORKs at the time of application to the ARC Program, the CalWORKs amount that the child was already receiving was deducted from any retroactive ARC payments to ensure that the CalWORKs AU was not overpaid.

Outreach: Counties were offered several ways for relative caregivers to be informed about the ARC Program, as follows:

- Educational brochure. To assist with county outreach efforts, PUB 468 was prepared as an informational brochure for relative caregivers.
- Monthly visits. Upon initial implementation of the ARC Program, social workers were encouraged to discuss the ARC Program with approved relative caregivers, and to give them copies of the brochure and the ARC Program application, during monthly social worker visits. Social workers were also encouraged to assist approved relative caregivers with filling out the application, providing information already gathered in the AFDC-FC determination process.
- Prospective relative caregivers and newly eligible children. For this population, information about the ARC Program should be incorporated into the normal procedures that counties follow when prospective relative caregivers receive orientations and related children in foster care are initially evaluated to determine which funding source is the most appropriate for them.
- Other avenues. Counties may wish to distribute copies of the aforementioned brochure and ARC Program application to local organizations that provide kinship services. Advocacy or caregiver newsletters and websites may be other avenues to explore to spread the word about the ARC Program.

While there was no requirement for counties to notify relative caregivers about the ARC Program prior to its implementation, counties interested in participating in the program were encouraged to let local relative caregivers know about it as soon as possible.

5. Does the child/youth get or expect to get any income, such as: Earnings, Supplemental Security Income/State Supplementary Payment (SSI/SSP), Social Security Benefits, Child Support, Veterans Benefits, etc. YES NO Verification provided
 I DON'T KNOW

If "YES," complete below:

TYPE OF INCOME	AMOUNT (before deductions, if any)	WHEN	HOW OFTEN
	\$		

Will this income continue? YES NO
 If "NO," explain any known changes: I DON'T KNOW

Income:
 Earned _____
 Unearned _____
 Exempt _____
 FC 2 _____

6. Does the child/youth own any property or have resources, such as: cash, land, vehicle, motorcycle, bank accounts, trust funds, savings bonds, Native American per capita payments or trust funds, or other items? YES NO Verification provided
 I DON'T KNOW

If "YES," complete below:

TYPE OF RESOURCE	ACCOUNT/POLICY NUMBER	NAME, ADDRESS OF BANK, ETC.	CURRENT VALUE
			\$
			\$

Total: _____

_____ I have received and understand the Rights and Responsibilities (ARC 1A) document.
 Initial here

CERTIFICATION

I understand that:

- I understand that giving false or misleading statements or misrepresenting, hiding or withholding facts to establish eligibility is fraud and that I may be subject to penalties under state and federal law if I provide false or untrue information. Fraud can cause a criminal case to be filed against me and/or I may be barred for a period of time (or life) from getting ARC benefits.
- I understand that Social Security Numbers or Immigration Status for household members applying for benefits may be shared with the appropriate government agencies as required by federal law.

I declare under penalty of perjury under the laws of the State of California that the information contained on this Statement of Facts is true, correct, and complete to the best of my knowledge.

SIGNATURE OF APPROVED RELATIVE CAREGIVER	DATE
---	-------------

COUNTY USE ONLY

<input type="checkbox"/> INELIGIBLE (Reason)	NOTES:
<input type="checkbox"/> ELIGIBLE Payment Authorization Date:	
<input type="checkbox"/> CalWORKs Eligible <input type="checkbox"/> ARC-only Eligible	
Signature of County Worker Date	
Signature of Supervisor Date	

RIGHTS, RESPONSIBILITIES AND OTHER IMPORTANT INFORMATION

For the Approved Relative Caregiver Funding Option Program (ARC)

These pages give you your rights and responsibilities and other important information. The county needs your facts and the child's facts to see if the child is eligible for ARC benefits. If you need more information or have questions, ask your child's social worker.

YOUR RIGHTS

1. To be treated equally without regard to race, color, national origin, religion, political affiliation, marital status, gender identity, disability, or age. You may file a complaint if you feel you or the child has been discriminated against, by first speaking with your county's designated civil rights representative or by writing to:

State Civil Rights Bureau
744 P Street, MS 8-16-70
Sacramento, CA 95814

or by calling collect (916) 654-2107 or for the hearing impaired via the California Relay Service operator at (800) 735-2929.
2. To ask for help to complete the application.
3. To ask for forms and notices to be translated if you don't read English.
4. To be treated with courtesy, consideration and respect.
5. To have eligibility determined promptly.
6. To discuss the child's case with the county and to review the child's case yourself when you request to do so.
7. To ask for additional money if the child's income drops or stops.
8. To be notified in writing when the application is approved, denied, or when the child's benefits change or stop.
9. To have the child's records kept confidential by the county and state, unless otherwise provided by law.
10. To talk with someone from the county or file a formal complaint with the state if you don't agree with an action taken by the county.
11. To ask for a State Hearing within 90 days of the county's action.
12. To ask for a State Hearing, you can write to your county, or call the State toll-free at (866)-741-6241.
13. To be represented at a State hearing by yourself, a household member, friend, attorney, or other person of your choice. NOTE: You may get free legal help at your local legal aid office or welfare rights group

YOUR RESPONSIBILITIES

Social Security Number (SSN) Rules

SSNs will be used in a computer match to check income and resources with records from tax, welfare, employment, the Social Security Administration and other agencies. Differences may be checked out with employers, banks or others. Making false statements or failing to report all facts or situations which affect eligibility and aid payments may result in repayment of benefits and/or criminal or civil action.

Cooperation

To cooperate with county, state and federal staff. A county worker can come to your home at any time to check out your facts, including seeing each family member, without calling ahead of time. The child may not get benefits or your benefits may be stopped if you don't cooperate.

Citizenship/Immigration Status

To sign under penalty of perjury that the child applying for ARC benefits is a U.S. citizen, U.S. national, or has lawful immigration status. We will check the immigration status information with the U.S. Citizenship and Immigration Services (USCIS) to be sure the child is eligible.

Child and Medical Support

To cooperate with the county and the Local Child Support Agency to:

- identify and locate any absent parent in your case;
- tell the county or the Local Child Support Agency anytime you get information about the absent parent, such as place of residence or work location;
- determine the paternity of any child in your case when needed;
- get medical support money from any absent parent and, get child support money;
- give the Local Child Support Agency any medical support money and, any child support money the child gets;
- tell the county about medical coverage or money for the medical services paid by either parent.

YOUR REPORTING RESPONSIBILITIES

You must report all changes related to the child to the county. If you're not sure how to report changes, what changes to report, or what proof we need, ask your child's social worker.

WHEN YOU MUST REPORT

You must report when:

1. The child gets money (including lump sums) from work, relatives, Social Security, Unemployment Insurance Benefits (UIB), Veterans benefits, tax refunds, accident or injury settlements, or any other source.
2. The child gets medical support money.
3. The child's job or training program changes.
4. The child's income or source of income changes, starts, or stops, including self-employment.
5. You and/or the child move to another address, plan to move (including out of state), or get a new mailing address. If you move to another county and you want to keep getting benefits, you must tell the county giving you aid and/or benefits.
6. The child gets payments or allowances for job, training, or school expenses, such as educational grants and loans, transportation to and from job or training, etc.
7. The child gets, sells, gives away or transfers real property, such as a home, buildings or land; or business or personal property, such as money, a bank account, a motor vehicle, a boat, a trust fund, etc.
8. The child's parent(s) move into the home.
9. The child's citizenship/immigration status changes.

OTHER IMPORTANT INFORMATION

Independent Living Program (ILP)

When the child reaches age 16, the child is eligible for ILP. ILP provides life skills education and services to foster youth age 16 or older. Please contact the county ILP Coordinator for assistance.

Income Disregards

If the child is participating in ILP, any income earned as part of the program is exempt. When the child has income other than ILP, the child may be eligible for other income deductions. NOTE: This income must still be reported.

AVAILABLE SERVICES

Women, Infants and Children (WIC) Supplemental Nutrition Program

The WIC Program is only for pregnant and breast feeding women, infants, and children under age 5, who are at medical-nutritional risk. For more facts about WIC, call your local county health department or the phone number for "WIC" in the telephone book.

Other Benefits

You or any one in your household may apply for any other benefit program such as CalWORKs, CalFresh, Medi-Cal, Adoptions Assistance Payment Program, In-Home Supportive Services, etc.

I understand that giving false or misleading statements or misrepresenting, hiding or withholding facts to establish eligibility is fraud and that I may be subject to penalties under state and federal law if I provide false or untrue information. Fraud can cause a criminal case to be filed against me and/or I may be barred for a period of time (or life) from getting ARC benefits.

REDETERMINATION: STATEMENT OF FACTS SUPPORTING ELIGIBILITY FOR THE APPROVED RELATIVE CAREGIVER (ARC) FUNDING OPTION PROGRAM		COUNTY USE ONLY																								
INSTRUCTIONS: Please complete in ink all of the questions to the left of the heavy black line. If you need more space, attach another sheet of paper. Fill out this form for each participating child/youth. (This form, the ARC 2, is for redetermination. To apply for the ARC Program, complete the ARC 1 form.)		COUNTY AND AGENCY																								
		DATE RECEIVED																								
1. Approved Relative Caregiver's Name		CASE NAME																								
Phone () Birthdate (Month, Day, Year)		CASE NUMBER																								
Social Security Number		WORKER NAME AND NUMBER <input type="checkbox"/> Verification of property: _____ <input type="checkbox"/> Verification of income: _____ <input type="checkbox"/> Verification provided <input type="checkbox"/> Exempt																								
2. Child/Youth's Name (First, Middle, Last)																										
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female																										
Address																										
Birthdate (Month, Day, Year)	Birthplace (City, State, Country)																									
Social Security Number																										
Relationship to Approved Relative Caregiver																										
3. Does the child/youth still live with you? <input type="checkbox"/> YES <input type="checkbox"/> NO																										
4. Does the child/youth have, or expect to have, any new property? <input type="checkbox"/> YES <input type="checkbox"/> NO If "YES," list below:	5. Did the child's/youth's income change or is it expected to change? <input type="checkbox"/> YES <input type="checkbox"/> NO If "YES," please list below:																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">PROPERTY TYPE</th> <th style="width: 30%;">VALUE</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	PROPERTY TYPE	VALUE											<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">TYPE</th> <th style="width: 33%;">AMOUNT</th> <th style="width: 33%;">WHEN</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> Will this income continue? <input type="checkbox"/> YES <input type="checkbox"/> NO Please explain:	TYPE	AMOUNT	WHEN										
PROPERTY TYPE	VALUE																									
TYPE	AMOUNT	WHEN																								
CERTIFICATION																										
I understand that: <ul style="list-style-type: none"> I understand that giving false or misleading statements or misrepresenting, hiding or withholding facts to establish eligibility is fraud and that I may be subject to penalties under state and federal law if I provide false or untrue information. Fraud can cause a criminal case to be filed against me and/or I may be barred for a period of time (or life) from getting ARC benefits. I understand that Social Security Numbers or Immigration Status for household members applying for benefits may be shared with the appropriate government agencies as required by federal law. 																										
I declare under penalty of perjury under the laws of the State of California that the information contained on this Statement of Facts is true, correct, and complete to the best of my knowledge.																										
SIGNATURE OF APPROVED RELATIVE CAREGIVER		DATE																								
COUNTY USE ONLY																										
<input type="checkbox"/> INELIGIBLE AT REDETERMINATION (Reason)																										
<input type="checkbox"/> ELIGIBLE AT REDETERMINATION <input type="checkbox"/> CalWORKs Eligible <input type="checkbox"/> ARC-only Eligible (Explain any eligibility changes, such as no longer CalWORKs eligible but still ARC eligible.)		Eligibility Redetermination Date:																								
Signature of County Worker		Date																								
Signature of Supervisor		Date																								

INFORMATION FOR APPROVED CAREGIVERS

If you are an approved relative caregiver of a foster child, or want to become one, you may be eligible to receive funds under a program called the Approved Relative Caregiver (ARC) Program.¹ Under this program, an approved relative caregiver with whom an eligible child is placed will be able to receive a payment equal to the basic foster care rate.

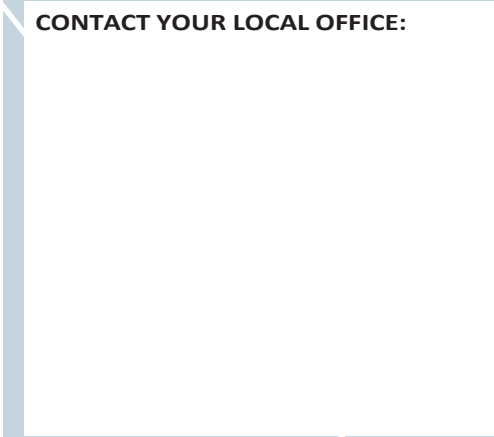
Participation in the ARC program is optional for counties. Talk to your social worker or contact your local child welfare office to find out if your county is participating in the ARC program.

¹SB 855 added ARC Funding Option Program provisions to Section 11461.3 of the Welfare and Institutions Code.

State of California
Health and Human Services Agency
Department of Social Services

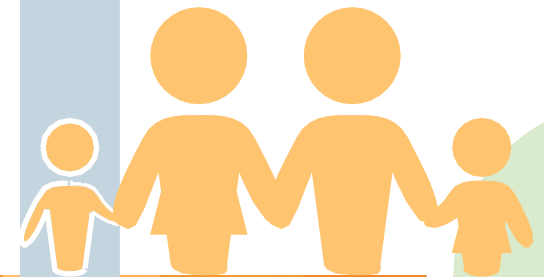


CONTACT YOUR LOCAL OFFICE:

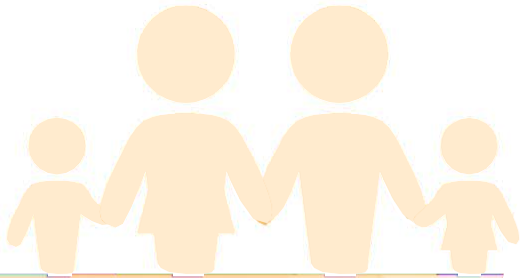


PUB 468 10/16

APPROVED RELATIVE CAREGIVER FUNDING OPTION PROGRAM



INFORMATION FOR APPROVED CAREGIVERS



HOW MUCH IS A PER-CHILD, PER-MONTH ARC PAYMENT?

The payment is the same as the basic foster care rate. Due to cost-of-living increases, this rate can vary from year to year. Contact your social worker or your local child welfare office for more information.

MEDI-CAL ELIGIBILITY?

Yes, a child is eligible for Medi-Cal under the ARC Program.

HOW DOES A CHILD QUALIFY FOR THIS PROGRAM?

A child must meet all the following criteria:

- Be a dependent or ward of the California juvenile court, or be placed under a voluntary placement agreement.
- Live in California and be placed with an approved relative caregiver.
- Be ineligible for federally funded foster care benefits (your eligibility worker may be able to help you determine this).

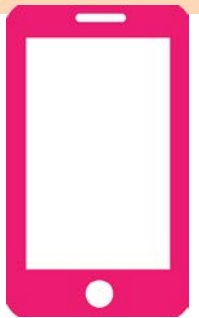
In addition, an ARC Program Application must be completed for each child, even if the child is already receiving CalWORKs. Please contact the child's social worker for more information.

HOW DO RELATIVE CAREGIVERS QUALIFY FOR THE PROGRAM?

To qualify for participation in the ARC Funding Option Program, relative caregivers must reside in California and be "approved" by the county.

SO...WHAT DO I DO NOW?

For more information, talk to your social worker or contact your local child welfare office.



CONTACT YOUR LOCAL OFFICE:

NOTICE OF ACTION
APPROVED RELATIVE CAREGIVER (ARC)
OVERPAYMENT

COUNTY OF _____

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

Notice Date: _____

Case Name: _____

Case Worker Number: _____

Case Worker Name: _____

Case Number: _____

Telephone: _____

Address: _____

(ADDRESSEE)

┌
└

For Approved Relative Caregivers participating in the
Approved Relative Caregiver Funding Option Program
(ARC Program):

This is to inform you that you were overpaid ARC Program benefits
for _____

(NAME OF CHILD)

for the month(s) of _____ to _____

(MM/DD/YYYY)

(MM/DD/YYYY)

Total amount you received: \$ _____

Total amount you should have received: \$ _____

Total amount of Overpayment: \$ _____

Date of Discovery: _____

(MM/DD/YYYY)

(Collection is permitted if demand is made within one year
of discovery.)

You are required to repay the overpayment
amount of \$ _____.

Reason for the overpayment:

From _____ (date) the child/youth was not
residing in your home, and you failed to report that to your
county social worker and you received payments for him/her
that you were not entitled to.

Other: _____

By law, we can collect ARC Program overpayments if the approved
relative caregiver caused the overpayment. We cannot require you
to repay the overpayment if you meet an **exception**. Exceptions to
repayment are:

- The overpayment was caused by county administrative error,
OR
- Neither the county nor the approved relative caregiver knew of
or contributed to the cause of the overpayment.
- The minor's absence was temporary and the funds were used
to maintain the home for his/her return or used to support
his/her needs.

If you disagree with the reason for the overpayment or the
amount of the overpayment, you may request a hearing. Please
see the following page for hearing instructions.

If you agree with the reason for the overpayment and the amount of
the overpayment, you must do **one of the following** within 90
calendar days from the day the county gave or mailed you this
notice:

- 1) Make a one-time payment of the total amount.

Please pay by check or money order, made payable to:

Send to:

- 2) Sign a written repayment agreement. You must contact the
worker at the top of this form to discuss the terms of a written
payment agreement..

If you have any questions regarding the overpayment computation
or repayment arrangements, please contact the case worker at the
top of this form.

Relevant Law: Welfare and Institutions Code sections 11461.3
and 11466.24; MPP sections 22-009, 45-304, 45-305, and 45-306.

Insert overpayment calculations and substantiation of time
periods by month as required in regulation. See Manual of
Policies and Procedures (MPP) section 45-305. Attach a page if
additional space is needed.

YOUR HEARING RIGHTS

You have the right to ask for a hearing if you disagree with any county action. You have only 90 days to ask for a hearing. The 90 days started the day after the county gave or mailed you this notice. If you have good cause as to why you were not able to file for a hearing within the 90 days, you may still file for a hearing. If you provide good cause, a hearing may still be scheduled.

If you ask for a hearing **before** an action on Cash Aid, Medi-Cal, CalFresh, or Child Care takes place:

- Your Cash Aid or Medi-Cal will stay the same while you wait for a hearing.
- Your Child Care Services may stay the same while you wait for a hearing.
- Your CalFresh benefits will stay the same until the hearing or the end of your certification period, whichever is earlier.

If the hearing decision says we are right, you will owe us for any extra Cash Aid, CalFresh or Child Care Services you got. To let us lower or stop your benefits before the hearing, check below:

Yes, lower or stop: Cash Aid CalFresh
 Child Care

While You Wait for a Hearing Decision for:

Welfare to Work:

You do not have to take part in the activities.

You may receive child care payments for employment and for activities approved by the county before this notice.

If we told you your other supportive services payments will stop, you will not get any more payments, even if you go to your activity.

If we told you we will pay your other supportive services, they will be paid in the amount and in the way we told you in this notice.

- To get those supportive services, you must go to the activity the county told you to attend.
- If the amount of supportive services the county pays while you wait for a hearing decision is not enough to allow you to participate, you can stop going to the activity.

Cal-Learn:

- You cannot participate in the Cal-Learn Program if we told you we cannot serve you.
- We will only pay for Cal-Learn supportive services for an approved activity.

OTHER INFORMATION

Medi-Cal Managed Care Plan Members: The action on this notice may stop you from getting services from your managed care health plan. You may wish to contact your health plan membership services if you have questions.

Child and/or Medical Support: The local child support agency will help collect support at no cost even if you are not on cash aid. If they now collect support for you, they will keep doing so unless you tell them in writing to stop. They will send you current support money collected but will keep past due money collected that is owed to the county.

Family Planning: Your welfare office will give you information when you ask for it.

Hearing File: If you ask for a hearing, the State Hearing Division will set up a file. You have the right to see this file before your hearing and to get a copy of the county's written position on your case at least two days before the hearing. The state may give your hearing file to the Welfare Department and the U.S. Departments of Health and Human Services and Agriculture. **(W&I Code Sections 10850 and 10950.)**

TO ASK FOR A HEARING:

- Fill out this page.
- Make a copy of the front and back of this page for your records. If you ask, your worker will get you a copy of this page.
- Send or take this page to:

OR

- Call toll free: 1-800-952-5253 or for hearing or speech impaired who use TDD, 1-800-952-8349.

To Get Help: You can ask about your hearing rights or for a legal aid referral at the toll-free state phone numbers listed above. You may get free legal help at your local legal aid or welfare rights office.

If you do not want to go to the hearing alone, you can bring a friend or someone with you.

HEARING REQUEST

I want a hearing due to an action by the Welfare Department of _____ County about my:

Cash Aid CalFresh Medi-Cal

Other (list) _____

Here's Why: _____

If you need more space, check here and add a page.

I need the state to provide me with an interpreter at no cost to me. (A relative or friend cannot interpret for you at the hearing.)

My language or dialect is: _____

NAME OF PERSON WHOSE BENEFITS WERE DENIED, CHANGED OR STOPPED _____

BIRTH DATE _____	PHONE NUMBER _____
------------------	--------------------

STREET ADDRESS _____

CITY _____	STATE _____	ZIP CODE _____
------------	-------------	----------------

SIGNATURE _____	DATE _____
-----------------	------------

NAME OF PERSON COMPLETING THIS FORM _____	PHONE NUMBER _____
---	--------------------

I want the person named below to represent me at this hearing. I give my permission for this person to see my records or go to the hearing for me. (This person can be a friend or relative but cannot interpret for you.)

NAME _____	PHONE NUMBER _____
------------	--------------------

STREET ADDRESS _____

CITY _____	STATE _____	ZIP CODE _____
------------	-------------	----------------

**NOTICE OF ACTION - APPROVE
APPROVED RELATIVE
CAREGIVER (ARC) PAYMENT**

Notice Date : _____
Case Name : _____
Number : _____
Worker Name : _____
Number : _____
Telephone : _____
Address : _____

(ADDRESSEE)

[]

Questions? Ask your Worker.

**For Approved Relative Caregivers participating in the
Approved Relative Caregiver Funding Option Program
(ARC Program):**

The County has approved your application, dated _____,
MM/DD/YYYY
for cash aid for _____ under
NAME OF CHILD
the ARC Program. The cash aid payment for your first month of aid
is \$ _____. Your first day of cash aid is _____.
MM/DD/YYYY

The cash aid payment for your first month of aid may only be for a
part of the month. It is for the time from your first day of cash aid,
shown above, through the end of the month. If nothing changes,
your ongoing monthly cash aid amount will be \$ _____.

This cash aid will be issued via:

A check mailed to you; or

Direct deposit

EBT: Keep your EBT card if you use EBT, even if your aid is
terminated. Please do not throw your card away. If your ARC cash
aid will be issued on a new EBT card, you will receive the new EBT
card within 10 business days for this case. If your family currently
receives CalWORKs or other benefits on an EBT card, and the
child's county of court jurisdiction is the same as the child's county
of residence, the child's ARC payments will be consolidated onto
the family's existing EBT card. If the child is a non-minor
dependent, he/she will receive his/her own EBT card.

Medi-Cal: This notice DOES NOT change or stop Medi-Cal
benefits. Keep using your plastic Benefits Identification Card(s).
You will get another notice telling you about any changes to your
health benefits.

CalFresh: This notice DOES NOT stop or change your CalFresh
benefits. You will get a separate notice telling you about any
changes to your CalFresh benefits.

Rules: These rules apply. You may review them at your county
welfare office: Welfare and Institutions Code section 11461.3,
Senate Bill 855 (Chapter 29, Statutes of 2014); Section 58 of
Chapter 20 of the Statutes of 2015; All County Information Notice
I-42-14; All County Letters 14-89, 15-20, 15-20-E, 15-83, and 16-92;
and County Fiscal Letters 14-15-45, 14-15-52, 14-15-58, 15-16-07,
and 15-16-24.

YOUR HEARING RIGHTS

You have the right to ask for a hearing if you disagree with any county action. You have only 90 days to ask for a hearing. The 90 days started the day after the county gave or mailed you this notice. If you have good cause as to why you were not able to file for a hearing within the 90 days, you may still file for a hearing. If you provide good cause, a hearing may still be scheduled.

If you ask for a hearing **before** an action on Cash Aid, Medi-Cal, CalFresh, or Child Care takes place:

- Your Cash Aid or Medi-Cal will stay the same while you wait for a hearing.
- Your Child Care Services may stay the same while you wait for a hearing.
- Your CalFresh benefits will stay the same until the hearing or the end of your certification period, whichever is earlier.

If the hearing decision says we are right, you will owe us for any extra Cash Aid, CalFresh or Child Care Services you got. To let us lower or stop your benefits before the hearing, check below:

Yes, lower or stop: Cash Aid CalFresh
 Child Care

While You Wait for a Hearing Decision for:

Welfare to Work:

You do not have to take part in the activities.

You may receive child care payments for employment and for activities approved by the county before this notice.

If we told you your other supportive services payments will stop, you will not get any more payments, even if you go to your activity.

If we told you we will pay your other supportive services, they will be paid in the amount and in the way we told you in this notice.

- To get those supportive services, you must go to the activity the county told you to attend.
- If the amount of supportive services the county pays while you wait for a hearing decision is not enough to allow you to participate, you can stop going to the activity.

Cal-Learn:

- You cannot participate in the Cal-Learn Program if we told you we cannot serve you.
- We will only pay for Cal-Learn supportive services for an approved activity.

OTHER INFORMATION

Medi-Cal Managed Care Plan Members: The action on this notice may stop you from getting services from your managed care health plan. You may wish to contact your health plan membership services if you have questions.

Child and/or Medical Support: The local child support agency will help collect support at no cost even if you are not on cash aid. If they now collect support for you, they will keep doing so unless you tell them in writing to stop. They will send you current support money collected but will keep past due money collected that is owed to the county.

Family Planning: Your welfare office will give you information when you ask for it.

Hearing File: If you ask for a hearing, the State Hearing Division will set up a file. You have the right to see this file before your hearing and to get a copy of the county's written position on your case at least two days before the hearing. The state may give your hearing file to the Welfare Department and the U.S. Departments of Health and Human Services and Agriculture. **(W&I Code Sections 10850 and 10950.)**

TO ASK FOR A HEARING:

- Fill out this page.
- Make a copy of the front and back of this page for your records. If you ask, your worker will get you a copy of this page.
- Send or take this page to:

OR

- Call toll free: 1-800-952-5253 or for hearing or speech impaired who use TDD, 1-800-952-8349.

To Get Help: You can ask about your hearing rights or for a legal aid referral at the toll-free state phone numbers listed above. You may get free legal help at your local legal aid or welfare rights office.

If you do not want to go to the hearing alone, you can bring a friend or someone with you.

HEARING REQUEST

I want a hearing due to an action by the Welfare Department of _____ County about my:

Cash Aid CalFresh Medi-Cal
 Other (list) _____

Here's Why: _____

If you need more space, check here and add a page.

I need the state to provide me with an interpreter at no cost to me. (A relative or friend cannot interpret for you at the hearing.)

My language or dialect is: _____

NAME OF PERSON WHOSE BENEFITS WERE DENIED, CHANGED OR STOPPED _____

BIRTH DATE _____ PHONE NUMBER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

SIGNATURE _____ DATE _____

NAME OF PERSON COMPLETING THIS FORM _____ PHONE NUMBER _____

I want the person named below to represent me at this hearing. I give my permission for this person to see my records or go to the hearing for me. (This person can be a friend or relative but cannot interpret for you.)

NAME _____ PHONE NUMBER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

**NOTICE OF ACTION - DENY
APPROVED RELATIVE CAREGIVER
(ARC) PAYMENT**

Notice Date: _____
Case Name: _____
Number : _____
Worker Name: _____
Number: _____
Telephone: _____
Address: _____

(ADDRESSEE)

[]
[]

Questions? Ask your Worker.

State Hearing: If you think this action is wrong, you can ask for a hearing. Your benefits may not be changed if you ask for a hearing before this action takes place. If you and the county disagree or if you have not heard back from your worker, do not wait to ask for a hearing. You must ask for the hearing before a certain number of days. See the back of this notice for more information and to find out how to ask for a hearing.

**For Approved Relative Caregivers participating in the
Approved Relative Caregiver Funding Option Program
(ARC Program):**

The County has denied your application, dated _____, for
cash aid _____ MM/DD/YYYY
for _____ under the ARC Program.
NAME OF CHILD

Here's why:

You are not eligible for cash aid under the ARC Program for one or more of the following reasons:

Your home was not approved, and you received a Notice of Action—Denial of Home Assessment/Approval (NA 1271) from the County explaining why.

The child is not under the jurisdiction of the California juvenile court.

You do not live in California.

The child does not live in California.

The child is federally eligible under Title IV-E of the Social Security Act and qualifies for foster care funds (rather than ARC funds).

The child is not eligible because of age.

Other _____.

Rules: These rules apply. You may review them at your county welfare office: Welfare and Institutions Code section 11461.3, Senate Bill 855 (Chapter 29, Statutes of 2014); Section 58 of Chapter 20 of the Statutes of 2015; All County Information Notice I-42-14; All County Letters 14-89, 15-20, 15-20-E, 15-83, and 16-92; and County Fiscal Letters 14-15-45, 14-15-52, 14-15-58, 15-16-07, and 15-16-24.

YOUR HEARING RIGHTS

You have the right to ask for a hearing if you disagree with any county action. You have only 90 days to ask for a hearing. The 90 days started the day after the county gave or mailed you this notice. If you have good cause as to why you were not able to file for a hearing within the 90 days, you may still file for a hearing. If you provide good cause, a hearing may still be scheduled.

If you ask for a hearing before an action on Cash Aid, Medi-Cal, CalFresh, or Child Care takes place:

- Your Cash Aid or Medi-Cal will stay the same while you wait for a hearing.
- Your Child Care Services may stay the same while you wait for a hearing.
- Your CalFresh benefits will stay the same until the hearing or the end of your certification period, whichever is earlier.

If the hearing decision says we are right, you will owe us for any extra Cash Aid, CalFresh or Child Care Services you got. To let us lower or stop your benefits before the hearing, check below:

Yes, lower or stop: Cash Aid CalFresh
 Child Care

While You Wait for a Hearing Decision for:

Welfare to Work:

You do not have to take part in the activities.

You may receive child care payments for employment and for activities approved by the county before this notice.

If we told you your other supportive services payments will stop, you will not get any more payments, even if you go to your activity.

If we told you we will pay your other supportive services, they will be paid in the amount and in the way we told you in this notice.

- To get those supportive services, you must go to the activity the county told you to attend.
- If the amount of supportive services the county pays while you wait for a hearing decision is not enough to allow you to participate, you can stop going to the activity.

Cal-Learn:

- You cannot participate in the Cal-Learn Program if we told you we cannot serve you.
- We will only pay for Cal-Learn supportive services for an approved activity.

OTHER INFORMATION

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NAME OF PERSON WHOSE BENEFITS WERE DENIED, CHANGED OR STOPPED _____

BIRTH DATE _____ PHONE NUMBER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

SIGNATURE _____ DATE _____

NAME OF PERSON COMPLETING THIS FORM _____ PHONE NUMBER _____

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NAME _____ PHONE NUMBER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

**NOTICE OF ACTION - DISCONTINUE
APPROVED RELATIVE CAREGIVER
(ARC) PAYMENT**

Notice Date: _____
Case Name: _____
Number: _____
Worker Name: _____
Number: _____
Telephone: _____
Address: _____

(ADDRESSEE)

[]
[]

Questions? Ask your Worker.

State Hearing: If you think this action is wrong, you can ask for a hearing. Your benefits may not be changed if you ask for a hearing before this action takes place. If you and the county disagree or if you have not heard back from your worker, do not wait to ask for a hearing. You must ask for the hearing before a certain number of days. See the back of this notice for more information and to find out how to ask for a hearing.

**For Approved Relative Caregivers participating in the
Approved Relative Caregiver Funding Option Program
(ARC Program):**

As of _____, the County is stopping your cash aid
MM/DD/YYYY
for _____ under the ARC Program.
NAME OF CHILD

Here's why:

You are no longer eligible for cash aid under the ARC Program for one or more of the following reasons:

- The child is no longer placed with you.
- Your home is no longer approved, and you received a Notice of Action—Denial of Home Assessment/Approval (NA 1271) from the County explaining why.
- The child is no longer under the jurisdiction of the California juvenile court.
- You no longer live in California.
- The child no longer lives in California.
- The child is not eligible because of age.
- Other _____.

Rules: These rules apply. You may review them at your county welfare office: Welfare and Institutions Code section 11461.3, Senate Bill 855 (Chapter 29, Statutes of 2014); Section 58 of Chapter 20 of the Statutes of 2015; All County Information Notice I-42-14; All County Letters 14-89, 15-20, 15-20E, 15-83, and 16-92; and County Fiscal Letters 14-15-45, 14-15-52, 14-15-58, 15-16-07, and 15-16-24.

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If you ask for a hearing before an action on Cash Aid, Medi-Cal, CalFresh, or Child Care takes place:

- Your Cash Aid or Medi-Cal will stay the same while you wait for a hearing.
- Your Child Care Services may stay the same while you wait for a hearing.
- Your CalFresh benefits will stay the same until the hearing or the end of your certification period, whichever is earlier.

If the hearing decision says we are right, you will owe us for any extra Cash Aid, CalFresh or Child Care Services you got. To let us lower or stop your benefits before the hearing, check below:

Yes, lower or stop: Cash Aid CalFresh
 Child Care

While You Wait for a Hearing Decision for:

Welfare to Work:

You do not have to take part in the activities.

You may receive child care payments for employment and for activities approved by the county before this notice.

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If you need more space, check here and add a page.

I need the state to provide me with an interpreter at no cost to me. (A relative or friend cannot interpret for you at the hearing.)

My language or dialect is: _____

NAME OF PERSON WHOSE BENEFITS WERE DENIED, CHANGED OR STOPPED _____

BIRTH DATE	PHONE NUMBER	
STREET ADDRESS		
CITY	STATE	ZIP CODE
SIGNATURE	DATE	
NAME OF PERSON COMPLETING THIS FORM	PHONE NUMBER	

I want the person named below to represent me at this hearing. I give my permission for this person to see my records or go to the hearing for me. (This person can be a friend or relative but cannot interpret for you.)

NAME	PHONE NUMBER	
STREET ADDRESS		
CITY	STATE	ZIP CODE

COUNTY LETTERHEAD

**APPROVED RELATIVE CAREGIVER FUNDING OPTION PROGRAM:
COUNTY OPT-IN LETTER TEMPLATE
(Counties must use this template if they choose to opt-in.)**

California Department of Social Services
Attention: Foster Caregiver Policy and Support Unit
744 P Street, MS 8-13-78
Sacramento, CA 95814

To Whom It May Concern:

Subject: Approved Relative Caregiver Funding Option Program

The purpose of this letter is to inform the California Department of Social Services (CDSS) that _____ County elects to participate in the Approved Relative Caregiver (ARC) Funding Option Program effective January 1, 20_. By choosing to participate in this optional program, _____ County agrees to the terms and conditions of the program, as described in Welfare and Institutions Code (W&IC) section 11461.3.

Participation Agreements

In submitting this letter to CDSS, _____ County acknowledges that it understands and agrees to all of the following conditions for participating in the ARC Funding Option Program and for accessing related state funds pursuant to W&IC section 11461.3:

- 1) A county that opts-in to the ARC Funding Option Program will participate continuously in the program unless the county decides to opt-out. A county that opts-out may opt-in again by notifying CDSS in writing of its decision to participate in the ARC Funding Option Program by October 1 of the year before participation begins. Participation begins on January 1 of the following year.
- 2) The county agrees to make per-child, per-month ARC Funding Option Program payments to approved relative caregivers on behalf of eligible children in an amount equivalent to the basic rate paid to foster care providers pursuant to W&IC section 11461(g). To be eligible, a related child must meet all of the following criteria: a) reside in California; b) be a dependent or ward of the juvenile court; and c) not be federally eligible under Title IV-E of the Social Security Act. The county agrees to make these payments for the duration of the county's participation in the program.

COUNTY LETTERHEAD

- 3) To participate in the ARC Funding Option Program, the county must ensure that all relative caregivers with whom eligible children are placed are approved pursuant to W&IC sections 309(d) and/or 361.4.
- 4) The county will comply with paragraph no. 2 above even if the allocated state and federal funds are insufficient to make all eligible payments to approved relative caregivers.
- 5) If a county decides to opt-out of the program, the county must give CDSS at least 120 days' prior written notice. The county must also give each participating approved relative caregiver at least 90 days' prior written notice that his or her payments will be reduced, including the date the reduction will occur. In addition, the county must comply with paragraph 2 above for the duration of both notice periods.
- 6) Funding for the ARC Funding Option Program is contingent upon an annual appropriation of funds. If the appropriation for the ARC Funding Option Program is reduced, no matter how small the reduction may be, CDSS will presume that all counties have opted-out of the program. If a county would like to continue to provide ARC Funding Option Program funding, it must notify the CDSS of its intent to opt-in within 60 days of the enactment of the state budget authorizing the reduction. Counties that do not opt-in must give each participating approved relative caregiver at least 90 days' prior written notice that his or her payments will be reduced, including the date the reduction will occur. In addition, these counties must comply with paragraph 2 above for the duration of this notice period.

ARC Funding Option Program Provisions

The county also understands and agrees to the following provisions of the ARC Funding Option Program:

- Any reduction in payments to an approved relative caregiver that occurs as the result of a county's decision to opt-out of the program is exempt from the state-hearing process under W&IC section 10950.
- Funding for the ARC Funding Option Program is comprised of the applicable regional per-child California Work Opportunity and Responsibility to Kids (CalWORKs) grant from federal funds received as part of the Temporary Assistance to Needy Families (TANF) Block Grant Program, and state General Fund resources that do not count toward state maintenance-of-effort requirements.
- Funds are allocated to participating counties based on the number of approved relative caregiver placements in the county, using a methodology and timing

COUNTY LETTERHEAD

developed by CDSS in consultation with county human services agencies and their representatives.

- At the end of the calendar year, if the entire amount of the funding appropriated by the State for the ARC Funding Option Program has not been fully expended, a county that has paid funds to cover amounts that exceeded the county's allocation may ask CDSS to be reimbursed for those expenses. The CDSS' authority to approve those requests will be limited by the amount of available unspent funds.
- An approved relative caregiver receiving payments on behalf of an eligible child under this program is not eligible to receive additional CalWORKs payments on behalf of the same child under W&IC section 11450.
- To the extent permitted by federal law, payments received by an approved relative caregiver from the ARC Funding Option Program cannot be considered income for the purpose of determining other public benefits.

STANDARD COUNTY CLOSING WITH CONTACT INFORMATION.

Sincerely,

SIGNATURE
TITLE

COUNTY LETTERHEAD

**APPROVED RELATIVE CAREGIVER FUNDING OPTION PROGRAM:
COUNTY OPT-OUT LETTER TEMPLATE**
(Counties must use this template if they choose to opt-out.)

California Department of Social Services
Attention: Foster Caregiver Policy and Support Unit
744 P Street, MS 8-13-78
Sacramento, CA 95814

To Whom It May Concern:

Subject: Approved Relative Caregiver Funding Option Program

The purpose of this letter is to inform the California Department of Social Services (CDSS) that _____ County elects to opt-out of the Approved Relative Caregiver (ARC) Funding Option Program effective _____ (120 days from the date on this letter).

In deciding to opt-out of the program by this letter, _____ County is giving CDSS at least 120 days' prior written notice. _____ County will also give each participating approved relative caregiver at least 90 days' prior written notice that his or her payments will be reduced, including the date the reduction will occur. We understand that ARC payments must continue to be made during the notice periods, even if those notice periods run consecutively compared to concurrently.

We also agree to forward to CDSS a copy of the notice sent to participating approved relative caregivers when it is available.

We further understand that _____ County may opt-in again by notifying CDSS in writing of its decision to participate in the ARC Funding Option Program by October 1 of the year before participation begins. Participation begins on January 1 of the following year.

If you have any questions, please contact _____ at _____.

STANDARD COUNTY CLOSING WITH CONTACT INFORMATION.

Sincerely,

SIGNATURE
TITLE

**APPROVED RELATIVE CAREGIVER FUNDING OPTION PROGRAM:
COUNTY OPT-OUT NOTICE TO CAREGIVERS TEMPLATE**
(Counties must provide recipients at least 90 days' notice if they choose to opt out; they may use this template to do so.)

{DATE}

{RECIPIENT ADDRESS}

{RECIPIENT NAME}:

SUBJECT: CANCELLATION OF THE APPROVED RELATIVE CAREGIVER FUNDING OPTION PROGRAM

The purpose of this letter is to inform you that _____ {insert county name} County has decided to cancel its participation in the Approved Relative Caregiver (ARC) Funding Option Program, also known as the ARC Program, effective _____ {insert a date 90 days or more from the date on this letter}. After this date, you will no longer be eligible receive ARC benefits on behalf of _____. {insert name(s) of eligible child(ren)}

_____ {insert name(s) of eligible child(ren)} may be eligible for California Work Opportunity and Responsibility to Kids (CalWORKs) cash benefits after _____ {insert county name} County's participation in the ARC Program ends.

However, receipt of CalWORKs cash benefits is NOT automatic. If you would like to receive CalWORKs cash benefits on behalf of _____, {insert name(s) of eligible child(ren)} you must take action to add _____ {insert name(s) of eligible child(ren)} to your family's existing CalWORKs Assistance Unit, if you or a member of your family is currently receiving CalWORKs benefits, or to submit a new CalWORKs application on behalf of _____. {insert name(s) of eligible child(ren)} Contact _____ {insert county department/office name and contact information} as soon as possible to begin the process of establishing eligibility for _____. {insert name(s) of eligible child(ren)}

If you have any questions, please contact _____ {insert contact name} at _____ {insert contact telephone number}.

{STANDARD COUNTY CLOSING WITH CONTACT INFORMATION}

Sincerely,

{SIGNATURE}

{TITLE}

**APPROVED RELATIVE CAREGIVER FUNDING OPTION PROGRAM:
COUNTY PROGRAM CHANGE NOTICE TO CAREGIVERS TEMPLATE**

(Counties must provide recipients at least 90 days' notice of the shift to retrospective payments and the elimination of EBT; they may use this template to do so.)

{DATE}

{RECIPIENT ADDRESS}

{RECIPIENT NAME}:

SUBJECT: CHANGES TO THE APPROVED RELATIVE CAREGIVER FUNDING
OPTION PROGRAM

The purpose of this letter is to inform you that, effective _____ {insert a date 90 days or more from the date on this letter}, _____ {insert county name} County will begin to implement a change in the schedule of benefit payments in the Approved Relative Caregiver (ARC) Funding Option Program, also known as the ARC Program, under which you receive benefits on behalf of _____. {insert name(s) of eligible child(ren)} Currently, ARC benefits for a particular month are paid at the beginning of that month. For example, the ARC payment for June is issued on June 1. {substitute actual current payment date} Starting _____ {insert starting date from above}, ARC payments will shift to being paid at the end of the month—for example, the payment for September will be issued on September 30, rather than September 1. {if the transition will take more than one month, insert the length of the transition period and the ending date here} During the time that ARC benefits are shifting from the beginning of the month to the end of the month, you will see a longer-than-normal interval between payments. In order to help you deal with any hardships caused by this longer gap between payments, {insert steps the county will take here, if any}.

Also, if you receive ARC benefits via an Electronic Benefit Transfer (EBT) card, also known as the Golden State Advantage card, this letter is meant to inform you that, effective _____ {insert a date 90 days or more from the date on this letter}, benefits will be paid to you by paper check {or direct deposit, if available}. After this date, no further ARC benefits will be added to your EBT card. However, any benefits remaining on the EBT card will continue to be available to you. Once benefits have stopped being issued to your EBT card, you are encouraged to spend down any amount remaining on the card, but there is no time limit for you to do so—any amount left on the card will remain there indefinitely.

If you have any questions, please contact _____ {insert contact name} at _____ {insert contact telephone number}.

COUNTY LETTERHEAD
Page Two

{STANDARD COUNTY CLOSING WITH CONTACT INFORMATION}

Sincerely,

{SIGNATURE}
{TITLE}