



CDSS

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DEPARTMENT OF SOCIAL SERVICES

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EDMUND G. BROWN JR.
GOVERNOR

April 29, 2011

ALL COUNTY LETTER (ACL) NO. 11-35

REASON FOR THIS TRANSMITTAL

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

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: NEW KINSHIP GUARDIANSHIP ASSISTANCE PAYMENT (KIN-GAP) PROGRAM CASELOAD MOVEMENT REPORT – FEDERAL ONLY [CA 237 KG-F (1/11)]

REFERENCE: ACL 11-15 NEW KIN-GAP PROGRAM REQUIREMENTS DATED JANUARY 31, 2011

This letter informs the counties of a new Kin-GAP statistical data report form that is required to be submitted monthly to the California Department of Social Services (CDSS), effective January 1, 2011. The new report form is called the Kin-GAP Program Caseload Movement Report – Federal Only (CA 237 KG-F) and will provide monthly information about caseload movement of federally eligible children in the Kin-GAP program.

The new form was modeled after the existing Kin-GAP Caseload Movement Report (CA 237 KG), which will continue to be used for state funded cases. The new CA 237 KG-F form will capture data on both in-state and out-of-state federally funded cases.

The County Welfare Department (CWD) is responsible for ensuring that the CA 237 KG-F is complete and accurate before submission to CDSS. In counties where a portion of the data required for this report is supplied by another agency, the CWD is responsible for reviewing and verifying that data prior to including it in the report. Due to the delay in the development of the new form, the reports for January, February, and March 2011 are due to CDSS on or before May 15, 2011. Subsequent reports will be due on or before the 22nd calendar day of the month following the report month. The report for April 2011 will be due on or before May 22, 2011.

To complete the electronic form, counties will download a copy of the CA 237 KG-F and instructions for its completion from <http://www.cdss.ca.gov/dssdb>. The CA 237 KG-F is to be submitted via e-mail to the CDSS, Data Systems and Survey Design Bureau

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(DSSDB) at admca237kgf@dss.ca.gov. For reference purposes, attached is the CA 237 KG-F form and instructions.

If you have any questions regarding the completion of this report, please contact DSSDB at (916) 651-8269. For program related questions, please contact the Kinship Care Policy and Support Unit at (916) 657-1858.

Sincerely,

Original Document Signed By:

FRAN MUELLER
Deputy Director
Administration Division

Attachment

**Kinship Guardianship Assistance Payment (Kin-GAP)
Program Caseload Movement Report - Federal Only
CA 237 KG-F**

DOWNLOAD REPORT FORM IN EXCEL FROM:
<http://www.cdss.ca.gov/dssdb>
E-MAIL COMPLETED REPORT FORM TO:
admca237kgf@dss.ca.gov

COUNTY NAME	VERSION <input type="checkbox"/> INITIAL <input type="checkbox"/> REVIS <input type="checkbox"/> ED	REPORT MONTH	REPORT YEAR
Part A. Applications for Kin-GAP - Federal and Requests for Restoration			
1. Applications pending at the beginning of the month.....			1
a. Item 5/Cell 12 from last month's report, as reported to CDSS.....			2
b. Adjustment (Item 1 minus Item 1a, positive or negative number, explain in Comments).....			3
2. Applications received during the month (Item 2a plus Item 2b).....			4
a. Applications.....			5
b. Requests for restoration.....			6
3. Total applications on-hand during the month (Item 1 plus Item 2).....			7
4. Applications disposed of during the month (Items 4a through 4c).....			8
a. Applications approved (Item 7a plus Item 7b).....			9
b. Applications denied.....			10
c. Other application dispositions (e.g., cancellations and withdrawals).....			11
5. Applications pending at the end of the month (Item 3 minus Item 4).....			12
Part B. Kin-GAP - Federal Caseload			
6. Cases at the beginning of the month.....			13
a. Item 10/Cell 29 from last's month report, as reported to CDSS.....			14
b. Adjustment (Item 6 minus Item 6a, positive or negative number, explain in Comments).....			15
			16
			17

7. Cases added during the month (Items 7a through 7e).....	18
a. Applications approved.....	19
.....	20
b. Restorations granted.....	21
.....	22
c. Kin-GAP - State program participant transfer to Kin-GAP - Federal.....	23
.....	24
d. AFDC-FC program participant transfer to Kin-GAP - Federal.....	25
.....	26
e. Other case approvals (includes out of state cases).....	27
1) Kin-GAP - Federal cases from out of state (Same as Item 14).....	28
.....	29
8. Total cases during the month (Item 6 plus Item 7 equals Item 8a plus Item 8b).....	
a. Cases that received Kin-GAP - Federal.....	
b. Case adjustment (Item 8 minus Item 8a).....	
9. Cases discontinued during the month (Item 9a plus Item 9b).....	
a. Cases transferred to the AFDC-FC Program.....	
b. All other Kin-GAP - Federal discontinued cases.....	
10. Cases at the end of the month (Item 8 minus Item 9).....	

Part C. Special Information

11. Overdue reassessments at the end of the month.....	30
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Part D. Out of State Cases in California Caseload

12. Out of state cases at the beginning of the month.....	31
a. Item 16/Cell 37 from last month's report, as reported to CDSS.....	32
.....	33
b. Adjustment (Item 12 minus Item 12a, positive or negative number, explain in Comments).....	34
.....	35
13. Kin-GAP - Federal participant moves out of state during the month.....	36
14. AFDC-FC out of state participant transfer to Kin-GAP - Federal during the month (same as Item 7e1)...	37
15. Kin-GAP - Federal participant moves back to state during the month.....	
16. Out of state cases at the end of the month (Item 12 plus Item 13 plus Item 14 minus Item 15).....	

COMMENTS

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CONTACT PERSON	TELEPHONE	EXTENSION	FAX

TITLE/CLASSIFICATION	E-MAIL	DATE SUBMITTED
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CA 237 KG-F (1/11)

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**KINSHIP GUARDIANSHIP ASSISTANCE PAYMENT (Kin-
GAP) PROGRAM CASELOAD MOVEMENT REPORT –
FEDERAL ONLY
CA 237 KG-F**

(1/11)

INSTRUCTIONS

CONTENT

The monthly CA 237 KG-F report contains statistical information on end of the report month net movement of cases and the number of individuals who received Kin-GAP - Federal. The County Welfare Departments (CWDs) should report the status of a case as of the end of the month.

PURPOSE

The purpose of this report is to provide an unduplicated case count for meeting federal Temporary Assistance for Needy Families (TANF) reporting requirements. The report also provides county, state and federal entities with information needed for budgeting, staffing and program planning.

COMPLETION AND SUBMISSION

The CWD is responsible for ensuring that this report is fully and accurately completed. If portions of the report are completed by more than one entity within the CWD and/or outside agencies, the contact person responsible for submitting the report to the state shall review the report for completeness and accuracy prior to submittal. Reports are to be received on or before the 22nd calendar day of the month following the end of the report month.

Download an Excel version of the report form from <http://www.cdss.ca.gov/dssdb/> to your computer desktop, complete the downloaded report form, and e-mail to the CDSS, Data Systems and Survey Design Bureau (DSSDB) at admca237kgf@dss.ca.gov. This e-mail submission process contains automatic computation of some cells and easy e-mail transmission of completed report forms to the DSSDB. The website contains specific instructions and guidance.

If e-mail submission is not possible or if you have questions regarding the completion or submission of this report, contact the DSSDB at (916) 651-8269. For reference purposes, copies of the report form and instructions can be downloaded at the CDSS Research and Data Reports (RADR) website at <http://www.cdss.ca.gov/research/>. The report's released monthly statewide and county-specific data is also available on the website.

GENERAL INSTRUCTIONS

Enter in the boxes provided near the top of the form the county name, version (Initial or Revised) and the report month and year.

Enter the data required for each item. If there is nothing to report for an item, enter "0". **Do not leave any items blank.** If your county does not provide a particular service/activity, or the service/activity is provided but the county is unable to collect or track the data, enter "0" and explain in the Comments section.

Enter in the boxes at the end of the form the name, job title or classification, telephone number, fax number and e-mail address of the person to contact if there are questions about the report. This person may or may not be the person who completed the report. Enter the date the report was submitted (this is usually the date when the report is e-mailed to DSSDB).

DEFINITIONS

AFDC-FC: Aid to Families with Dependent Children Foster Care (AFDC-FC) is aid provided on behalf of needy children in foster care who meet the eligibility requirements as specified in CDSS regulations and in applicable state and federal laws. (MPP 45-100 through 45-303)

Application: A completed KG 2 is considered to be an application for Kin-GAP. An application is not required for an intraprogram status change (IPSC). (MPP 40-121.3)

Approvals: An application or a request for restoration for a Kin-GAP cash grant is considered approved when the CWD signs the appropriate documents (e.g., KG 2 and SOC 369A) and authorizes aid.

Cancellations: An application or request for restoration for a Kin-GAP cash grant is considered “cancelled” if the child for whom the application (or request for restoration) is made dies before the determination is completed.

Denial: An application or request for restoration for a Kin-GAP cash grant that is rejected. Denial may occur for reasons specified in regulations.

Dispositions: An action taken on an application or a request for restoration for a Kin-GAP cash grant (e.g., approval, denial, cancellation, or withdrawal).

Home County: A child’s home county is the county that had legal custody of the child immediately prior to the dismissal of the dependency and establishment of the legal guardianship by the court (MPP 40-189.27). For purposes of this report, the Kin-GAP case should only be counted by the home county.

Intercounty Transfer: This is the transfer of a case to the county of responsibility (see “Home County”). Only the Home County reports an Intercounty Transfer (ICT). For example, this situation could occur when a child is living out of county—i.e., the county of dependency is not the county in which the child is residing. In this example, the child is receiving AFDC Foster Care and subsequently requests Kin-GAP. The appropriate way to process the Kin-GAP request would be for the county in which the child is living to do an intraprogram status change to Kin-GAP and then an intercounty transfer to the home county (MPP 40-190).

Interstate Movement: This is when a Kin-GAP recipient moves from California to another state. For purposes of this report, capture the interstate movement from either in- and/or out-of-state in Section D. For this report, no transfer process occurs other than report notation.

Intraprogram Status Change: A change in status from one part of the same program to another—e.g., changes between AFDC-FC and Kin-GAP. (MPP 40-183.1)

KG 2 – Statement of Facts Supporting Eligibility for Kinship Guardianship Assistance Payment (Kin-GAP) Program: This form is used to determine if the former foster child is eligible for either the state or federally funded Kin-GAP Program. This form is to be completed initially and whenever a reassessment is performed.

Kin-GAP Program: Senate Bill 1901, Chapter 1055, Statutes of 1998 established the Kinship Guardianship Assistance Payment Program. Kin-GAP was established to serve dependent children whose dependencies are dismissed when their relative caregivers assume legal guardianship of them. The effective date of Kin-GAP was January 1, 2000.

DEFINITIONS (Continued)

Other Approvals: Cases approved for reasons other than new applications, restorations, transfers from other counties, or transfers from the AFDC Foster Care Program. Include the following: approval of aid on appeal cases and approval of aid to cases erroneously denied or discontinued. Also, the county that had legal custody of the child immediately prior to the dismissal of the dependency should include Kin-GAP applications approved for children living in other counties. (See MPP 40-189.27)

Other Dispositions: An action taken on an application or a request for restoration for Kin-GAP that results in a cancellation or withdrawal. This also includes applications denied because the applicant moved or could not be located. (See definitions for Cancellations and Withdrawals.)

Restorations: The term “restoration” applies to an applicant who was a recipient of the same category of aid in the same county when his/her grant has been discontinued for 12 months or less at the time of the current application.

SOC 369A – Kin-GAP Program Agreement Amendment: This form implements the state and federal requirement that there be a written, binding agreement with the relative guardian.

Withdrawals: An application or request for restoration that is withdrawn only upon the voluntary initiative of the applicant or person applying on the applicant’s behalf.

ITEM INSTRUCTIONS

Part A. Applications for Kin-GAP - Federal and Requests for Restoration

This part of the report summarizes intake activity during the report month with respect to applications and requests for restoration.

1. Applications pending at the beginning of the month: Enter the number of applications that are pending at the beginning of the month. This should be the number of applications that were pending at the end of last month. [Cell 1]
 - a. Item 5/Cell 12 from last month’s report, as reported to CDSS: Enter the number that was reported to the CDSS in Item 5/Cell 12 “Applications pending at the end of the month” on last month’s report. It **must** be the same number as reported last month in Item 5/Cell 12. If a **revised** report was submitted for last month, please use the number reported in Item 5/Cell 12. [Cell 2]
 - b. Adjustment (Item 1 minus Item 1a, positive or negative number, explain in Comments): ***Skip this item: it will be automatically calculated when using***

the automated (Excel) form. This is any change plus (+) or minus (-) in applications resulting from actions authorized, including those authorized by mistake or in error, in the prior month that were not previously reported. For example, an adjustment might be used when a prior month's application was cancelled or an aid code was changed. Whenever an adjustment is calculated the CWD must explain the reason for the adjustment in the Comments section. If there is no change (no adjustment), "0" will be displayed. Adjustment is used to reconcile the beginning balance of the current report period (Item 1) to the ending balance of the prior report period (Item 5 of the prior month). [Cell 3]

2. Applications received during the month (Item 2a plus Item 2b): ***Skip this item: it will be automatically calculated when using the automated (Excel) form.*** This is the sum of Item 2a and Item 2b (Cells 5 and 6). [Cell 4]

ITEM INSTRUCTIONS (Continued)

- a. Applications: Enter the total number of applications received. For reporting purposes, a request for aid is considered an application when it has been received and recorded by the CWD on the KG 2 (Statement of Facts Supporting Eligibility for Kinship Guardianship Assistance Payment (Kin-GAP) Program). (MPP 40-121) [Cell 5]
- b. Requests for restoration: Enter the total number of requests for restoration. An application for aid is considered a request for restoration when the applicant has been a recipient of the same category of aid in the same county within the last 12 months. [Cell 6]
3. Total applications on-hand during the month (Item 1 plus Item 2): **Skip this item: it will be automatically calculated when using the automated (Excel) form.** This is the sum of Items 1 and 2 (Cells 1 and 4). [Cell 7]
4. Applications disposed of during the month (Items 4a through 4c): **Skip this item: it will be automatically calculated when using the automated (Excel) form.** This is the sum of Items 4a, 4b and 4c (Cells 9, 10 and 11). [Cell 8]
 - a. Applications approved (Item 7a plus Item 7b): **Skip this item: it will be automatically calculated when using the automated (Excel) form.** This is the sum of Item 7a (Applications approved, Cell 17) plus Item 7b (Restorations granted, Cell 18). [Cell 9]
 - b. Applications denied: Enter the number of applications and requests for restoration denied. [Cell 10]
 - c. Other application dispositions (e.g., cancellations and withdrawals): Enter the number of applications and requests for restoration cancelled or withdrawn. This item also includes applications denied because the applicant moved or could not be located. [Cell 11]
5. Applications pending at the end of the month (Item 3 minus Item 4): **Skip this item: it will be automatically calculated when using the automated (Excel) form.** This is Item 3 minus Item 4 (Cells 7 and 8). This number is carried forward to Item 1a (Cell 2) of next month's report. [Cell 12]

Part B. Kin-GAP - Federal Caseload

6. Cases at the beginning of the month: Enter the number of cases at the beginning of the month. This should be the number of cases at the end of last month's report. [Cell 13]

- a. Item 10/Cell 29 from last month's report, as reported to CDSS: Enter the number that was reported to the CDSS in Item 10/Cell 29 "Cases at the end of the month" on last month's report. It **must** be the same number as reported last month in Item 10/Cell 29. If a **revised** report was submitted for last month, please use the number reported in Item 10/Cell 29 (*Cell 14*)
- b. Adjustment (Item 6 minus Item 6a, positive or negative number, explain in Comments): ***Skip this item: it will be automatically calculated when using the automated (Excel) form.*** This is any change plus (+) or minus (-) in caseload resulting from actions authorized, including those authorized by mistake or in error, in the prior month that were not previously reported. Whenever an adjustment is calculated the CWD must explain the reason for the adjustment in the Comments section. If there is no change (no adjustment) "0" will be displayed. Adjustment is used to reconcile the beginning balance of the current report period (Item 6) to the ending balance of the prior report period (Item 10 of the prior month). *[Cell 15]*

ITEM INSTRUCTIONS (Continued)

7. Cases added during the month (Items 7a through 7e): **Skip this item: it will be automatically calculated when using the automated (Excel) form.** This is the sum of Items 7a through 7e (Cells 17 – 21). [Cell 16]
- a. Applications approved: Enter the number of applications approved to receive a Kin-GAP - Federal cash grant. [Cell 17]
 - b. Restorations granted: Enter the number of requests for restoration approved. Restoration applies to an applicant who was a recipient of Kin-GAP - Federal in the same county, when his/her cash grant has been discontinued for 12 months or less at the time of the current application. [Cell 18]
 - c. Kin-GAP – State program participant transfer to Kin-GAP - Federal: Enter the number of cases transferring to Kin-GAP - Federal from the existing Kin-GAP - State. [Cell 19]
 - d. AFDC-FC program participant transfer to Kin-GAP - Federal: Enter the number of cases transferring to Kin-GAP - Federal from AFDC Foster Care. [Cell 20]
 - e. Other case approvals (includes out of state cases): Enter the number of cases approved for reasons other than Items 7a through 7d (Cells 17– 20). Include intercounty transfers. For example, this situation could occur when a child is living out of county – i.e., the county of dependency is not the county in which the child is residing. In this example, the child is receiving AFDC-Foster Care and subsequently requests Kin-GAP. The appropriate way to process the Kin-GAP request would be for the county in which the child is living to do an intraprogram status change to Kin-GAP and then an intercounty transfer to the home county. This number must be greater than or equal to Item 7e1/Cell 22. (MPP 40-190) [Cell 21]
 - 1) Kin-GAP - Federal cases from out of state (same as Item 14): Enter the number of out of state cases from the total listed in Item 7e. This number is the same as Item 14/Cell 35. This number must be less than or equal to Item 7e/Cell 21. [Cell 22]
8. Total cases during the month (Item 6 plus Item 7 equals Item 8a plus Item 8b): **Skip this item: it will be automatically calculated when using the automated (Excel) form.** This is the sum of Item 6 and Item 7 (Cells 13 and 16). This is the total number of cases active during the report month—i.e., those cases where an official authorization for aid was in effect at some time during the month. This total must also equal the sum of Items 8a and 8b (Cells 24 and 25). [Cell 23]

- a. Cases that received Kin-GAP - Federal: Enter the number of children reported in Item 8 (Cell 23) that received Kin-GAP - Federal during the report month. When the child's basis of eligibility changes in either direction between AFDC-Foster Care and Kin-GAP, the persons count will be shown in all programs, as specified in the CDSS Fiscal Manual Section 25-502.422. [Cell 24]

- b. Case adjustment (Item 8 minus Item 8a): ***Skip this item: it will be automatically calculated when using the automated (Excel) form.*** This is the number of children reported in Item 8 (Cell 23) that did not receive Kin-GAP - Federal during the month. This does **NOT** include cases that have been transferred via Intraprogram Status Change (i.e., from AFDC Foster Care). This includes the following: cases approved for aid during the report month that will receive an initial warrant dated the following month; cases with an authorization to receive aid that were discontinued during the report month, and the warrant was cancelled or not written; cases in which the authorization for the report month was a zero grant to adjust for an overpayment. [Cell 25]

ITEM INSTRUCTIONS (Continued)

9. Cases discontinued during the month (Item 9a plus Item 9b): ***Skip this item: it will be automatically calculated when using the automated (Excel) form.*** This is the sum of Items 9a and 9b (Cells 27 and 28). This is the number of Kin-GAP - Federal cases that are discontinued as of the end of the month, either due to ineligibility to continue to receive benefits, or due to a change in program status. [Cell 26]
- a. Cases transferred to the AFDC-FC Program: Enter the number of children moved out of Kin-GAP - Federal to AFDC Foster Care Program. [Cell 27]
- b. All other Kin-GAP - Federal discontinued cases: Enter the number of all other Kin-GAP - Federal discontinuances that have not already been reported in Item 9a (Cells 27). [Cell 28]
10. Cases at the end of the month (Item 8 minus Item 9): ***Skip this item: it will be automatically calculated when using the automated (Excel) form.*** This is the difference resulting from subtracting Item 9 from Item 8 (Cell 23 minus Cell 26). This number is carried forward to Item 6a (Cell 14) of next month's report. [Cell 29]

Part C. Special Information

11. Overdue reassessments at the end of the month: Enter the number of Kin-GAP - Federal cases in which a reassessment is overdue as of the end of the report month. A "reassessment" is the review of the needs of the Kin-GAP recipient child or circumstances of the relative guardian which is performed initially and no less frequently than every two years following inclusion in the Kin-GAP program (W&IC 11364(b)(1) and 11387(b)(1). A reassessment is to be completed at least once every 2 years; if it is completed after the two year anniversary date, it is overdue. [Cell 30]

Part D. Out of State Cases in California Caseload

12. Out of state cases at the beginning of the month: Enter the number of out of state cases at the beginning of the month. [Cell 31]
- a. Item 16/Cell 37 from last month's report, as reported to CDSS: Enter the number that was reported to the CDSS in Item 16/Cell 37 "Out of state cases at the end of the month" on last month's report. It **must** be the same number as reported last month in Item 16/Cell 37. If a **revised** report was submitted for last month, please use the number reported in Item 16/Cell 37. [Cell 32]

- b. Adjustment (Item 12 minus Item 12a, positive or negative number, explain in Comments): ***Skip this item: it will be automatically calculated when using the automated (Excel) form.*** This is any change plus (+) or minus (-) in caseload resulting from actions authorized, including those authorized by mistake or in error, in the prior month that were not previously reported. Whenever an adjustment is calculated the CWD must explain the reason for the adjustment in the Comments section. If there is no change (no adjustment) "0" will be displayed. Adjustment is used to reconcile the beginning balance of the current report period (Item 12) to the ending balance of the prior report period (Item 16 of the prior month). [Cell 33]
13. Kin-GAP - Federal participant moves out of state during the month: Enter the number of Kin-GAP - Federal participants that moved out of state during the report month. These cases are considered part of the current Kin-GAP - Federal population and are not new transfers to Kin-GAP - Federal. [Cell 34]

ITEM INSTRUCTIONS (Continued)

14. AFDC-FC out of state participant transfer to Kin-GAP - Federal during the month (same as Item 7e1): ***Skip this item: it will be automatically calculated when using the automated (Excel) form.*** This number is the same as in Item 7e1/Cell 22. [Cell 35]
15. Kin-GAP - Federal participant moves back to state during the month: Enter the number of current Kin-GAP - Federal participants that previously lived out of state and moved back to California during the report month. [Cell 36]
16. Out of state cases at the end of the month (Item 12 plus Item 13 plus Item 14 minus Item 15): ***Skip this item: it will be automatically calculated when using the automated (Excel) form.*** This is the sum of Items 12, 13 and 14 (Cells 31, 34, and 35) minus Item 15 (Cell 36). This number is carried forward to Item 12a (Cell 32) of next month's report. [Cell 37]

COMMENTS

Use the Comments section to:

- Explain any "0" data entry for an item if the county does not provide the service/activity or if the county is unable to collect or track the data.
- Explain any adjustments in Items 1b/Cell 3, Item 6b/Cell 15 and Item 12b/Cell 33.
- Explain any major fluctuations in data.
- Provide any other comments the county determines necessary.

**Kinship Guardianship Assistance Payment (Kin-GAP)
Program Caseload Movement Report - Federal Only
CA 237 KG-F**

VALIDATION RULES AND EDITS

CEL Each data cell in this report must be a whole number greater than or
LS 1 equal to 0 (no decimals or negatives), except Item 1b/Cell 3, Item 6b/Cell
- 37 15 and Item 12b/Cell 33 which may be either a positive or negative
number. No data cells should be left blank.

PART A. APPLICATIONS FOR Kin-GAP - FEDERAL AND REQUESTS FOR RESTORATION

CELL 2: **Cell 2** must be equal to Cell 12 as reported on
last month's report CELL 3: **Cell 3** must be equal
to (Cell 1 minus Cell 2)

CELL 4: **Cell 4** must be equal to (Cell 5 plus Cell 6)

CELL 7: **Cell 7** must be equal to (Cell 1 plus Cell 4)

CELL 8: **Cell 8** must be equal to (Cell 9 plus Cell 10 plus Cell 11)

CELL 9: **Cell 9** must be equal to (Cell 17 plus Cell 18)

CELL 12: **Cell 12** must be equal to (Cell 7 minus Cell 8)

PART B. Kin-GAP - FEDERAL CASELOAD

CELL 14: **Cell 14** must be equal to Cell 29 as

reported on last month's report CELL 15: **Cell 15**

must be equal to (Cell 13 minus Cell 14)

CELL 16: **Cell 16** must be equal to (Cell 17 plus Cell 18 plus Cell

19 plus Cell 20 plus Cell 21) CELL 21: **Cell 21** must be

greater than or equal to Cell 22

CELL 22: **Cell 22** must be equal to Cell 35

Cell 22 must be less than or equal to Cell 21

Cell 22 must be zero if Cell 21 is zero

CELL 23: **Cell 23** must be equal to (Cell 13 plus Cell 16)

Cell 23 must be equal to (Cell 24

plus Cell 25) CELL 25: **Cell 25** must be
equal to (Cell 23 minus Cell 24)

CELL 26: **Cell 26** must be equal to (Cell 27 plus Cell 28)

CELL 29: **Cell 29** must be equal to (Cell 23 minus Cell 26)

PART C. SPECIAL INFORMATION

None No validation rule or edit

PART D. OUT OF STATE CASES IN CALIFORNIA CASELOAD

CELL 32: **Cell 32** must be equal to Cell 37 as

reported on last month's report CELL 33: **Cell 33**
must be equal to (Cell 31 minus Cell 32)

CELL 35: **Cell 35** must be equal to Cell 22

CELL 37: **Cell 37** must be equal to (Cell 31 plus Cell 34 plus Cell 35 minus Cell 36)