



CDSS

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EDMUND G. BROWN JR.
GOVERNOR

September 06, 2011

ALL COUNTY LETTER NO. 11-59

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
 ALL COUNTY CALWORKS SPECIALISTS
 ALL CHILD WELFARE SERVICES PROGRAM MANAGERS
 ALL COUNTY CHIEF PROBATION OFFICERS
 ALL ADOPTION DISTRICT OFFICES
 ALL COUNTY CONSORTIUM PROJECT MANAGERS

SUBJECT: CALIFORNIA WORK OPPORTUNITY AND RESPONSIBILITY TO KIDS (CalWORKs): IMPLEMENTATION OF NEW AID CODES FOR FOSTER CHILDREN IN THE CalWORKs PROGRAM

REFERENCE: ALL COUNTY WELFARE DIRECTORS LETTER (ACWDL) NO. 10-28, DATED DECEMBER 17, 2010; ERRATA TO ACWDL NO. 10-28E, DATED MARCH 8, 2011; WELFARE AND INSTITUTIONS CODE (W&IC) SECTION 14093.09

The purpose of this All County Letter (ACL) is to inform County Welfare Departments (CWDs) that two new aid codes have been established for foster children who are placed with relatives, some of whom are receiving CalWORKs benefits. The Department of Health Care Services (DHCS) announced these aid codes in ACWDL 10-28.

In the past, foster children placed with relative caretakers who were not eligible for federal foster care benefits, were not identified as foster care cases, and as a result, were aided under an aid code requiring enrollment into a Medi-Cal managed care health plan. Under state law, foster children have the right to choose between fee for service (FFS) Medi-Cal and a managed care health plan unless they reside or are placed in a county with a County Organized Health System. To address this issue, new aid codes 4H and 4L have been developed to identify these children for Medi-Cal eligibility purposes to ensure that they have the option of choosing FFS Medi-Cal or a Medi-Cal

managed care health plan, if available. The aid codes will also allow these children to be easily identified for other Foster Care (FC)-linked benefits, such as eligibility to the Former Foster Care Children program after they reach age 18 or extended benefits, if appropriate. The new codes became effective on December 1, 2010. However, the 4H aid code was not made available until June 2011, thus the delay in releasing this letter.

Background

When a foster child is placed with relatives, but the child is not eligible for foster care payments, the relative may apply for CalWORKs for that child. In the past, once that child was coded as a CalWORKs recipient, the child was mandatorily enrolled in Medi-Cal managed care. If the child was not eligible or the relative did not apply for CalWORKs, the foster child was still eligible for Section 1931(b) Medi-Cal-only benefits. However, in both situations, because the child was not identified as a foster child, eligibility for Medi-Cal was not properly determined and the children were not given the opportunity to choose their Medi-Cal health plan. With the establishment of these two aid codes, the CWDs will be able to identify these children as foster children for purposes of determining Medi-Cal eligibility.

4H – CalWORKs Foster Care Medi-Cal

CWDs shall use the 4H aid code to identify FC Medi-Cal eligibility for children placed with relatives and receiving CalWORKs. Due to a county systems issue identified with the use of more than one aid code per assistance unit for cash assistance determinations, the 4H aid code is to be reported as a secondary Medi-Cal aid code for a foster child. The Medi-Cal Eligibility Data System (MEDS) will store both the CalWORKs cash assistance and the CalWORKs FC Medi-Cal eligibility information.

4L – 1931(b) Foster Care

CWDs shall use the 4L aid code to identify FC Medi-Cal eligibility for children who are eligible for 1931(b) Medi-Cal and placed with relatives who may be receiving CalWORKs for themselves but not for the child. This aid code shall be used instead of aid code 3N for the foster children in a case.

Implementation

Since these new aid codes became effective in December 2010, CWDs shall use these new aid codes at application, annual redetermination, or as soon as the county worker becomes aware that the child is in a foster care placement or that a child's aid code is incorrect.

All County Letter 11-59
Page Three

FORMS

The Statement Of Facts For Cash Aid, Food Stamps, And Medi-Cal/34-County Medical Services Program (SAWS 2) and Statement Of Fact For An Additional Person (CW 8) are being revised to ensure foster children are identified in the home. The revised forms will be distributed under separate cover.

CONTACTS

If you have any questions regarding this ACL, please contact the CalWORKs Eligibility Bureau at (916) 654-1322.

Sincerely,

Original Document Signed By:

CHARR LEE METSKER
Deputy Director
Welfare to Work Division