

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



October 29, 1997

ALL COUNTY LETTER 97-65

TO: ALL COUNTY WELFARE DIRECTORS
ALL AFDC PROGRAM SPECIALISTS

REASON FOR THIS TRANSMITTAL

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

SUBJECT: IMPLEMENTATION OF CERTAIN ELIGIBILITY PROVISIONS - CALIFORNIA WORK OPPORTUNITY AND RESPONSIBILITY TO KIDS (CalWORKs) PROGRAM

REFERENCE: ASSEMBLY BILL (AB) 1542, CHAPTER 270, STATUTES OF 1997
ASSEMBLY BILL (AB) 1260, CHAPTER 284, STATUTES OF 1997

The purpose of this letter is to provide counties with implementation instructions for the following CalWORKs program eligibility areas: 1) Time Limits; 2) Child Support; 3) Unemployed-Parent Deprivation; 4) Drug Felons; 5) Fleeing Felons; and 6) Sponsored Aliens. The changes discussed in this All County Letter (ACL) are effective January 1, 1998. AB 1542 authorizes the California Department of Social Services (CDSS) to implement the statute initially through the ACL process in order to meet the January 1, 1998 implementation date. The CDSS will process emergency regulations where required by July 1, 1998.

TIME LIMITS (Welfare and Institutions Code (WIC) Section 11454)

WIC Section 11454(b) imposes a 60-month time limit on the receipt of cash assistance for the parent or caretaker relative of an aided child, including Temporary Assistance to Needy Families (TANF) received from other states. California's 60-month time limit begins on January 1, 1998 and no aid received from any state prior to January 1, 1998 will count against any of the time limits imposed by WIC Section 11454(b). All instructions regarding the 60-month and other time limits contained in AB 1542 are provided in the Welfare to Work guidelines transmitted under separate cover.

Certain parents and caretaker relatives are exempted from the 60-month time limit. The 60-month time limit does not apply when all parents or caretaker relatives of an aided child meet any of the following conditions:

- he/she is 60 years of age or older;
- he/she is providing care for an ill or incapacitated household member which impairs his/her ability to be regularly employed or to participate in welfare-to-work activities;
- he/she is receiving State Supplemental Program, In-Home Supportive Services, State Disability Insurance, or Worker's Compensation Temporary Disability Insurance benefits, if the disability significantly impairs their ability to be

- regularly employed or to participate in welfare-to-work activities;
- he/she is incapable of maintaining employment or participating in welfare-to-work activities as determined by the county, based on the assessment of the individual and the individual has a history of participating and fully cooperating in welfare-to-work activities;
- he/she is not included in the assistance unit.

In addition, any month in which the parent or caretaker meets one of the following criteria is exempted from (not counted toward) the 60-month time limit:

- he/she is exempted from work participation requirements due to a disability that is expected to last at least 30 days;
- he/she is excluded from the assistance unit;
- he/she is caring for an ill or incapacitated household member;
- he/she is eligible for, participating in, or exempt from Cal-Learn or another teen parent program approved by the CDSS;
- when the cost of cash aid is fully reimbursed by child support, whether collected in that month or any subsequent month.

The time limits for applicants/recipients of cash aid begins on January 1, 1998. The federal time limit of 60 months on the expenditure of TANF funding began November 26, 1996 when California's State Plan was federally approved. However, the 60-month clock on recipient eligibility for assistance did not start November 1996. When a recipient has received 60-months of TANF funding, State funding will continue until the recipient has received 60-months of cash assistance under State law.

CHILD SUPPORT (WIC Section 11475.3, 11477, 11477.02, and 11477.04)

AB 1542 retains the provisions that applicants and recipients of the CalWORKs program must, as a condition of eligibility, assign child support rights to the county and cooperate with the District Attorney (DA) in establishing paternity and establishing, modifying, or enforcing a child support order for the child for whom aid is requested. The bill also continues to provide for the \$50 child support disregard to be paid to Assistance Units (AUs).

The major changes in the child support enforcement process required by AB 1542 are summarized below.

Cooperation (WIC Section 11477):

- The responsibilities for determining cooperation and good cause have been split. The DA will determine if the applicant/recipient is cooperating in the child support process. The County Welfare Department (CWD) will determine if good cause exists for failure to cooperate.
- The DA is mandated to have staff available in person at the CWD (or by phone) for the paternity/child support enforcement interview at the time of the initial interview with the Eligibility Worker (EW).

The Office of Child Support has issued a Family Support Division Letter (FSD Letter 97-15, dated September 18, 1997) to all IV-D Directors and all district attorneys informing them of the changes in AB 1542 regarding the role of the DAs in making the determination of cooperation in the child support enforcement and paternity establishment processes.

Penalties (WIC 11477.02):

Current Aid to Families with Dependent Children (AFDC) rules require counties to apply the same penalties when a parent or caretaker relative fails to assign support rights to the county or fails to cooperate in the paternity establishment and child support enforcement process. In either case, current AFDC rules require the parent or caretaker relative to be denied cash aid or removed from the grant.

AB 1542 contains the following requirements:

1. When the parent or caretaker relative receives direct support payments but refuses to turn them over to the DA, the parent or caretaker relative is considered to be failing to cooperate with the child support enforcement process.
2. When a parent or needy caretaker relative of a child for whom aid is sought fails to cooperate with the DA in the paternity establishment or child support enforcement process, the family's computed grant is reduced by 25 percent and the parent or needy caretaker relative remains in the AU. When a parent or needy caretaker relative cooperates with the DA as required, the penalty is removed effective the first of the month in which cooperation occurs. Since this individual continues to be included in the AU, he/she must cooperate with the Welfare-to-Work participation requirements. No voucher payment is required.
3. When a parent or needy caretaker relative refuses to assign support rights to the county, that individual shall be ineligible for cash aid. When the parent or caretaker relative complies with the assignment of support rights requirement, the parent or caretaker relative is added to the AU effective the day that he/she complied with the requirement. Since this individual is not an AU member, he/she is not subject to work participation requirements. No voucher payment is required because the penalty is imposed on a month-to-month basis.

A summary of the various penalties under the CalWORKs program will be provided in chart format in an All County Information Notice to be released in the near future.

Good Cause (WIC Sections 11477.02 and 11477.04):

There are changes to the provisions governing good cause for not cooperating with the DA in establishing paternity and establishing, modifying, or enforcing a child support order. Prior to referring any applicant/recipient to the DA for child support services, the CWD must determine whether good cause exists for noncooperation in the paternity establishment or child support enforcement process. If good cause has been determined, the CWD/DA may not proceed with child support enforcement until the applicant/recipient requests it be resumed. Currently, good cause may be claimed under specified circumstances when cooperation may not be in the best interest of the child. AB 1542 amends existing good cause reasons as follows:

- Current criteria for a good cause determination provide for good cause to be found when cooperation "would reasonably be expected to result in serious physical or emotional harm to the caretaker relative." AB 1542 adds language that refers to definitions of domestic abuse to be provided by the domestic violence task force convened by CDSS pursuant to WIC Section 11495 et seq. AB 1542 modifies the threshold to allow for good cause when cooperation "would increase the risk of abuse" as defined by the domestic violence task force;

- Current law states that good cause exists "when cooperation would reasonably be anticipated to result in serious physical or emotional harm to the child or caretaker relative." AB 1542 modifies the threshold to say that good cause exists when cooperation "would increase the risk" of physical or emotional harm to the child for whom support is being sought. It also adds "the risk of sexual harm to the child" as a potential reason for good cause to be determined;
- allows any other reason that would make efforts to establish paternity or child support enforcement contrary to the best interest of the child.

AB 1542 also allows for additional sources of evidence to be accepted in support of a claim for good cause for noncooperation with the DA. Currently, statements under penalty of perjury may be accepted from individuals other than the applicant/recipient who have knowledge of the circumstances that provide the basis for the good cause claim. However, the Sahi court order allows for an attestation under penalty of perjury by the applicant/recipient to be considered a source of evidence when the individual is cooperating in good faith but is unable to provide information regarding the absent parent. AB 1542 changes existing law to now accept statements from applicants/recipients under penalty of perjury as a source of evidence for any good cause reason.

Consistent with the domestic violence provisions at WIC Section 11495, abuse situations may be established based on a sworn statement from the victim, unless the county can document that the recipient is not credible. If an applicant or recipient inquires about or claims good cause for noncooperation with the DA, or otherwise indicates that they or their children are at risk of abuse, they must be given referrals for appropriate services. Additional guidance regarding AB 1542 domestic violence provisions are addressed under separate cover.

UNEMPLOYED PARENT DEPRIVATION (WIC Section 11201)

Current law allows families to establish deprivation based on absence, death incapacity or unemployment of a parent. In order to be eligible for AFDC based on unemployed parent deprivation, the principal earner in a two-parent household must have a "connection to the labor force." The principal earner can establish this connection by having worked six or more quarters in any 13-calendar-quarter period and earned a gross of at least \$50 in each quarter or by receiving or being eligible to receive unemployment insurance benefits within one year before application, and working less than 100 hours per month. Additionally, the principal earner must have been unemployed for at least 30 days prior to the receipt of cash aid based on unemployed parent deprivation, and could not have quit or refused a job during that period.

AB 1542 amends the requirements for Unemployed Parent deprivation requirements as follows:

- Changes the waiting period for a principal wage earner to be unemployed prior to application for assistance from 30 days to four weeks.
- Eliminates the labor force connection related to having sufficient work quarters.
- Eliminates the prohibition of quitting or refusing a job or job training within the 30 day period prior to the receipt of aid.
- Provides that a recipient child may continue to receive aid regardless of the number of hours the principal wage earner works provided the family does not exceed the applicable gross or net income limits.

Effective January 1, 1998, cases containing a parent and/or child(ren) who were previously determined to be ineligible and not in the AU because of failure to meet the labor force connection requirement should be reviewed for possible eligibility under the new provisions.

DRUG FELONS (WIC Sections 11251.3 and 17012.5)

AB 1260 mandates that any person convicted of a felony that has an element related to the possession, use, or distribution of a controlled substance shall be considered ineligible for aid under CalWORKs. Controlled substances are those substances defined in Section 102(6) of the Controlled Substances Act (21 U.S.C. Section 802) or in Division 10 (commencing with Section 11000) of the Health and Safety Code.

Effective January 1, 1998, counties shall deny aid to persons that have committed a drug-related felony after August 22, 1996, and have been convicted as a drug felon in a state or federal court after December 31, 1997. Since the convicted drug felon is excluded by law, he/she shall be considered a non-AU family member and is not subject to the work requirements. Further, the statute requires that cases containing persons determined to be drug felons are subject to mandatory voucher/vendor payments. This means that the county must issue voucher or vendor payments for at least the rent and utilities when an otherwise mandatorily included person is determined to be a drug felon pursuant to the requirements presented above. More information regarding the treatment of non-AU family members is provided in ACL 97-59, Implementation of Grant Structure and Aid Payment Provisions, dated October 14, 1997.

Applicants and recipients shall self-identify in writing under penalty of perjury if they are a convicted drug felon. If the county becomes aware from another source that the applicant or recipient has been convicted of a drug felony, the county shall act on such information. The CDSS, in cooperation with the California Department of Justice (CDOJ), is anticipating the development of a matching system that will assist the counties in identifying convicted drug felons. A separate letter will be issued to provide counties with more information on this system.

FLEEING FELONS (WIC Section 11486.5)

Effective January 1, 1998, persons fleeing to avoid felony prosecution, or custody or confinement after conviction, or violating a condition of probation or parole are ineligible for aid under CalWORKs. Fleeing to avoid prosecution, or custody or confinement means a warrant for arrest has been issued. Violating a condition of probation or parole means a warrant for a crime that violates a condition of probation or parole has been issued, or an order has been issued revoking probation or parole. Since the fleeing felon is excluded by law, he/she shall be considered a non-AU family member. The individual is not subject to work requirements and the county is not mandated to issue benefits by voucher/vendor payments. However, pursuant to WIC Section 11274, counties may issue voucher/vendor payments for at least rent and utilities provided the county has determined that money mismanagement has occurred. More information regarding the treatment of non-AU family members is provided in ACL 97-59, Implementation of Grant Structure and Aid Payment Provisions, dated October 14, 1997.

Applicants and recipients shall self-identify in writing under penalty of perjury whether they are a fleeing felon. If the county becomes aware from another source that the applicant or recipient is a fleeing felon, the county shall act on such information. The CDSS, in cooperation with the CDOJ, is developing a matching system that will assist counties in identifying fleeing felons. This system would allow the CDOJ's Wanted Persons File to be

matched with California welfare files. A separate letter will be issued to provide counties with more information on this system.

SPONSORED ALIENS (WIC Sections 11008.13 and 11008.135)

At this time counties may continue to use the existing sponsorship rules. However, there will be a new affidavit of support form used by the Immigration and Naturalization Service (INS) for newly entering sponsored aliens. Those aliens with the new affidavit of support will be subject to the sponsorship rules until they either attain U.S. citizenship or have 40 qualifying work quarters without receiving benefits. This new requirement does not become effective until 60 days after the INS publishes the affidavit of support form. When the new affidavit of support form is in use by the INS, the CDSS will inform counties via the ACL process.

INFORMING REQUIREMENT

Attachment 1 provides language for informing recipients of (1) the change in the child support enforcement rules that has been developed by CDSS and (2) the 60-month time limit imposed on recipients of cash aid. Counties may reformat or reword the narrative to meet their county's needs.

NOTICE OF ACTION (NOA) MESSAGES

Attachment 2 lists changes and newly developed NOA messages along with copies of the appropriate messages related to the child support enforcement provisions. Attachment 3 lists the NOAs which have become obsolete as a result of the change in definition of deprivation due to an unemployed parent. Attachment 4 is a summary of the changes to existing NOA messages and newly developed NOA messages that must be used to indicate that cash aid will be reduced, discontinued or denied if the applicant/recipient is a drug felon, a fleeing felon or a probation or parole violator. Attachment 5 is a listing of the changes made and the appropriate NOA messages that must be used to notify sponsored aliens. Attachment 6 lists the newly developed NA forms to be used for sponsored aliens.

For all NOA's, CWDs should cite the appropriate county directives, instructions, or procedures when applicable.

TRANSLATIONS

Counties should call the Forms Management Bureau for camera ready copies of any form, NA form, NOA message or suggested informing language in any language. However, counties that have provided Language Services Bureau with a county contact and the specific languages needed in their county (Spanish, Chinese, Cambodian, and Vietnamese) will automatically be sent those languages as soon as the document (forms/NA form/NOA messages) is translated.

DATA REPORTING

The department is currently assessing reporting requirements and management information needs relative to CalWORKs. Acknowledging the need to address data reporting needs as expeditiously as possible, the Information Services Bureau and the California Welfare

Directors Association have established a sub-committee to specifically review these issues. We anticipate that this process will be ongoing over the next several months. Information regarding new or revised reporting requirements will be provided as it becomes available.

CONTACTS

If you have any questions regarding this letter or need additional information, please contact the following staff:

Subject	Contact Person	Phone
Time Limits	Henry Puga	(916) 654-1068 or CALNET 464-1068
Child Support	Dennis Ragasa	(916) 654-1063 or CALNET 464-1063
Deprivation	Henry Puga	(916) 654-1068 or CALNET 464-1068
Drug Felons	Henry Puga	(916) 654-1068 or CALNET 464-1068
Fleeing Felons	Henry Puga	(916) 654-1068 or CALNET 464-1068
Sponsored Aliens	Dennis Ragasa	(916) 654-1063 or CALNET 464-1063
Drug and Fleeing Felons, Fraud Related Issues	Judy Hale	(916) 323-4777 or CALNET 473-4777
Asian Translations	Forms Management Unit	(916) 657-1984 or CALNET 437-7395 FAX (916) 653-7395/CALNET 453-7395
Camera-ready English/Spanish Versions	Forms Management Unit	(916) 657-1984 or CALNET 437-7395 FAX (916) 653-7395/CALNET 453-7395

Sincerely,

BRUCE WAGSTAFF
Deputy Director
Welfare to Work Division

Attachments

Informing Language

FAILURE TO COOPERATE WITH CHILD SUPPORT ENFORCEMENT RULES

Effective January 1, 1998, if a parent or caretaker relative fails to cooperate with the District Attorney in establishing paternity or establishing, changing, or enforcing a child support order for any child for whom aid is requested, the family's cash aid will be reduced by 25% instead of the current penalty which is to remove the parent or caretaker relative from the assistance unit. Failure to cooperate includes when the parent or caretaker relative cashes a child support check instead of turning it over to the District Attorney. The parent or relative may still claim good cause for not cooperating. Good cause for not cooperating include the following reasons:

- Cooperation is expected to increase the risk of physical, sexual, or emotional harm to the child.
- Cooperation is expected to increase the risk of physical or emotional harm to you.
- The child was conceived as a result of incest or rape.
- Court proceedings are going on for the adoption of the child.
- You are working with an adoption agency to help you to decide whether to keep the child or give up the child for adoption.
- You are cooperating in good faith, but are unable to identify or help find the child's father.
- Any other reason that would make cooperation not in the best interest of the child.

Ask your worker if you have questions about the good cause reasons for not cooperating with the District Attorney.

60-MONTH TIME LIMIT

Effective January 1, 1998, a parent or caretaker relative is not eligible for cash aid under the California Work Opportunity and Responsibility to Kids (CalWORKs) when he/she has received cash aid for a total of 60 months. This includes cash aid received from other states. Cash aid that was received from California or other states under the Aid to Families with Dependent Children (AFDC) Program before January 1, 1998 is not counted toward the 60-month time limit. There are exceptions to this rule such as when the parent or caretaker relative is 60 years of age or older or is not included in the assistance unit. This rule does not apply to children in the assistance unit.

ATTACHMENT 2

NOA MESSAGES

Action	Type	Revision	NOA #
Approval	Application Process	Added another check box with language about the 25% reduction. Do not use for assignment of support rights cases.	M40-171D
Partial Approval	Support Cooperation	Deleted the first check box regarding helping the County or the DA/FSD.	M43-107A
Change	Support Cooperation	New , temporary to convert sanctioned cases to the 25% reduction. Do not use for assignment of support rights cases.	T43-107
Change	Support Cooperation	Deleted the first check box regarding helping the County or the DA/FSD.	M43-107
Change	Support Cooperation	New , decrease cash aid due to 25% reduction. Do not use for assignment of support rights cases.	M43-107B
Change	Support Cooperation	New , Increase cash aid due to cooperation.	M43-107C

Auto ID No.:
Source :
Issued by :
Reg Cite : 40-171.2, 40-129, 44-315
44-317, 43-107

Use Form No. : NA 200
Original Date : 11-01-87
Revision Date : 01-01-98

MESSAGE:

The County has approved your cash aid and Medi-Cal. The cash aid payment for your first month of aid is \$_____.

Your first day of cash aid is _____. Your first day of Medi-Cal is the first day of the month you applied for aid.

[] The cash aid payment for your first month of aid is only for a part of a month. It is for the time from your first day of cash aid, shown above, through the end of the month. If nothing changes, next month's cash aid will be for a full month.

[] You asked for an Immediate Need payment. Your immediate need is being met with a payment of your first month's cash aid within the immediate need time limit of 1 working day.

[] The cash aid payment for your first month of aid has a 25 percent penalty for not helping us or the District Attorney/Family Support Division. This amount will be subtracted from your cash aid payment each month until you help us or the District Attorney/Family Support Division.

[] You got a diversion payment of \$_____ on _____. **OR** You got diversion service(s) of _____ on _____ at the value of \$_____. You have agreed to repay the diversion payment/service(s). \$_____ will be subtracted from your cash aid payment for ___ month(s) until paid in full.

Your cash aid is figured on this page.

INSTRUCTIONS: Use for approvals and restorations. **Do not use for refusal to assign child/spousal support rights cases.** Check the applicable box(es). When you check the immediate need (IN) box, you do not need to send another NOA denying the IN request. This message replaces M40-173A dated 01-21-94.

State of California
Department of Social Services

Noa Msg Doc No.: M43-107A Page 1 of 1
Action : Partial Approval
Issue: Support Cooperation
Title: Failure to Cooperate

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-107.1, 43-107.2, 43-201.1,
43-201.2, 44-315, 44-317

Use Form No. : NA 200
Original Date : 11-01-95
Revision Date : 01-01-98

MESSAGE:

As of _____, the County has approved cash aid
and Medi-Cal for some members of your family.
The first day of cash aid is _____.
The first month's cash aid amount is \$_____.

Aid has been denied for _____.

Here's why:

_____ refused to assign child/spousal
support rights for _____ and did not have a
good reason.

This person may get cash aid again when he/she
helps us or the District Attorney/Family
Support Division.

Your cash aid amount is figured on this page.

INSTRUCTIONS: Use to give partial approval when a parent or caretaker relative has
failed to assign child/spousal support rights. Fill in the effective date the county
has approved cash aid. Indicate the beginning date of aid and the cash aid amount.
Also fill in the name of the person being denied aid.

This message replaces M43-107A dated 11-01-95.

file: pkian/MSERIES/cs.43107a

State of California
Department of Social Services

Noa Msg Doc No.: T43-107 Page 1 of 1
Action : Change
Issue: Support Cooperation
Title: Failure to Cooperate

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-107.1, 43-107.2, 43-201.1,
43-201.2, 44-315

Use Form No. : NA 200
Original Date : 01-01-98, New
Revision Date :

MESSAGE:

As of _____, the County is changing your cash
aid from \$_____ to \$_____.

_____ is being added to the assistance
unit.

Here's why:

On January 1, 1998 State law changed the way we
penalize you for not helping us or the District
Attorney/Family Support Division.

The new law lets the parent or caretaker
relative get cash aid. Now the penalty is a 25
percent cut to your cash aid payment.

We will subtract \$_____ from your cash aid
until you help us or the District
Attorney/Family Support Division as asked.

Your new cash aid amount is figured on this
page.

INSTRUCTIONS: Use temporary NOA message to convert sanctioned cases to the 25% penalty.
Fill in the effective date the county is changing the cash aid, the old and new amount
of cash aid.

Do not use this to convert refusal to assign child/spousal support rights.

file: pkian/TSERIES/cs.43107

State of California
Department of Social Services

Noa Msg Doc No.: M43-107 Page 1 of 1
Action : Change
Issue: Support Cooperation
Title: Failure to Cooperate

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-107.1, 43-107.2, 43-201.1,
43-201.2, 44-315

Use Form No. : NA 200
Original Date : 11-01-95
Revision Date : 01-01-98

MESSAGE:

As of _____, the County is changing your cash aid from \$_____ to \$_____. Cash aid is being stopped for _____.

Here's why:

_____ refused to assign child/spousal support rights for _____ and did not have a good reason.

This person may get cash aid again when he/she helps us or the District Attorney/Family Support Division.

Your new cash aid amount is figured on this page.

INSTRUCTIONS: Use to change the cash aid amount when a parent or caretaker relative has failed to assign child/spousal support rights. Fill in the effective date the county is changing the cash aid, the old and new amount of cash aid. Fill in the name of the person being dropped from the grant.

This message replaces M43-107 dated 11-01-95.

file: pkian/MSERIES/cs.43107

State of California
Department of Social Services

Noa Msg Doc No.: M43-107B Page 1 of 1
Action : Change
Issue: Support Cooperation
Title: Failure to Cooperate

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-107.1, 43-107.2, 43-201.1,
43-201.2, 44-315

Use Form No. : NA 200
Original Date : 01-01-98, New
Revision Date :

MESSAGE:

As of _____, the County is changing your cash
aid from \$_____ to \$_____.

Here's why:

_____ did not help us or the District
Attorney/Family Support Division with the
child/spousal support process as asked.

We will subtract \$_____ from your cash aid
until you help us or the District Attorney/
Family Support Division as asked.

Your new cash aid amount is figured on this
page.

INSTRUCTIONS: Use to change the cash aid amount when a parent or caretaker relative
has cooperated in the child/spousal support process only. **Do not use for assignment
of support rights.** Fill in the effective date the county is changing the cash aid,
the old and new amount of cash aid.

file: pkian/MSERIES/cs.43107b

State of California
Department of Social Services

Noa Msg Doc No.: M43-107C Page 1 of 1
Action : Change
Issue: Support Cooperation
Title: Cooperate

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-107.1, 43-107.2, 43-201.1,
43-201.2, 44-315

Use Form No. : NA 200
Original Date : 01-01-98, New
Revision Date :

MESSAGE:

As of _____, the County is changing your cash
aid from \$_____ to \$_____.

Here's why:

[] _____ helped us or the District
Attorney/Family Support Division with the
child/spousal support process as asked.

[] _____ assigned child/spousal support
rights.

Your new cash aid amount is figured on this
page.

INSTRUCTIONS: Use to change the cash aid amount when a parent or caretaker relative
has cooperated in the child/spousal support process. Fill in the effective date the
county is changing the cash aid, the old and new amount of cash aid. Check the
appropriate box.

file: pkian/MSERIES/cs.43107c

ATTACHMENT 3

NOA MESSAGES

Action	Type	Revision	NOA #
Deny	Deprivation	Changed "last month" to "in the last four weeks" and "Federal AFDC" to "CalWORKS".	M41-440F
Partial Approval	Deprivation	Changed action from denial to partial approval, "Federal AFDC" to "CalWORKS" and reworded message for clarity.	M41-440H
Deny	Deprivation	Reworded message for clarity.	M41-450A
Change	Deprivation	Changed "Federal AFDC" to "CalWORKS" and reworded message for clarity.	M41-440K
Discontinue	Deprivation	Obsolete	M41-440C
Discontinue	Deprivation	Obsolete	M41-440N
Discontinue	Deprivation	Obsolete - Combined with M41-440K	M41-440Z

State of California
Department of Social Services

Noa Msg Doc No.: M41-440F Page 1 of 1
Action : Deny
Issue: Deprivation, CalWORKS-U
Title: 100 Hour Work Rule

Auto ID No.:
Source :
Issued by :
Reg Cite : 41-401, 41-440.1(a), (c)

Use Form No. : NA 290
Original Date : 04-01-87
Revision Date : 01-01-98

MESSAGE:

The County has denied your application for cash aid dated _____.

Here's why:

The principal earner in your family has worked 100 hours or more in the last four weeks and is expected to work 100 hours or more in the next four weeks.

A principal earner is the parent who has earned the most money in the 24 months before your application for the CalWORKS Unemployed Parent program.

The principal earner in your family is _____.

INSTRUCTIONS: Use to deny CalWORKS-U when the principal earner is working more than 100 hours a month. Specify the name of the principal earner in the space provided.

This message replaces M41-440F dated 07-01-89.

file: pkian/MSERIES/dprv.41440f

State of California
Department of Social Services

Noa Msg Doc No.: M41-440H Page 1 of 1
Action : Partial Approval
Issue: Deprivation, CalWORKS-U
Title: Fail to Work Register at EDD-JS

Auto ID No.:
Source :
Issued by :
Reg Cite : 40-169.2, 41-440.1(c),
41-440.233

Use Form No. : NA 200
Original Date : 04-01-87
Revision Date : 01-01-98

MESSAGE:

As of _____, the County has approved cash aid and Medi-Cal for some members of your family. The first day of cash aid is _____. The first month's cash aid amount is \$_____.

Aid has been denied for _____.

Here's why:

The principal earner in your family has not registered with EDD-JS.

A principal earner is the parent who has earned the most money in the 24 months before your application for the CalWORKS Unemployed Parent program.

The principal earner in your family is _____.

If you do what we asked and give us all the proof and facts we need before _____, we will take another look at your application.

Your cash aid amount is figured on this page.

INSTRUCTIONS: Use to deny CalWORKS-U for the principal earner when he/she fails or refuses to register with EDD-JS. Specify the name of the principal earner in the space provided. Enter the date representing the 30th calendar day after the date of the partial approval.

This message replaces M41-440H dated 05-31-91.

file: pkian/MSERIES/dprv.41440h

State of California
Department of Social Services

Noa Msg Doc No.: M41-450A Page 1 of 1
Action : Deny
Issue: Deprivation
Title: Absent Parent in Uniformed Svcs

Auto ID No.:
Source :
Issued by :
Reg Cite :41-450.3

Use Form No. : NA 290
Original Date : 03-09-83
Revision Date : 01-01-98

MESSAGE:

The County has denied your application for cash aid dated _____.

Here's why:

Children are not eligible for cash aid based on the absence of a parent if the only reason for the absence is that the parent is on active duty in the uniformed services of the United States.

_____ is on active duty in the
_____.

If this is not correct, or you believe that you or your child(ren) may be eligible for cash aid for some other reason, please tell your worker.

INSTRUCTIONS: Use to deny cash aid when the absent parent is on active duty in a branch of the United States uniformed services. Insert the parent's name and the branch of services.

This message replaces M41-450A dated 03-09-83.

file: pkian/MSERIES/dprv.41450a

Auto ID No.:
Source :
Issued by :
Reg Cite :41-440.1(c), 41-440.233

Use Form No. : NA 290
Original Date : 05-01-87
Revision Date : 01-01-98

MESSAGE:

As of _____, the County is changing your cash aid from \$_____ to \$_____.

Here's why:

Cash aid for _____ is being stopped.

The principal earner in your family without a good reason:

- Failed to participate in Job Search.
- Refused a job referral.
- Refused or left a job.
- Did not answer EDD's call-in.
- Did not go to EDD's training.
- Other:

The principal earner is the parent who earned the most money in the 24 months before your application for the CalWORKS Unemployed Parent program.

The principal earner in your family is _____.

INSTRUCTIONS: Use to change cash aid by deleting the principal earner when he/she does not have good cause for the action specified. Enter the name of the principal earner in the space provided.

This message replaces M41-440K dated 04-08-88.

file: pkian/MSERIES/dprv.41440k

ATTACHMENT 4

NOA MESSAGES

Action	Type	New	NOA #*
Partial Approval	Drug Felons	Approve cash aid and deny any member of the AU who is a drug felon.	M44-xxc
Partial Approval	Fleeing Felons	Approve cash aid and deny any member of the AU who is a fleeing felon.	M44-xxb
Change	Drug Felons	Change cash aid and delete any member of the AU who is a drug felon.	M44-xxd
Change	Fleeing Felons	Change cash aid and delete any member of the AU who is a fleeing felon.	M44-xxa

*The NOA #s assigned to each message are temporary place holders until the actual regulation cites are issued. At that time we will notify counties of the NOA message numbers.

State of California
Department of Social Services

Noa Msg Doc No.: M44-xxc Page 1 of 1
Action : Partial Approval
Issue: Application Processing
Title: Drug Felons

Auto ID No.:
Source :
Issued by :
Reg Cite : W&IC 11251.3 & 17012.5

Use Form No. : NA 200
Original Date : 01-01-98, New
Revision Date :

MESSAGE:

As of _____, the County has approved cash aid and Medi-Cal for some members of your family. The first day of cash aid is _____. The first month's cash aid amount is \$_____.

Aid has been denied for _____ and _____.

Here's why:

_____ has been convicted of a felony for having, using or selling a controlled substance on or after January 1, 1998 for an offense committed after August 22, 1996.

Your cash aid amount is figured on this page.

INSTRUCTIONS: Use to approve cash aid and deny any member(s) of the AU who is a convicted drug felon.

file: pkian/MSERIES/df44xc

State of California
Department of Social Services

Noa Msg Doc No.: M44-xxb Page 1 of 1
Action : Partial Approval
Issue: Application Processing
Title: Fleeing Felons

Auto ID No.:
Source :
Issued by :
Reg Cite : W&IC 11486.5 & 17016

Use Form No. : NA 200
Original Date : 01-01-98, New
Revision Date :

MESSAGE:

As of _____, the County has approved cash aid and Medi-Cal for some members of your family. The first day of cash aid is _____. The first month's cash aid amount is \$_____.

Aid has been denied for _____ and _____.

Here's why:

[] _____ has been hiding or running from the law for a felony or attempted felony.

[] _____ has violated the terms of parole or probation.

Your cash aid amount is figured on this page.

INSTRUCTIONS: Use to approve cash aid and deny any member(s) of the AU who is a fleeing felon.

file: pkian/MSERIES/ff44xb

State of California
Department of Social Services

Noa Msg Doc No.: M44-xxd Page 1 of 1
Action : Change
Issue: Aid Payments
Title: Drug Felons

Auto ID No.:
Source :
Issued by :
Reg Cite : W&IC 11251.3 & 17012.5

Use Form No. : NA 200
Original Date : 01-01-98, New
Revision Date :

MESSAGE:

As of _____, the County is changing your cash aid from \$_____ to \$_____.

Here's why:

_____ and _____ can not get cash aid because he/she has been convicted of a felony for having, using or selling a controlled substance on or after January 1, 1998 for an offense committed after August 22, 1996.

Your new cash aid amount is figured on this page.

INSTRUCTIONS: Use to change the cash aid when any member(s) of the AU is a convicted drug felon.

file: pkian/MSERIES/df44xd

State of California
Department of Social Services

Noa Msg Doc No.: M44-xxa Page 1 of 1
Action : Change
Issue: Aid Payments
Title: Fleeing Felons

Auto ID No.:
Source :
Issued by :
Reg Cite : W&IC 11486.5 & 17016

Use Form No. : NA 200
Original Date : 01-01-98, New
Revision Date :

MESSAGE:

As of _____, the County is changing your cash aid from \$_____ to \$_____.

Here's why:

_____ and _____ can not get cash aid when he/she:

[] has been hiding or running from the law for a felony or attempted felony.

[] has violated the terms of parole or probation.

Your new cash aid amount is figured on this page.

INSTRUCTIONS: Use to change the cash aid and delete any member(s) of the AU who is a fleeing felon.

file: pkian/MSERIES/ff44xa

ATTACHMENT 5

NOA MESSAGES

Action	Type	Revision	NOA #
Deny	Sponsored Alien, Deemed + Family Property	Reworded message for clarity and changed property limit to \$2,000.	M43-119K
Deny	Sponsored Alien, Deemed Property	Reworded message for clarity and changed property limit to \$2,000.	M43-119L
Change	Sponsored Alien, Some needs met	Reworded message for clarity.	M43-119E
Change	Sponsored Alien, Missing CA 72	Reworded message for clarity.	M43-119G
Change	Sponsored Alien, Deemed + Family Property	Reworded message for clarity and changed property limit to \$2,000.	M43-119I
Change	Sponsored Alien, Deemed Property	Reworded message for clarity and changed property limit to \$2,000.	M43-119J
Change	Sponsored Alien, Deemed Income	Reworded message for clarity.	M43-119M
Change	Sponsored Alien, Deemed Income (Other aliens)	Obsolete - Combined with M43-119M	M43-119N
Discontinue	Sponsored Alien, Failure to report	Obsolete	M43-119A
Discontinue	Sponsored Alien, Needs met	Reworded message for clarity.	M43-119C
Discontinue	Sponsored Alien, Missing CA 72	Reworded message for clarity.	M43-119H
Discontinue	Sponsored Aliens, Deemed + Family Property	Split NOA message M43-119K and created new number.	M43-119O
Discontinue	Sponsored Aliens, Deemed Property	Split NOA message M43-119L and created new number.	M43-119P

State of California
Department of Social Services

Noa Msg Doc No.: M43-119K Page 1 of 1
Action : Deny
Issue: Sponsored Eligible Non-Citizens
Title: Deemed Sponsor's Property and
Family Property

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-119, 42-205.5

Use Form No. : NA 216
Original Date : 05-10-82
Revision Date : 01-01-98

MESSAGE:

The County has denied your application for cash
aid dated _____.

Here's why:

We count part of the property of the sponsor
and sponsor's spouse in figuring your
eligibility and cash aid.

You are not eligible for cash aid because the
countable property of the sponsor(s) and your
countable property is worth more than \$2,000.

The property is figured on this page.

INSTRUCTIONS: Use to deny a sponsored non-citizen's case when the sponsor's property
along with the sponsored non-citizen's property has made the sponsored non-citizens
ineligible.

This message replaces M43-119K dated 05-10-82.

file: pkian/MSERIES/sp.43119k

State of California
Department of Social Services

Noa Msg Doc No.: M43-119L Page 1 of 1
Action : Deny
Issue: Sponsored Eligible Non-Citizens
Title: Deemed Sponsor's Property

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-119, 42-205.5

Use Form No. : NA 216
Original Date : 05-10-82
Revision Date : 01-01-98

MESSAGE:

The County has denied your application for cash aid dated _____.

Here's why:

We count part of the property of the sponsor and sponsor's spouse in figuring your eligibility and cash aid.

You are not eligible for cash aid because the countable property of the sponsor(s) is worth more than \$2,000.

The property is figured on this page.

INSTRUCTIONS: Use to deny a sponsored non-citizen's case when the sponsor's property has made the sponsored non-citizens ineligible.

This message replaces M43-119L dated 05-10-82.

file: pkian/MSERIES/sp.431191

State of California
Department of Social Services

Noa Msg Doc No.: M43-119E Page 1 of 1
Action : Change
Issue: Sponsored Eligible Non-Citizens
Title: Some Members Needs Met

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-119

Use Form No. : NA 200
Original Date : 05-01-87
Revision Date : 01-01-98

MESSAGE:

As of _____, the County is changing your cash aid from \$_____ to \$_____.

Here's why:

_____, _____, _____, and _____ are no longer getting cash aid.

They are sponsored non-citizens in your family and the sponsor says he/she can pay for their needs.

We must stop cash aid for everybody whose needs are met. When the cash aid for part of your family stops, your total cash aid changes.

Your new cash aid amount is figured on this page.

INSTRUCTIONS: Use to change a sponsored non-citizen's case when the sponsor has can meet the needs for some of the sponsored non-citizens.

Fill in the blank with the name or names of person(s) whose needs are met.

This message replaces M43-119E dated 05-01-87.

file: pkian/MSERIES/sp.43119e

State of California
Department of Social Services

Noa Msg Doc No.: M43-119G Page 1 of 1
Action : Change
Issue: Sponsored Eligible Non-Citizens
Title: Missing CA 72

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-119

Use Form No. : NA 200
Original Date : 05-10-82
Revision Date : 01-01-98

MESSAGE:

As of _____, the County is changing your cash aid from \$_____ to \$_____.

Here's why:

Your cash aid will now be for a family of ____.
We show that _____, _____, _____,
and _____ are sponsored non-citizens.

As of the 11th of this month, the county has not received your Sponsor's Monthly Income and Resources Report (CA 72). You can not get cash aid for anyone in your family who is sponsored if you do not turn in this report.

The County must get your complete report no later than the first working day of next month.

Your new cash aid amount is figured on this page.

INSTRUCTIONS: Use to change cash aid for a sponsored non-citizen's case when the county has not received the CA 72 for any of the sponsored non-citizens.

This message replaces M43-119G dated 07-01-89.

file: pkian/MSERIES/sp.43119g

State of California
Department of Social Services

Noa Msg Doc No.: M43-119I Page 1 of 1
Action : Change
Issue: Sponsored Eligible Non-Citizens
Title: Deemed Sponsor's Property and
Family Property

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-119, 42-205.5

Use Form No. : NA 200
Original Date : 05-10-82
Revision Date : 01-01-98

MESSAGE:

As of _____, the County is changing your cash aid from \$_____ to \$_____.

Here's why:

Your cash aid will now be for a family of __.
We show that _____, _____, _____,
and _____ are sponsored non-citizens.

We count part of the property of the sponsor and sponsor's spouse in figuring their eligibility and cash aid.

This person(s) is/are not eligible for cash aid because the countable property of the sponsor(s) and the sponsored non-citizen(s) is worth more than \$2,000.

The property is figured on the next page.

Your new cash aid amount is figured on this page.

INSTRUCTIONS: Use to change a sponsored non-citizen's case when the sponsor's property along with the sponsored non-citizen's property has made the sponsored non-citizens ineligible.

Use NA 218 as a continuation page to compute the property value.

This message replaces M43-119I dated 05-10-82.

file: pkian/MSERIES/sp.43119i

State of California
Department of Social Services

Noa Msg Doc No.: M43-119J Page 1 of 1
Action : Change
Issue: Sponsored Eligible Non-Citizens
Title: Deemed Sponsor's Property

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-119, 42-205.5

Use Form No. : NA 200
Original Date : 05-10-82
Revision Date : 01-01-98

MESSAGE:

As of _____, the County is changing your cash aid from \$_____ to \$_____.

Here's why:

Your cash aid will now be for a family of ____.
We show that _____, _____, _____,
and _____ are sponsored non-citizens.

We count part of the property of the sponsor and sponsor's spouse in figuring their eligibility and cash aid.

This person(s) is/are not eligible for cash aid because the countable property of the sponsor(s) is worth more than \$2,000.

The property is figured on the next page.

Your new cash aid amount is figured on this page.

INSTRUCTIONS: Use to change a sponsored non-citizen's case when the sponsor's property value has made the sponsored non-citizens ineligible.

Use NA 218 as a continuation page to compute the property value.

This message replaces M43-119J dated 05-10-82.

file: pkian/MSERIES/sp.43119j

State of California
Department of Social Services

Noa Msg Doc No.: M43-119M Page 1 of 1
Action : Change
Issue: Sponsored Eligible Non-Citizens
Title: Deemed Sponsor's Income

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-119, 44-133.10

Use Form No. : NA 200
Original Date : 05-10-82
Revision Date : 01-01-98

MESSAGE:

As of _____, the County is changing your cash aid from \$_____ to \$_____.

Here's why:

We show that _____, _____, _____, and _____ are sponsored non-citizens.

We count a part of the income of the sponsor and sponsor's spouse in figuring their eligibility and cash aid.

The sponsor's income is figured on the next page.

Your new cash aid amount is figured on this page.

INSTRUCTIONS: Use to change a sponsored non-citizen's case when the sponsor's income affects the cash aid payment.

Use NA 215 as a continuation page to compute the sponsors income.

This message replaces M43-119M dated 05-04-87.

file: pkian/MSERIES/sp.43119m

State of California
Department of Social Services

Noa Msg Doc No.: M43-119C Page 1 of 1
Action : Discontinue
Issue: Sponsored Eligible Non-Citizens
Title: Needs Met

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-119

Use Form No. : NA 290
Original Date : 05-01-87
Revision Date : 01-01-98

MESSAGE:

As of _____, the County is stopping your cash aid.

Here's why:

You are a sponsored non-citizen and your sponsor says he/she can pay for your needs.

INSTRUCTIONS: Use to discontinue a sponsored non-citizen's case when the sponsor can meet the needs for the sponsored non-citizens.

This message replaces M43-119C dated 05-01-87.

file: pkian/MSERIES/sp.43119c

State of California
Department of Social Services

Noa Msg Doc No.: M43-119H Page 1 of 1
Action : Discontinue
Issue: Sponsored Eligible Non-Citizens
Title: Missing CA 72

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-119, 40-181.241(h), 40-181.25

Use Form No. : NA 290
Original Date : 05-10-82
Revision Date : 01-01-98

MESSAGE:

As of _____, the County is stopping your cash aid.

Here's why:

As of the 11th of this month, the county has not received your Sponsor's Monthly Income and Resources Report (CA 72). You can not get cash aid if you do not turn in this report.

The County must get your complete report no later than the first working day of next month.

INSTRUCTIONS: Use to discontinue cash aid for a sponsored non-citizen's case when the county has not received the CA 72.

This message replaces M43-119H dated 07-01-89.

file: pkian/MSERIES/sp.43119h

State of California
Department of Social Services

Noa Msg Doc No.: M43-1190 Page 1 of 1
Action : Discontinue
Issue: Sponsored Eligible Non-Citizens
Title: Deemed Sponsor's Property and
Family Property

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-119, 42-205.5

Use Form No. : NA 216
Original Date : 05-10-82
Revision Date : 01-01-98

MESSAGE:

As of _____, the County is stopping your cash aid.

Here's why:

We count part of the property of the sponsor and sponsor's spouse in figuring your eligibility and cash aid.

You are not eligible for cash aid because the countable property of the sponsor(s) and your countable property is worth more than \$2,000.

The property is figured on this page.

INSTRUCTIONS: Use to discontinue a sponsored non-citizen's case when the sponsor's property along with the sponsored non-citizen's property has made the sponsored non-citizens ineligible.

This message replaces M43-119K dated 05-10-82.

file: pkian/MSERIES/sp.43119o

State of California
Department of Social Services

Noa Msg Doc No.: M43-119P Page 1 of 1
Action : Discontinue
Issue: Sponsored Eligible Non-Citizens
Title: Deemed Sponsor's Property

Auto ID No.:
Source :
Issued by :
Reg Cite : 43-119, 42-205.5

Use Form No. : NA 216
Original Date : 05-10-82
Revision Date : 01-01-98

MESSAGE:

As of _____, the County is stopping your cash aid.

Here's why:

We count part of the property of the sponsor and sponsor's spouse in figuring your eligibility and cash aid.

You are not eligible for cash aid because the countable property of the sponsor(s) is worth more than \$2,000.

The property is figured on this page.

INSTRUCTIONS: Use to discontinue a sponsored non-citizen's case when the sponsor's property has made the sponsored non-citizens ineligible.

This message replaces M43-119L dated 05-10-82.

file: pkian/MSERIES/sp.43119p

ATTACHMENT 6

NA Forms

- o NA 215 (1/98) Continuation Page - Sponsored Non-Citizens (Deemed Income)
- o NA 216 (1/98) Sponsored Non-Citizens (Property)
- o NA 218 (1/98) Continuation Page - Sponsored Non-Citizens (Deemed Property)

Holder of the CalWORKS NOA Handbook

Insert the new NA forms and instructions in Section 5 of the NOA Handbook.

INSTRUCTIONS

NA 215 (1/98) Continuation Page - Sponsored Non-Citizens (Deemed Income)

Use as a second page to show the deemed income from the sponsor.

Fill in the gross income of the sponsor, less 20% or \$175 whichever is less. Add the unearned income and subtract the subtotal by the MBSAC for the sponsor and tax dependents living inside the household. Then subtract any amount paid by the sponsor for tax dependents living outside the house hold. Finally subtract any child/spousal support paid. Divide the subtotal by the number of sponsored non-citizens in the assistance unit. The amount on Line L is the amount available to each sponsored alien in the assistance unit.

Revision Date: 1/98 NEW
file: pkian/NAFORMS/215.instr

NOTICE OF ACTION

COUNTY OF _____

STATE OF CALIFORNIA
HEALTH AND WELFARE AGENCY
DEPARTMENT OF SOCIAL SERVICES

(Continued)

Notice Date _____
Case Name _____
Number _____

SPONSORED NON-CITIZENS (DEEMED INCOME)

A. Earned Income	\$	_____
B. Less 20% of A (Not to exceed \$175)	-	_____
C. Subtotal	=	_____
D. Unearned Income	+	_____
E. Subtotal	=	_____
F. Less MBSAC for sponsor and for tax dependents living inside the household	-	_____
G. Subtotal	=	_____
H. Less amounts paid by the sponsor for tax dependents living outside the household	-	_____
I. Less child/spousal support paid	-	_____
J. Subtotal	=	_____
K. Number of Sponsored Non-Citizens in the Assistance Unit	+	_____
L. Divide J by K	=	_____

SAMPLE

Rules: These rules apply; you may review them at your welfare office: MPP 44-133.10

State Hearing: If you think this action is wrong, you can ask for a hearing. The back of page 1 tells how.

NOTIFICACION DE ACCION

CONDADO DE _____

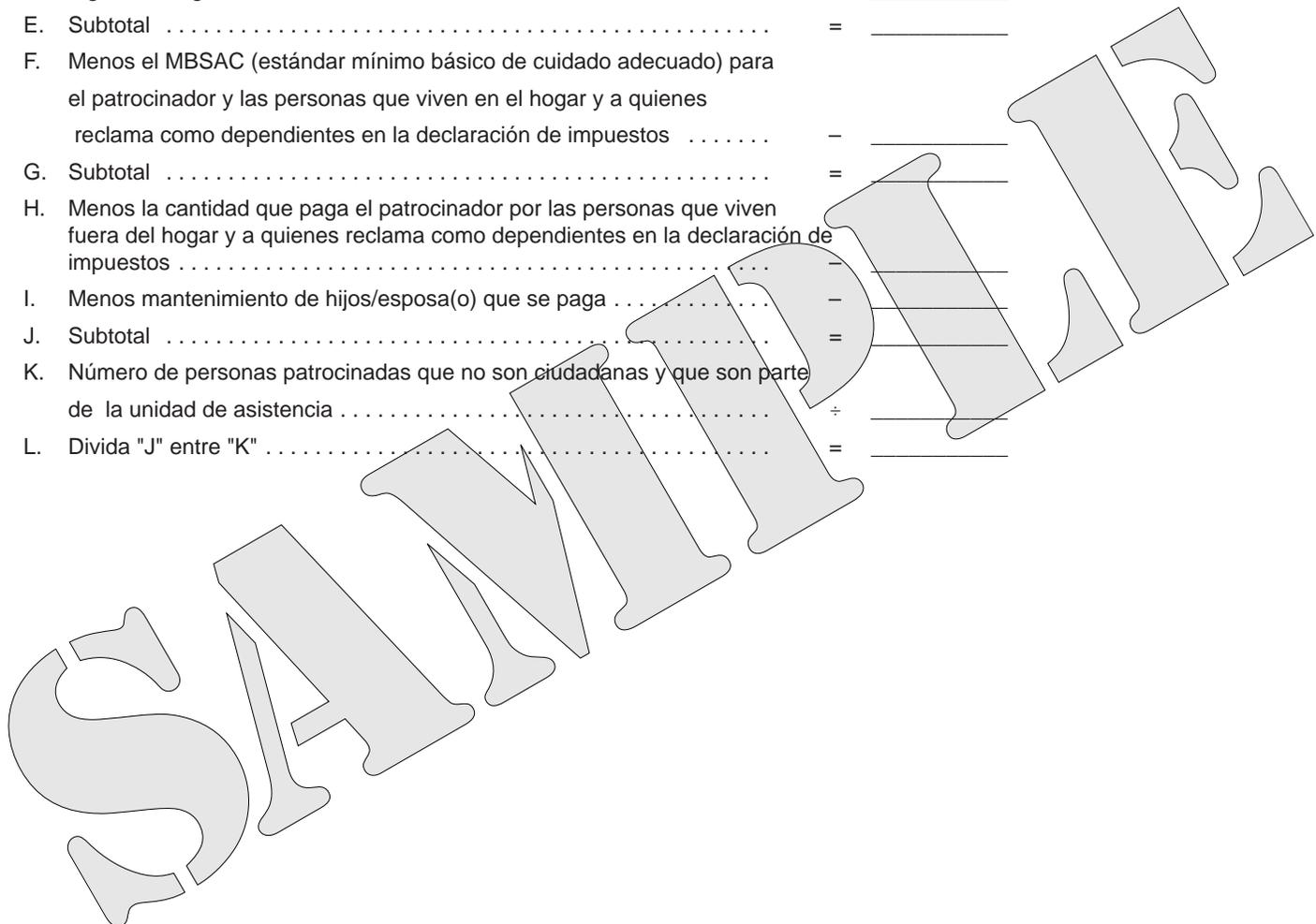
STATE OF CALIFORNIA
HEALTH AND WELFARE AGENCY
DEPARTMENT OF SOCIAL SERVICES

(Continuación)

Fecha de la notificación : _____
Nombre del caso : _____
Número : _____

PERSONAS PATROCINADAS QUE NO SON CIUDADANAS (INGRESOS QUE SE CONSIDERAN)

- A. Ingresos ganados \$ _____
- B. Menos 20% de "A" (no debe exceder \$175) - _____
- C. Subtotal = _____
- D. Ingresos no ganados + _____
- E. Subtotal = _____
- F. Menos el MBSAC (estándar mínimo básico de cuidado adecuado) para el patrocinador y las personas que viven en el hogar y a quienes reclama como dependientes en la declaración de impuestos - _____
- G. Subtotal = _____
- H. Menos la cantidad que paga el patrocinador por las personas que viven fuera del hogar y a quienes reclama como dependientes en la declaración de impuestos - _____
- I. Menos mantenimiento de hijos/esposa(o) que se paga - _____
- J. Subtotal = _____
- K. Número de personas patrocinadas que no son ciudadanas y que son parte de la unidad de asistencia ÷ _____
- L. Divida "J" entre "K" = _____



Reglas: Las siguientes reglas, las cuales puede revisar en la oficina de bienestar público, son pertinentes: MPP 44-133.10

Audiencia con el estado: Si cree que esta acción está equivocada, puede solicitar una audiencia. En el reverso de la primera página se le explica cómo solicitarla.

INSTRUCTIONS

NA 216 (1/98) Sponsored Non-Citizens (Property)

Use as a first page to show the deemed property from the sponsor.

List all items and the value of each item. Subtract \$1500 and then divide the subtotal by the number of sponsored non-citizens on CalWORKS. The amount on Line F is deemed to each sponsored non-citizen on cash aid.

Revision Date: 1/98 NEW
file: pkian/NAFORMS/216.instr

INSTRUCTIONS

NA 218 (1/98) Continuation Page - Sponsored Non-Citizens (Deemed Property)

Use as a second page to show the deemed property from the sponsor.

List all items and the value of each item. Subtract \$1500 and then divide the subtotal by the number of sponsored non-citizens on CalWORKS. The amount on Line F is deemed to each sponsored non-citizen on cash aid.

Revision Date: 1/98 NEW
file: pkian/NAFORMS/218.instr

NOTICE OF ACTION

(Continued)

COUNTY OF _____

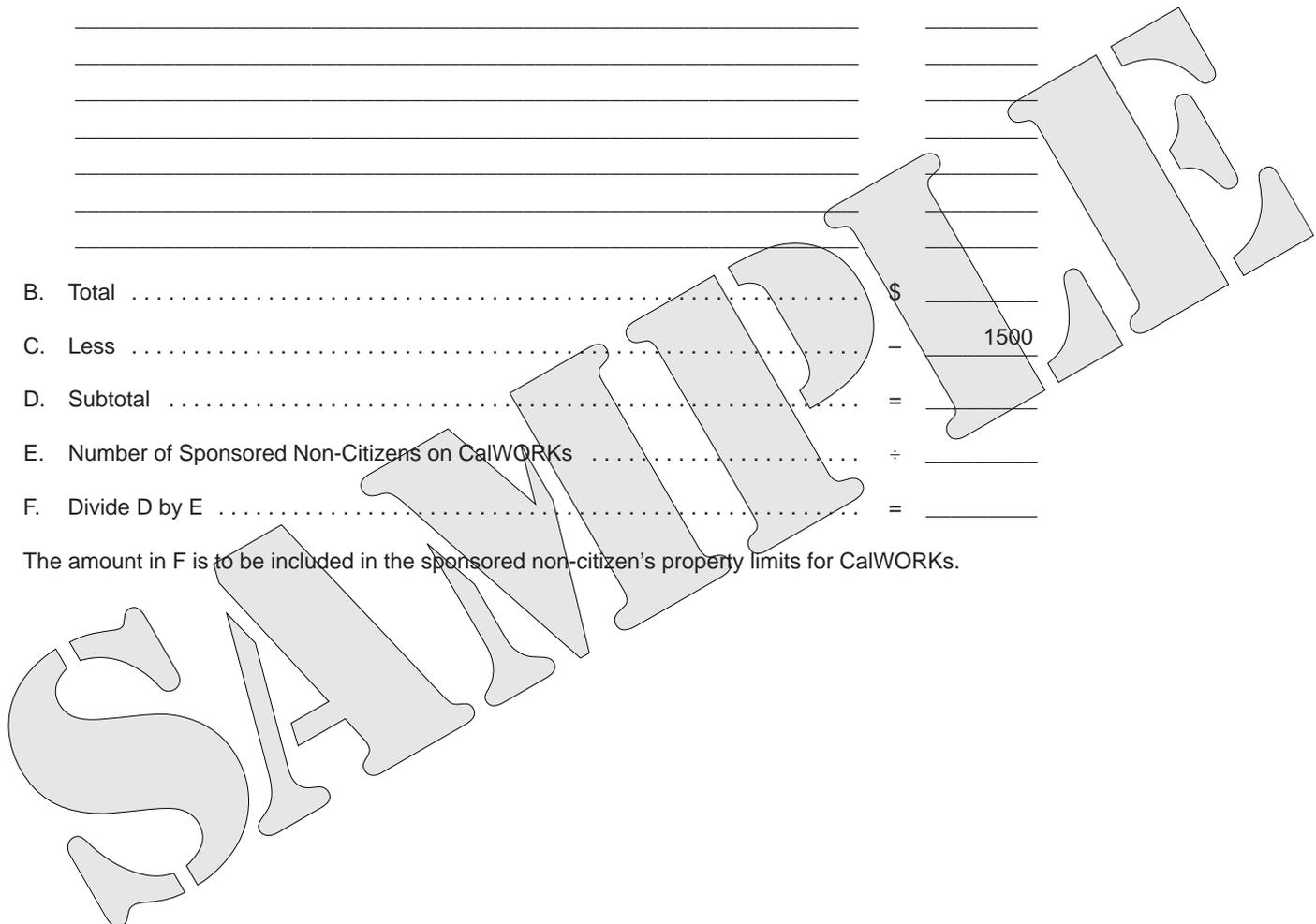
STATE OF CALIFORNIA
HEALTH AND WELFARE AGENCY
DEPARTMENT OF SOCIAL SERVICES

Notice Date _____
Case Name _____
Number _____

SPONSORED NON-CITIZENS (DEEMED PROPERTY)

A. Items:	VALUE
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
B. Total	\$ _____
C. Less	- 1500
D. Subtotal	= _____
E. Number of Sponsored Non-Citizens on CalWORKs	÷ _____
F. Divide D by E	= _____

The amount in F is to be included in the sponsored non-citizen's property limits for CalWORKs.



Rules: These rules apply; you may review them at your welfare office. MPP 42-205.5

State Hearing: If you think this action is wrong, you can ask for a hearing. The back of page 1 tells how.

NOTIFICACION DE ACCION

CONDADO DE _____

STATE OF CALIFORNIA
HEALTH AND WELFARE AGENCY
DEPARTMENT OF SOCIAL SERVICES

(Continuación)

Fecha de la notificación : _____
Nombre del caso : _____
Número : _____

PERSONAS PATROCINADAS QUE NO SON CIUDADANAS (BIENES QUE SE CONSIDERAN)

A. Artículos:	VALOR
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
B. Total	\$ _____
C. Menos	- 1500
D. Subtotal	= _____
E. Número de personas patrocinadas que no son ciudadanas y reciben CalWORKs	÷ _____
F. Dividir "D" entre "E"	= _____

La cantidad que aparece en la "F" se tomará en cuenta para el límite de CalWORKs (Programa de California de Oportunidades de Trabajo y Responsabilidad hacia los Niños) para los bienes de las personas patrocinadas que no son ciudadanas.

Reglas: Las siguientes reglas, las cuales puede revisar en la oficina de bienestar público, son pertinentes: MPP 42-205.5

Audiencia con el estado: Si piensa que esta acción está equivocada, puede solicitar una audiencia. En el reverso de la página 1 se le indica cómo solicitarla.