

## STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY **DEPARTMENT OF SOCIAL SERVICES**

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April 22, 2011

COUNTY FISCAL LETTER (CFL) No. 10/11-66

TO: ALL COUNTY WELFARE DIRECTORS

ALL COUNTY FISCAL OFFICERS

ALL COUNTY AUDITOR CONTROLLERS ALL COUNTY PROBATION OFFICERS

SUBJECT: ASSISTANCE CLAIM (CA 800) INSTRUCTIONS FOR

TITLE IV-E AID TO FAMILIES WITH DEPENDENT CHILDREN-FOSTER CARE (AFDC-FC) AND ADOPTION ASSISTANCE

PROGRAM (AAP) OVERPAYMENTS

REFERENCE: All County Letter (ACL) Nos. 06-48 and 09-64; CFL 10/11-42;

Welfare and Institutions Code (WIC) sections 11466.23 and

11466.24

This CFL is to provide instructions to implement the CA 800 reporting and claiming requirements from the provisions of Senate Bill (SB) 84 (Chapter 177, Statutes of 2007) that requires the counties to be responsible for a portion of the federal share of overpayments for the AFDC-FC and AAP retroactive to July 1, 2009.

### Reporting

As previously instructed in ACL 09-64, counties will continue to report all uncollectible and uncollected AFDC-FC and AAP overpayments for which due process has been completed. The term "uncollectible" means any overpayments that counties are unable to collect from the client for repayment pursuant to the requirements and exemptions specified in WIC sections 11466.23 and 11466.24.

The funds received by the county as payment against the overpayment is defined as collected. An "uncollected" overpayment is considered to be any collectible overpayment that has not been collected or received from the client or provider. An uncollected overpayment is not considered to be uncollectible.

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## <u>Claiming</u>

To meet the requirements of SB 84, the claiming will occur in two phases:

1) Claiming for the prior period of July 1, 2009 through December 31, 2010; and
2) Prospective claiming beginning January 2011. This CFL only provides instructions for claiming for the prior period of July 1, 2009 through December 31, 2010. Instructions for prospective claiming beginning January 2011 will be forthcoming.

## Claiming Period from July 1, 2009 through December 31, 2010

By May 25, 2011, counties are to submit a completed claim "Summary Report of Title IV-E Foster Care and Adoption Assistance Overpayments One Time Payment Adjustment For 07/01/09 – 12/31/10 Federal Share Only." The claim is identified as "OVERPAYMENTS PAY ADJ (04/11)" and is included as Attachment 1 to this letter.

The claim recovers the State's portion paid on behalf of the counties for identified collected, uncollected and uncollectible for the AFDC-FC and AAP overpayments. The amount reported on the "OVERPAYMENTS PAY ADJ (04/11)" claim will be deducted from a subsequent AFDC-FC or AAP assistance payment to the county and will be identified as an "overpayment pay adjustment" on the Statement of Cash Advance - AA 190.

The counties will determine the overpayment amount based on their previously reported CA 800 Overpayment Fed claims from the period of July 2009 through the December 2010 claiming months reflected on line 1 and line 2. The amount reported on the new claim should reflect the identified uncollected amount (line 1), less collected & adjustment amounts (line 2), less any uncollectible amount for this period (line 3). The claim will calculate the total net amount due to the state (line 5). If the counties determine that the amounts claimed on their original CA 800 Overpayment Feds claim for this time period was incorrect, the counties can make an adjustment by reporting the correct amount on the "OVERPAYMENTS PAY ADJ (04/11)" claim. Detailed instructions for the "OVERPAYMENTS PAY ADJ (04/11)" claim are included as Attachment 2 to this letter.

Please submit the completed, certified "OVERPAYMENTS PAY ADJ (04/11)" claim to California Department of Social Services (CDSS) by fax or email as specified below:

FAX: (916) 654-5993 Email: assistance.claims@dss.ca.gov

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Questions regarding this CFL should be directed to <a href="mailto:assistance.claims@dss.ca.gov">assistance.claims@dss.ca.gov</a>.

Sincerely,

## Original Document Signed By:

DIANNE OKAMOTO, Chief Fiscal Systems and Accounting Branch

Attachments

c: CWDA

## SUMMARY REPORT OF TITLE IV-E FOSTER CARE AND ADOPTION ASSISTANCE OVERPAYMENTS ONE TIME PAYMENT ADJUSTMENT FOR 07/01/09 - 12/31/10 FEDERAL SHARE ONLY

County	
Claim Contact	Telephone

		FOSTER CARE	ADOPTION
	Aid Code	42	03
	OVERPAYMENTS	Identified Overpayments Previously Reported for 07/01/09 - 12/31/10	Identified Overpayments Previously Reported for 07/01/09 - 12/31/10
1	Federal share of uncollected newly identified overpayments.		
2	Less: Federal share of overpayments COLLECTED & adjustment made on CA800FC FED or CA800A FED.		
3	Less: Federal share of uncollectible overpayments.		
4	Total (Line 1 minus Line 2 minus Line 3)		
5	County share of overpayments (FC 60% / AAP 25%) County to reimburse the State. If Line 4 is less than zero, no reimbursement will be made.		

#### COUNTY WELFARE DIRECTOR'S CERTIFICATION

I hereby certify, under penalty of perjury, that I am the official responsible for the administration of the public welfare programs in said county; that I have not violated any of the provisions of Sections 1090 to 1096, inclusive, of the Government Code; that the amounts of the aid payments, aid repayments and adjustments reflected herein have been made in accordance with all provisions of the Welfare and Institutions Code and the rules and regulations of the California Department of Social Services.

Signature of County Welfare Director	Date

### **COUNTY AUDITOR'S CERTIFICATION**

I hereby certify, under penalty of perjury, that I am the officer in aforesaid county responsible for the examination and settlement of accounts; that I have not violated any of the provisions of Sections 1090 to 1096, inclusive, of the Government Code; that the amounts reported herein are in accordance with authorizations for the above-referenced public assistance programs made by the county; that the amounts of the aid payments, aid repayments and adjustments reflected herein have been made according to law and the rules and regulations of the California Department of Social Services.

Signature of County Auditor	Date

# INSTRUCTIONS FOR FORM "OVERPAYMENTS PAY ADJ (04/11)" SUMMARY REPORT OF TITLE IV-E FOSTER CARE AND ADOPTION ASSISTANCE OVERPAYMENTS ONE TIME PAYMENT ADJUSTMENT FOR 7/1/09 – 12/31/10, FEDERAL SHARE ONLY

- 1. Enter county name.
- 2. Enter name and telephone number of county staff person to be contacted if there are any questions regarding the claim.
- Line 1: Enter the Federal Share of UNCOLLECTED newly identified overpayments that were previously reported correctly on the CA 800FC OVERPAYMENTS FED tab, or the CA 800 WAIVER OVERPAYMENTS FED tab. If these amounts were previously reported incorrectly, please enter the corrected total.
- 4. **Line 2:** Enter the Federal Share of overpayment COLLECTED & Adjustments that were previously reported correctly on the CA800FC FED tab or CA800A FED tab. If these amounts were previously reported incorrectly, please enter the corrected total.
- 5. **Line 3:** Enter the Federal Share of uncollectible overpayment.
- 6. **Line 4:** This line will automatically calculate (Line 1 minus Line 2 minus Line 3).
- 7. **Line 5:** This line will automatically calculate county share at appropriate rates due back to State. If line 4 is less than zero, no amount is due back to State.

Title IV-E Waiver Counties: Enter only the Non-Title IV-E Waiver Dollars for Foster Care overpayments previously reported for July 01, 2009 through December 31, 2010. Adoption is not a waiver program, therefore, subject to the same reporting requirements as the other non-waiver counties.