



CDSS

WILL LIGHTBOURNE
DIRECTOR

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

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EDMUND G. BROWN JR.
GOVERNOR

August 18, 2011

COUNTY FISCAL LETTER (CFL) NO. 11/12-04

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY FISCAL OFFICERS
ALL COUNTY AUDITORS CONTROLLERS
ALL COUNTY PROBATION OFFICERS

SUBJECT: REVISED ASSISTANCE CLAIM (CA 800) INSTRUCTIONS FOR
TITLE IV-E AID TO FAMILIES WITH DEPENDENT CHILDREN-
FOSTER CARE (AFDC-FC) AND ADOPTIONS ASSISTANCE
PROGRAM (AAP), OVERPAYMENTS, AND FEDERAL KINSHIP
GUARDIANSHIP ASSISTANCE PAYMENT (Kin-GAP)

REFERENCE: ALL COUNTY LETTER (ACL) NO. 11-15E, DATED
JUNE 8, 2011; CFL NO. 10/11-64, DATED MAY 2, 2011;
CFL NO. 10/11-66, DATED, APRIL 22, 2011; ACL NO. 11-15,
DATED JANUARY 31, 2011; CFL NO. 10/11-42, DATED
JANUARY 13, 2011; ACL NO. 09-64, DATED
DECEMBER 17, 2009; ACL NO. 06-48, DATED
DECEMBER 11, 2006; WELFARE and INSTITUTIONS CODE
(W&IC) SECTIONS 11466.23 and 11466.24

This CFL provides information and claiming instructions, that includes overpayments for the AFDC-FC, AAP, and the federal Kin-GAP program. New and revised claims were developed as a result of implementation of the new federal Kin-GAP program, the American Recovery and Reinvestment Act (ARRA) extension, and phase down rates of the Federal Medical Assistance Percentages (FMAP).

Retroactive to July 1, 2009, Senate Bill (SB) 84 (Chapter 177, Statutes of 2007) requires counties to be responsible for their portion of the federal share of overpayments for AFDC-FC and AAP. See ACL 09-64 dated December 17, 2009. However, SB 84 inadvertently created incorrect overpayment sharing ratios for AAP. The overpayment sharing ratios were corrected by Assembly Bill (AB) 106 (Chapter 32, Statutes of 2011) to reflect existing statutory program sharing ratios. See CFL 10/11-42, dated January 13, 2011. This overpayment authority was further extended to the new federal Kin-GAP program, which was established pursuant to AB 12 (Chapter 351, Statutes of 2010). This new program allows federal Title IV-E funds to be claimed for eligible Kin-GAP cases upon reassessment, effective January 1, 2011, pending federal approval of the state plan.

CLAIM EFFECTIVE JANUARY 2011

A new workbook has been posted on the California Department of Social Services' (CDSS) EXTRANET for counties to report expenditures and overpayments beginning with the January 2011 claim month. For the January, February, and March 2011 claims, counties should have only reported expenditures for the revised AFDC-FC, AFDC SB 163, AAP, overpayments for AFDC-FC and AAP, and the ARRA FMAP AAP-FC worksheet claims. One workbook should have been completed for each month and submitted to CDSS as previously instructed.

The affiliated claims in this workbook require a new certification. All other claims previously submitted must be excluded in this certification, except for the FC and AAP overpayment claim.

The federal government requires that all recoveries of aid and prior period adjustments be reported to the same funding rate as was in effect when the original payment was made. All positive adjustments paid in the current period in accordance with cash basis accounting are reported as current payments in the main FC/AAP CA 800 claim. Any positive prior period adjustments must be made within the 18-month claiming adjustment period. However, there is no time limit for any negative prior period adjustment. Cash basis means all payments made in the current period, even if the invoice is related to a prior period activity, are reported in the current period.

The following provides information on the revised or new claims:

CHANGES TO CLAIM FORM: CA 800A FED (1/11), TITLED "SUMMARY REPORT OF ASSISTANCE EXPENDITURES ADOPTION ASSISTANCE, EMERGENCY ASSISTANCE-FOSTER CARE (EA-FC) REFUGEE CASH ASSISTANCE (RCA), FEDERAL" (Attachment 1)

The column titled **Adoptions (Prior 10/01/08)** has been renamed to **Adoptions Prior Period Adjustments**. The specification of adjustments for periods prior to October 2008 is no longer applicable due to the 18-month claiming adjustment period. All prior period adjustments for Adoptions should be entered in the respective program columns.

The persons count for the January through March 2011 claims on the **CA 800A FED (1/11)** should match the persons count data counties previously reported on the March 2011 County Expense Claim (CEC). Any correction to the persons count in the CEC should be done on the CEC adjustment claim.

CHANGES TO CLAIM FORM: **CA 800 FC (1/11)**, TITLED “SUMMARY REPORT OF ASSISTANCE EXPENDITURES FOSTER CARE, FOSTER CARE SB 163 FEDERAL” (Attachment 2)

The columns titled **(Prior 10/01/08)** for Foster Care and SB 163 have been renamed to **Prior Period Adjustments**, in their respective areas on the form. The specification of adjustments for periods prior to October 1, 2008 is no longer applicable due to the 18-month claiming adjustment period. All prior period adjustments for FC and SB 163 should be entered in the respective program columns.

The persons count columns in the FC claim for “**(Current) Persons Count**” and “**(Prior 10/1/08) Persons Count**” has been combined into one column under “**Persons Count.**” All persons count information, regardless of the period, should now be listed in this column.

The persons count for the January through March 2011 claims on **CA 800 FC (1/11)** should match the persons count data that counties previously input on the March 2011 CEC claim. Any correction to the persons count in the CEC should be done on the CEC adjustment claim.

NEW CLAIM FORM: **ARRA FMAP AAP/FC WORKSHEET FED (1/11)**, TITLED “SUMMARY REPORT OF ADOPTIONS AND FOSTER CARE PRIOR MONTH ADJUSTMENTS-FEDERAL” (Attachment 3)

This new claim form has been added to ensure the adjustments entered in the Prior Period Adjustment columns on both the **CA 800A FED (1/11)** for Adoptions, the **CA 800 FC (1/11)** for FC and SB 163 cases are funded with the correct FMAP sharing ratio. The data on line 1 will automatically populate from the appropriate claim’s **Prior Period Adjustment** information. Counties must manually complete the actual payment period claimed in lines 2 through 4, to determine the correct rate for this adjustment on the **ARRA AAP/FC FED Worksheet (1/11)** for each program.

CHANGES TO CLAIM FORM: **CA 800 OVERPAYMENTS FED (1/11)**, TITLED “SUMMARY REPORT OF OVERPAYMENT TITLE IV-E FOSTER CARE AND ADOPTION ASSISTANCE FEDERAL SHARE ONLY” (Attachment 4)

Complete the overpayment tab for FC and AAP on this new claim for the January through March 2011 claiming months. The overpayment tab should have been blocked with the previous workbooks.

Columns have been changed to reflect the periods in which the overpayments have completed due process. The period specification is needed to ensure the overpayment reflects the correct ARRA FMAP rate for the time period the payment was claimed. Additionally, a row has been added to capture any overpayments that the county has deemed uncollectible. The term “uncollectible” is referenced in CFL 10/11-66, dated April 22, 2011.

An uncollectible overpayment is defined as any overpayment that counties are unable to collect from the client for repayment pursuant to the requirements and exemptions specified in W&IC sections 11466.23 and 11466.24. The county is required to report the overpayment amount to ensure the state reimburses the federal government. Although the county is not responsible for the uncollectible portion of the overpayment, any collections made on uncollectible overpayments must be reported on the CA 800 as a recovery of aid in order to return these funds back to the state.

CHANGES TO CLAIM FORM: CA 800 WAIVER OVERPAYMENTS (1/11), TITLED “SUMMARY REPORT OF TITLE IV-E FOSTER CARE AND ADOPTION-ASSISTANCE OVERPAYMENTS FEDERAL SHARE ONLY, TITLE IV-E WAIVER COUNTIES ONLY” (Attachment 5)

As of July 1, 2009, Title IV-E Waiver counties are responsible for their portion of the non-waiver overpayment that represents the federal share. Additionally, a row has been added to capture any overpayments the county has deemed uncollectible. Counties are required to report this amount and the state is required to reimburse the federal government at 100 percent.

Any collections on uncollectible overpayments must be reported on the CA 800 as a recovery of aid, in order to return these funds back to the state.

NEW CLAIM FORM: Kin-GAP FED (03/11), TITLED “SUMMARY REPORT OF ASSISTANCE EXPENDITURES Kin-GAP FEDERAL” (Attachment 6)

A supplemental claim and instructions has been added for AB 12, which provides provisions of the federal Kin-GAP program effective January 1, 2011. A new aid code (4T) has been established for this population. Until further notice, the supplemental claim for aid code 4T will remain outside of the CA 800. Aid codes 4F and 4G will remain on the California Work Opportunity and Responsibility to Kids claim. These claims are due by the 20th of each month (which is the same for the CA 800 claims). Refer to CFL 10/11-64 dated May 2, 2011 for detailed claiming instructions for the federal Kin-GAP program. Additional instructions for overpayments in the federal Kin-GAP program will be forthcoming.

OTHER INFORMATION

The Case Count reported on the CA 800 for the January 2011 through March 2011 claim should have been reported on the March 2011 quarterly CEC.

Due to the delayed release of the revised CA 800, counties were unable to report the case counts for January, February, and March 2011 prior to submitting the March 2011 quarterly CEC. The CDSS accepted the CEC with the case count data counties would have entered into the CA 800 for these months.

If there was any change to the case count data previously submitted for the January, February, and March 2011 CA 800, please make the appropriate changes to your county's March 2011 adjustment claim. Copies of the claims mentioned above have been attached for reference.

If you have any questions regarding the claiming issues in this CFL, please direct them to assistance.claims@dss.ca.gov. All other questions should be directed to fiscal.systems@dss.ca.gov.

Sincerely,

Original Document Signed By:

FRAN MUELLER
Deputy Director
Administration Division

Attachments

**SUMMARY REPORT OF ASSISTANCE EXPENDITURES
ADOPTION ASSISTANCE, EMERGENCY
ASSISTANCE-FOSTER CARE (EA-FC)
REFUGEE CASH ASSISTANCE (RCA),
FEDERAL**

County	Date (Month/Year)
Claim Contact	Telephone

Aid Code		Adoptions	Adoptions Prior Period Adjustments	EA-FC	RCA	Totals	
1	Main Payroll	03	03	5K	01/08		-
2	Current Month Supplemental Payroll						-
3	Current Month Cancellation Contra Roll						-
4	Prior Month Supplemental Payroll						-
5	Current Month Adjustment						-
6	Subtotal (Lines 1 - 5)	-	-	-	-		-
7	Prior month cancellation Contra Roll						-
8	Recoveries of Aid						-
9	Prior Month Negative Adjustment						-
10	Subtotal (Line 7 - 9)	-	-	-	-		-
11	Prior Month Positive Adjustment						-
12	TOTAL AID PAYMENTS, Current + Prior Months (Lines 6+10+11)	-	-	-	-		-
13	Amount Not Reimbursable with Federal Funds						-
14	Net Amount Payable (Lines 12 - 13)	-	-	-	-		-
<i>Sharing Ratios (Federal/State/County)</i>		FMAP Rate (50/37.5/12.5)	ARRA FMAP Rate	(70/0/30)	Federal: 100% of Line 14 State: 100% of Line 13		
15	Federal	-	-	-	-		-
16	State Share	-	-	-	-		-
17	County Share	-	-	-	-		-
18	THPP Rate Increase						-
<i>Sharing Ratios (Federal/State/County)</i>				(0/82/18)			
19	Federal Share						-
20	State Share						-
21	County Share						-
22	Supplemental Clothing Allowance						-
23	Federal Share (100%)						-
24	Total All Payments	-	-	-	-		-
25	Persons Count						-
<i>County Use Only</i>							
SUMMARY BY PROGRAM		Federal	Federal (ARRA)	State	State (ARRA)	County	County (ARRA)
26	Adoptions-Federal	-	-	-	-	-	-
27	EA-FC	-	-	-	-	-	-
28	RCA/Hardship (State Share is Hardship cases)	-	-	-	-	-	-
29	THPP	-	-	-	-	-	-
30	Total Federal Programs	-	-	-	-	-	-

Last Modified: 05/31/11

**SUMMARY REPORT OF ASSISTANCE EXPENDITURES
FOSTER CARE, FOSTER CARE SB 163,
FEDERAL**

County	Date (Month/Year)
Claim Contact	Telephone

Aid Code	Foster Care			SB 163			
	Persons Count	Current	Prior Period Adjustments	Current	Prior Period Adjustments		
1 Main Payroll		42	42	42	42		
2 Current Month Supplemental Payroll							
3 Current Month Cancellation Contra Roll							
4 Prior Months Supplemental Payroll							
5 Current Month Adjustment							
6 Subtotal (Lines 1 - 5)	-	-	-	-	-		
7 Prior Months Cancellation Contra Roll							
8 Recoveries of Aid							
9 Prior Month Negative Adjustment							
10 Subtotals (Lines 7 - 9)	-	-	-	-	-		
11 Prior Month Positive Adjustment							
12 Office Audit Corrections							
13 TOTAL PAYROLL, CURRENT + PRIOR MONTH (Lines 6+10+11+12)	-	-	-	-	-		
14 Amount Not Reimbursable at Fed FMAP Rate [FC 1 & Adj Col D6+E2(FFAs)+J4(Grp Homes)]							
15 TOTAL - Line 13 - Line 14							
16 THPP Rate Increase							
17 Supplemental Clothing Allowance							
18 IV-E Child Care							
19 Funeral Costs (100% State)							
20 TOTAL ALL PAYMENTS (Lines 13+16+17+18+19)	-	-	-	-	-		
Summary by Funding							
	Federal	Federal (ARRA)	State	State (ARRA)	County	County (ARRA)	Total
21 Foster Care	-	-	-	-	-	-	-
22 Fed Adm Costs (FC1 & Adj Col E4)	-	-	-	-	-	-	-
23 Non Fed. Admin Costs (FC1 & Adj Col F2)	-	-	-	-	-	-	-
24 THPP Rate Increase	-	-	-	-	-	-	-
25 Supplemental Clothing Allowance	-	-	-	-	-	-	-
26 IV-E Child Care	-	-	-	-	-	-	-
27 Funeral Costs	-	-	-	-	-	-	-
28 Total Payment Federal Foster Care	-	-	-	-	-	-	-
29 SB 163-Basic	-	-	-	-	-	-	-
30 Fed Adm Costs (FC1_SB163 & Adj Col E4)FFAs x 50%	-	-	-	-	-	-	-
31 Total Payment SB 163	-	-	-	-	-	-	-
32 Total Foster Care and SB 163	-	-	-	-	-	-	-

**SUMMARY REPORT OF ADOPTION AND FOSTER CARE PRIOR MONTH
ADJUSTMENTS - FEDERAL**

County	Date (Month/Year)
Claim Contact	Telephone

Prior Month Adjustments Distribution			
		CA800A FED	CA800FC FED
		Adoptions (03)	Foster Care (42) SB 163 (42)
1	Total Prior Month Adjustment Per Claim	-	-
2	Total net costs prior to 10/01/08 at 50% <i>(Please Note: Negative adjustments only. No positive adjustment allowed, 18 month claiming limit)</i>		
3	Total net costs between 10/01/08 - 12/31/10 at 56.2%		
4	Total net costs between 01/01/11 - 03/31/11 at 53.2%		
5	Total net costs between 04/01/11 - 06/30/11 at 51.2%		

	Summary ARRA FMAP by Funding	Federal	State	County
6	Adoptions (6.2/-4.65/-1.55)	-	-	-
7	Adoptions (3.2/-2.4/-0.8)	-	-	-
8	Adoptions (1.2/-0.9/-0.3)	-	-	-
9	Foster Care (6.2/-2.48/-3.72)	-	-	-
10	Foster Care (3.2/-1.28/-1.92)	-	-	-
11	Foster Care (1.2/-0.48/-0.72)	-	-	-
12	SB 163 (6.2)	-		
13	SB 163 (3.2)	-		
14	SB 163 (1.2)	-		
15	TOTAL	-	-	-
16	CROSSCHECK: (MUST BE = 0)			

**SUMMARY REPORT OF OVERPAYMENT
TITLE IV-E FOSTER CARE AND ADOPTION ASSISTANCE
FEDERAL SHARE ONLY**

County	Date (Month/Year)
Claim Contact	Telephone

Aid Code	FOSTER CARE (FC)					ADOPTION (AAP)				
	42					03				
OVERPAYMENTS	Identified Overpayments that completed due process prior to 07/01/09	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 50%	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 56.2%	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 53.2%	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 51.2%	Identified Overpayments that completed due process prior to 07/01/09	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 50%	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 56.2%	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 53.2%	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 51.2%
1 Federal Share of Overpayments COLLECTED & Reported on CA 800 FC FED or CA 800A FED in Current Claiming Month (Already Paid to Federal Government)										
2 Federal Share of Uncollected Newly Identified Overpayments in Current Claiming Month (Due to Federal Government)										
3 Federal Share of Uncollectible Overpayments Identified in Current Claiming Month W&IC 11466.23 (c) (1) (Due to Federal Government)										

Summary by Funding	FC				AAP			
	Federal	State Responsibility	County Responsibility	Total	Federal	State Responsibility	County Responsibility	Total
4 Overpayments Collected (Completion of Due Process prior to 07/01/09) FC/AAP(100/0)	-	-		-	-	-		-
5 Overpayments Collected (Completion of Due Process Beginning 07/01/09 to present) FC(40/60) AAP(75/25)	-	-	-	-	-	-	-	-
6 Overpayments Identified (Completion of Due Process Beginning 07/01/09 to present) FC(40/60) AAP(75/25)	-	-	-	-	-	-	-	-
7 Uncollectible Overpayments FC/AAP(100/0)	-	-		-	-	-		-
8 Total Overpayments	-	-	-	-	-	-	-	-

Last Modified: 05/31/11

**SUMMARY REPORT OF TITLE IV-E FOSTER CARE AND ADOPTION ASSISTANCE OVERPAYMENTS
FEDERAL SHARE ONLY
TITLE IV-E WAIVER COUNTIES ONLY**

County	Date (Month/Year)
Claim Contact	Telephone

Aid Code	FOSTER CARE (FC)		ADOPTION (AAP)				
	42		03				
OVERPAYMENTS	Identified Overpayments that completed due process prior to 07/01/09	Identified Overpayments that completed due process beginning 07/01/09	Identified Overpayments that completed due process prior to 07/01/09	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 50%	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 56.2%	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 53.2%	Identified Overpayments that completed due process beginning 07/01/09 and paid at FMAP Rate 51.2%
1 Federal Share of <u>Non-Title IV-E Waiver Dollar</u> Overpayments COLLECTED & reported on CA 800 FC FED or CA 800A FED in Current Claiming Month (Already Paid to Federal Government)							
2 Federal Share of Uncollected Newly Identified <u>Non-Title IV-E Waiver Dollar</u> Overpayments in Current Claiming Month (Due to Federal Government)							
3 Federal Share of Uncollectable <u>Non-Title IV-E Waiver Dollar</u> Overpayments identified in Current Claiming Month W&C 11466.23 (c) (1) (Due to Federal Government)							

Summary by Funding	FC				AAP			
	Federal	State Responsibility	County Responsibility	Total	Federal	State Responsibility	County Responsibility	Total
4 Overpayments Collected (Completion of Due Process prior to 07/01/09) FC/AAP(100/0)	-	-		-	-	-		-
5 (Completion of Due Process Beginning 07/01/09 to present) FC(40/60) AAP(75/25)	-	-	-	-	-	-	-	-
6 (Completion of Due Process Beginning 07/01/09 to present) FC(40/60) AAP(75/25)	-	-	-	-	-	-	-	-
7 Uncollectible Overpayments FC/AAP(100/0)	-	-		-	-	-		-
8 Total Overpayments	-	-	-	-	-	-	-	-

**SUMMARY REPORT OF ASSISTANCE EXPENDITURES
Kin-GAP FEDERAL**

County	Date (Month/Year)
Claim Contact	Telephone

		Kin-GAP FED
Aid Code		4T
1	Main Payroll	
2	Current Month Supplemental Payroll	
3	Current Month Cancellation Contra Roll	
4	Prior Month Supplemental Payroll	
5	Current Month Adjustment	
6	Subtotal (Lines 1 - 5)	-
7	Prior Month Cancellation Contra Roll	
8	Recoveries of Aid	
9	Prior Month Negative Adjustment	
10	Subtotal (Lines 7 - 9)	-
11	Prior Month Positive Adjustment	
12	TOTAL AID PAYMENTS, Current + Prior Months (Lines 6+10+11)	-
13	Supplemental Clothing Allowance	
14	Number of Children Non-Recurring Payments	
15	Persons Count	

SUMMARY BY FUNDING		Federal	Federal (ARRA)	State	State (ARRA)	County	County (ARRA)	Total
16	Kin-GAP	-	-	-	-	-	-	-
17	Supplemental Clothing Allowance	-	-	-	-	-	-	-
18	Total	-	-	-	-	-	-	-

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 that 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
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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 Section 1090 to 1096, inclusive, of the Government Code; that the amounts claimed herein are in accordance with authorizations for the above-referenced public assistance programs made by the county; that said amounts correctly reflect Federal, State and County shares in the aid payments claimed and that warrants therefore have been issued, according to law and the rules and regulations of the California Department of Social Services.

Signature of County Auditor	Date
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