

NOTICE OF FORM CHANGE NO. 03-048

DATE

5/6/03

TO:County Welfare Director
Supply Clerk / Forms Coordinator**FROM:**Forms Management Unit
(916) 657-1907 Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other

Listed below is information regarding a form change. Only applicable information is shown.

This notice updates your Department of Social Services County Forms Catalog.

FORM NUMBER AND TITLE

CA 800 FC (FED) PIA (4/03) CA 800 FC (FED) Placement Information Addendum

ORDER UNIT MASTER ONLY	<input checked="" type="checkbox"/> Free <input type="checkbox"/> Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised	DATE OF FORM 4/03	REPLACES	<input type="checkbox"/> Obsolete
REQUIRED FORM- <input checked="" type="checkbox"/> No Change Permitted	REQUIRED FORM- <input type="checkbox"/> Substitute Permitted With Prior DSS Approval		<input type="checkbox"/> Recommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788		<input type="checkbox"/> OTHER:	

FORMS DISPOSITION AND SPECIAL INSTRUCTIONS

DISPOSITION OF OLD SUPPLY

 Use until exhausted Destroy

USE NEW FORM

 When supply available in DSS Warehouse Use new form effective immediately

USE FORM IN ACCORDANCE WITH

 All County Letter No. Other (specify) County Fiscal Letter No. 02/03-50

ADDITIONAL INFORMATION REGARDING FORM CHANGE

Attached are a Reproducible Copies

Check on the Internet to see if forms are available at www.dss.cahwnet.gov.For camera-ready copies of English and Spanish forms, please call the Forms Management Unit (FMU) at (916) 657-1907, or by electronic mail at: fmudss@dss.ca.gov. Contact Language Services for other languages at (916) 445-6778 or by electronic mail at LTS@dss.ca.gov.

CA 800 FC (FED) PLACEMENT INFORMATION ADDENDUM

COUNTY NAME		CLAIMING MONTH	
Column 1 CATEGORY	Column 2 TOTALS	Column 3 GRAND TOTALS (Combined Totals of Column 2)	
PERSON'S COUNT			
All Person's Counts that Roll into the CA 800 FC (FED) form, Line A11			
1. Number of persons in Group Homes for the month	_____		
	LINE 1		
2. Number of persons in Foster Family Agency (FFA) Homes for the month	_____		
	LINE 2		
3. Number persons in licensed Foster Family Homes for the month	_____		
	LINE 3		
4. Number of persons in Approved Relative Homes for the month	_____		
	LINE 4		
5. Total Person's Count for the month (Sum of the above)		_____	LINE 5
MAIN PAYROLL			
All Maintenance Payment Amounts that Roll into the CA 800 FC (FED) form, Line B11			
6. Total maintenance payments for persons in Group Homes	_____		
	LINE 6		
7. Total maintenance payments for persons in Foster Family Agency (FFA) Homes	_____		
	LINE 7		
8. Total maintenance payments for persons in licensed Foster Family Homes	_____		
	LINE 8		
9. Total maintenance payments for Approved Relative Homes	_____		
	LINE 9		
10. Total Maintenance Payments for the month (Sum of the above)		_____	LINE 10
PRIOR PERIOD ADJUSTMENTS			
Prior Period Adjustments for Approved Relative Homes			
11. Total Prior Period Negative Adjustments for the month	_____		
	LINE 11		
12. Total Prior Period Negative Adjustments for Approved Relative Homes included on Line 11 above.	_____		
	LINE 12		
13. Total Prior Period Negative Adjustments for Approved Relative Homes unallowable placement costs reported January 1 through December 31, 2002	_____		
	LINE 13		
14. Adjustment Totals (See Instruction Sheet for calculation instructions)		_____	LINE 14

CA 800 FC (FED) PIA Instruction Sheet

Person's Count

Using the Person's Counts from Line 11A on the CA 800 FC (FED) form:

Line 1 - Enter the total number of persons in Group Homes for the month in Column 2.

Line 2 - Enter the total number of persons in Foster Family Agency (FFA) homes for the month in Column 2.

Line 3 - Enter the total number of persons in Licensed Foster Family Homes for the month in Column 2.

Line 4 - Enter the total number of persons in Approved Relative Homes for the month in Column 2.

Line 5 - Add Lines 1 through 4 in Column 2 of the Person's Count section and enter the Grand Total in Column 3.

Main Payroll

Using the Maintenance Payment costs from Line 11B on the CA 800 FC (FED) form:

Line 6 - Enter the total maintenance payment costs for the persons in Group Homes for the month in Column 2.

Line 7 - Enter the total maintenance payment costs for the persons in FFA homes for the month in Column 2.

Line 8 - Enter the total maintenance payment costs for the persons in Licensed Foster Family Homes for the month in Column 2.

Line 9 - Enter the total maintenance payment costs for the persons in Approved Relative Homes for the month in Column 2.

Line 10 - Add Lines 6 through 9 in Column 2 of the Main Payroll section and enter the Grand Total in Column 3.

Prior Period Adjustments

Using the Prior Period Adjustments from line B8 on the CA 800 FC (FED) form:

Line 11 - List total Negative Prior Period Adjustments for the current month in Column 2.

Line 12 - Enter the total Prior Period Negative Adjustments for Approved Relative Homes that are included in the amount listed on Line 11 above that represent relative placement costs that are not eligible for Federal Financial Participation (FFP).

Line 13 - Enter the total amount of Prior Period Negative Adjustments for Approved Relative Homes on Line 12 above that represent relative placement payments made from January 1 through December 31, 2002 that are not eligible for Federal Financial Participation (FFP) in Column 2.

Calculation

Line 14 - Subtract Line 13 from Line 11 and list the total. This Grand Total will then be listed as the Prior Period Negative Adjustments on Line B8 of the CA 800 FC (FED) form. (Associated Persons Counts for Line 14, while not reported on this form, should be backed out of Line 8A on the CA 800 FC (FED) form).