NOTICE OF FORM CHANGE NO. 04-046					DATE		
					02/20/2004		
TO: County Welfare Director Supply Clerk / Forms Coordinator			FROM: Forms Management Unit (916) 657-1907				
Community Care Licens	~		District Attorney Other				
Listed below is information re	garding a form change. Or	nly applica	ble information is show	/n.			
This notice updates your Dep	artment of Social Services	County F	orms Catalog.				
FORM NUMBER AND TITLE CA 800 F	C FED PIA (1/30/04) Foste Fede		acement Information A	ddendum	ı (PIA)		
ORDER UNIT MASTER ONLY	⊠ Free ☐ Sold	ESTIMATED	PRICE		INITIAL SUPPLY SENT  Yes No		
☐ New ☐ Revised	DATE OF FORM 1/30/04*	REPLACES 1/04*			Obsolete		
REQUIRED FORM-  No Change Permitted	REQUIRED FORM-  Substitute Permitte	ed With Pr	rior DSS Approval	Rec	commended Form		
UNLESS OTHERWISE SPECIFIED STOU Department of Social Service P.O. Box 980788 West Sacramento, CA 9579	ces Warehouse		Other:				
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS							
DISPOSITION OF OLD SUPPLY  Use until exhausted		⊠ De	stroy				
USE NEW FORM  ☐ When supply available in DSS Warehouse			☐ Use new form effective immed		ately.		
USE FORM IN ACCORDANCE WITH  ☐ All County Letter No.  ☐ Other (specify)  CF	FL 03/04-38, CFL 03/04-39	, CFL 03/0	04-40, CFL 03/04-40 E	rrata			
ADDITIONAL INFORMATION REGARDING FOR Attached is a Reproducible C	RM CHANGE		·				

\* The 1/30/04 revision of the CA 800 FC FED PIA was released before a GEN 127, Notice of Form Change, could be issued for the 1/04 revision, so there is no GEN 127 for the 1/04 revision of this form.

The CA 800 FC FED PIA (1/04) was a revision of the 4/03 version of this form. It is a Microsoft Excel document.

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.

# FOSTER CARE PLACEMENT INFORMATION ADDENDUM (PIA) FEDERAL- PERSONS COUNT

	COUNTY NAME	CLAIMING MONTH
	CATEGORY	TOTALS
	Persons Count	
1	Group Homes	
2	Foster Family Agency (FFA) Homes	
3	Licensed Foster Family Homes	
4	Approved Relative Homes	
5	Total Persons Count (Lines 1-4)	-
_		
	Main Payroll	
6	Group Homes	
7	FFA Homes	
8	Licensed Foster Family Homes	
9	Approved Relative Homes	
10	Total Main Payroll (Lines 6-9)	-
11	Total Prior Period Negative Adjustments for the Month	
12	Total Prior Period Negative Adjustments for Approved Relative Homes included in Line 11.	
	Prior Period Negative Adjustments for Approved Relative Homes - Unallowable Placements Costs	
	Reported January 1 through December 31, 2002	
14	Total Adjustments (Line 13 - Line 11)	_

CA 800 FC FED PIA (1/30/04)

# INSTRUCTIONS FOR THE FORM CA 800 FC FED PIA PLACEMENT INFORMATION ADDENDUM

Enter County Name and Date (Month and year).

## Persons Count

- Line 1: Enter the total number of persons in Group Homes.
- Line 2: Enter the total number of persons in Foster Family Agency (FFA) homes.
- Line 3: Enter the total number of persons in Licensed Foster Family Homes.
- Line 4: Enter the total number persons in Approved Relative Homes.
- Line 5: Total Persons Count for the Month (Lines 1 through 4). This amount will calculate automatically.

#### Main Payroll

- Line 6: Enter the total maintenance payments for Group Homes.
- Line 7: Enter the total maintenance payments for FFA's.
- Line 8: Enter the total maintenance payments for Foster Family Homes.
- Line 9: Enter the total maintenance payments for Approved Relative Homes.
- Line 10: Total Maintenance Payments for the Month (lines 6 through 9). This amount will calculate automatically.

# **Prior Period Adjustments**

Using the Prior Months Adjustments from Lines 9 of the CA 800FC FED:

- Line 11: Enter the total Prior Months Negative Adjustments for the current month.
- Line 12: Enter Total Prior Months Negative Adjustments for Approved Relative Homes that are included on Line 11 above and that represent relative placement costs that are not eligible for Federal Financial Participation (FFP).
- Line 13 Enter the total amount of Prior Period Negative Adjustment for Approved Relative Homes that are included in Line 12 above that represent unallowable placements costs for January 1 through December 31, 2002.

## **Calculation**

Line 14 Net Prior Period Adjustment (Lines 13 – 11). This amount will calculate automatically.