NOTICE OF FORM CHA	3/15/2005							
To: County Welfare Dir Supply Clerk / Forr			FROM: Forms Management Unit (916) 657-1907					
Community Care Licens	•	☐ District Attorney ☐ Other						
Listed below is information re	garding a form change. O	nly applicable information is show	vn.					
This notice updates your Dep	artment of Social Services	County Forms Catalog.						
FORM NUMBER AND TITLE TEMP CA	A 800 ROSALES ADMIN (2	2/05) Rosales v. Thompson Reti - Administrative Costs	roactive Payments					
ORDER UNIT MASTER ONLY	⊠ Free ☐ Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT  ☐ Yes ⊠ No					
New □ Revised	DATE OF FORM 2/05	REPLACES	Obsolete					
REQUIRED FORM-  No Change Permitted	REQUIRED FORM- Substitute Permitte	ed With Prior DSS Approval	Recommended Form					
UNLESS OTHERWISE SPECIFIED STOU Department of Social Service P.O. Box 980788 West Sacramento, CA 9579	ces Warehouse	Other:						
	FORMS DISPOSITION	ON AND SPECIAL INSTRUCTION	DNS					
Use until exhausted		Destroy	Destroy					
USE NEW FORM  When supply available in	n DSS Warehouse	□ Use new form effective	immediately.					
□ All County Letter No. □ Other (specify)								
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE							

This is a Microsoft Excel document and is the available on the Financial Services Bureau Automated Assistance Claims Webpage.

This form was originally posted on the above webpage with a 1/05 revision date on the form and a 2/05 revision date on the instructions. This has been corrected and both the form and instructions now have a 2/05 revision date. There is no difference in the content of the 1/05 form and the 2/05 form.

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.

#### **ROSALES V. THOMPSON PAYMENTS - ADMINISTRATIVE COSTS December 23, 1997 - December 31, 2003 CALCULATION WORKSHEET**

[All Decolor daims must be submitted no later than April 20, 2005. Only one claim may be submitted for the entire paried]

			[All Rosal	es claims n	nust be subi	mitted no lat	ter than April 30, 200 County Contact	5. Only one	e claim may be su	bmitted for the	enitre period].	ı		
	County Name						County Contact		Telephone No.		Date Submitted			
			Α						•	В				
	Ratio Calculation													
		1	2	3	4	5		6	7					
FFY		CEC		Rosales	Revised	Revised	1		Expenditures for	Total	50%	70%	30%	Net Paym
		Cases	Ratio	Cases	Cases	Ratio		Rate	CEC Codes	Adjustment*	Federal	State	County	to Count
	Federal Cases		0.00		0	0.00	Revised Fed	0.00		0	0	0	0	
							Revised NonFed	0.00		0	0	0	0	
	Nonfederal Cases		0.00		0	0.00	Original Fed	0.00		0	0	0	0	
							Original NonFed	0.00		0	0	0	0	
	Total	0	0.00	0	0	0.00								
			-	=	-	=	Incremental Diff.			0	0	0	0	
	_													
1999	Federal Cases		0.00		0	0.00	Revised Fed	0.00		0	0	0	0	
							Revised NonFed	0.00		0	0	0	0	
	Nonfederal Cases		0.00		0	0.00	Original Fed	0.00		0	0	0	0	
							Original NonFed	0.00		0	0	0	0	
	Total	0	0.00	0	0	0.00	)							
							Incremental Diff.			0	0	0	0	
2000	Federal Cases		0.00		0	0.00	Revised Fed	0.00		0	0	0	0	
							Revised NonFed	0.00		0	0	0	0	
	Nonfederal Cases		0.00		0	0.00	Original Fed	0.00		0	0	0	0	
					-		Original NonFed	0.00		0	0	0	0	
	Total	0	0.00	0	0	0.00		0.00		J	-	<u> </u>	· ·	
	10101	J	0.00		<u> </u>	0.00	Incremental Diff.			0	0	0	0	
							moremental Bill.		l	Ŭ	<u> </u>	<u> </u>	<u> </u>	
2001	Federal Cases		0.00		0	0.00	Revised Fed	0.00		0	0	0	0	
	. 545141 54555		0.00			0.00	Revised NonFed	0.00		0	0	0	0	
	Nonfederal Cases	+	0.00		0	0.00	Original Fed	0.00		0	0	0	0	
	Nomicucial Cases		0.00		0	0.00	Original Ped Original NonFed	0.00		0	0	0	0	
	Total	0	0.00	0	0	0.00		0.00		U	U	U	U	
	Total	U	0.00	U	U	0.00	Incremental Diff.		1	0	0	0	0	
							incremental Dill.			U	0	υŢ	U	
2002	Federal Cases		0.00		0	0.00	Revised Fed	0.00		0	0	٥	0	
2002	rederal Cases		0.00		U	0.00				0	0	0	0	
	Nonfodonal O		0.00			0.00	Revised NonFed	0.00		Ŭ	Ŭ	0	U	
	Nonfederal Cases		0.00		0	0.00	Original Fed	0.00		0	0	0	0	
							Original NonFed	0.00		0	0	0	0	
	Total	0	0.00	0	0	0.00			1					
							Incremental Diff.			0	0	0	0	

## ROSALES V. THOMPSON PAYMENTS - ADMINISTRATIVE COSTS December 23, 1997 - December 31, 2003 CALCULATION WORKSHEET

[All Rosales claims must be submitted no later than April 30, 2005. Only one claim may be submitted for the enitre period].

	County Name		į m recom	oo diaiiiio ii	indot bo odbi		County Contact	A April 30, 2005. Only one claim may be submitted for the				Date Submitted				
		Α				В										
		F	Ratio Calcula	tion												
FFY		1 CEC	2	3 Rosales	4 Revised	5 Revised		6	7 Expenditures for	Total	50%	70%	30%	Net Paymt		
		Cases	Ratio	Cases	Cases	Ratio		Rate	CEC Codes	Adjustment*	Federal	State	County	to County		
2003	Federal Cases		0.00		0	0.00	Revised Fed	0.00		0	0	0	0			
							Revised NonFed	0.00		0	0	0	0			
	Nonfederal Cases		0.00		0	0.00	Original Fed	0.00		0	0	0	0			
							Original NonFed	0.00		0	0	0	0			
	Total	0	0.00	0	0	0.00										
J						Incremental Diff.			0	0	0	0	0			
Dec	Federal Cases		0.00		0	0.00	Revised Fed	0.00		0	0	0	0			
2003							Revised NonFed	0.00		0	0	0	0			
Qtr	Nonfederal Cases		0.00		0	0.00	Original Fed	0.00		0	0	0	0			
							Original NonFed	0.00		0	0	0	0			
	Total	0	0.00	0	0	0.00										
		_					Incremental Diff.		-	0	0	0	0	0		
TOTAL CL	AIM*									0	0	0	0	C		

<sup>\*</sup>The total claim amount will automatically carry forward to the Summary by Funding page.

# INSTRUCTIONS FOR TEMP CA 800 ROSALES ADMINISTRATION COSTS CLAIM FORM ROSALES V. THOMPSON RETROACTIVE PAYMENTS DECEMBER 23, 1997 – DECEMBER 31, 2003

#### **General Information**

- 1. Submission of administrative costs claim for the time-period December 23, 1997, through December 31, 2003, is at the county's option. If the county chooses to submit this claim form, it is located on the tab labeled "Admin Worksheet" in the TEMP CA 800 Rosales (1/05) Excel Workbook.
- 2. Costs must be calculated outside of the normal CEC process using TEMP CA 800 Rosales V. Thompson Retroactive Payments Administrative Costs Calculation Worksheet. This form is designed to calculate and compare the audited administrative costs for the codes listed on Attachment F, before and after applying the adjusted federal/nonfederal discount ratios.
- 3. The county's reimbursement amount will be the net increase in federal funds as offset by corresponding reductions in Federal/State funds.
- For the administrative cost adjustments, each case paid can be added to the numerator (total Federal Foster Care cases) <u>only</u> if cases were previously included in the denominator (total Foster Care cases).
- All of the gray shaded cells on this page of the workbook either have formulas or are not for data entry. These cells are protected and no data may be entered.
- 6. Counties must retain all supporting documentation for audit purposes.

#### **Administrative Costs Claim**

The following instructions are to be applied for each Federal Fiscal Year.

#### **Section A - Columns**

- 1. CEC Cases: Enter the current number of federal and non-federal cases provided on page 2 of the DFA 325.1, Lines AD and AE.
- 2. Ratio: This column will automatically calculate. **No entries are to be made in this column**.
- Rosales Cases: Enter the number of Rosales cases that are being shifted from Nonfederal to Federal Foster Care (Nonfederal Cases should show a negative number, i.e, "-5").
- 4. Revised Cases: This column will automatically calculate. **No entries are to be made in this column**.
- 5. Revised Ratio: This column will automatically calculate. **No entries are to be made in this column**.

### Section B - Columns

- 6. Rate Column: This column will automatically calculate the original and revised Federal Discount Rate based on the information provided in Section A. **No entries are to be made in this column.**
- 7. Expenditures CEC Codes Column: Enter the total expenditures on the Row titled "Incremental Difference" in the appropriate FFY for the CEC Codes identified in Attachment F.

**NOTE:** All remaining cells in Section B are calculated automatically. **No entries are to be made** in the remaining cells in this Section.

All calculations are linked to the tab labeled "Summary Cert Page". **No entries** are to be entered on this page of the workbook.