

May 27, 2020

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

**EXECUTIVE SUMMARY**

**COUNTY FISCAL LETTER NO. 19/20-89**

This letter provides special claiming instructions to counties for specific Children and Non-Minor Dependent programs impacted by the Coronavirus (COVID-19) pandemic.



**KIM JOHNSON**  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
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**GAVIN NEWSOM**  
GOVERNOR

May 27, 2020

COUNTY FISCAL LETTER NO. 19/20-89

TO: ALL COUNTY WELFARE DIRECTORS  
ALL CHIEF PROBATION OFFICERS  
ALL TITLE IV-E AGREEMENT TRIBES  
ALL COUNTY WELFARE OFFICERS  
ALL COUNTY FISCAL OFFICERS  
ALL FOSTER CARE MANAGERS  
ALL INDEPENDENT LIVING PROGRAM MANAGERS

SUBJECT: CLAIMING INSTRUCTIONS FOR CHILDREN AND NON-MINOR  
DEPENDENT PROGRAMS IMPACTED BY THE COVID-19  
PANDEMIC

REFERENCE: [HOUSE RESOLUTION 6201: FAMILIES FIRST CORONAVIRUS  
RESPONSE ACT](#)  
[GOVERNOR'S EXECUTIVE ORDER N-53-20, DATED  
APRIL 17, 2020](#)  
[ALL COUNTY LETTER \(ACL\) NO. 20-47, DATED APRIL 21, 2020](#)  
[ACL NO. 20-45, DATED APRIL 18, 2020](#)  
[ACL NO. 20-44, DATED APRIL 17, 2020](#)  
[ACL NO. 20-43, DATED APRIL 17, 2020](#)  
[ACL NO. 20-25, DATED MARCH 21, 2020](#)  
[ACL NO. 17-11, DATED JANUARY 31, 2017](#)  
[ACL NO. 11-77, DATED NOVEMBER 18, 2011](#)

The purpose of this letter is to provide county child welfare agencies, juvenile probation departments, and Title IV-E Agreement Tribes with guidance on how to claim costs for the emergency care and specific placement needs of Children and Non-Minor Dependents (NMD) during the current state of emergency related to the Coronavirus (COVID-19) pandemic. This letter also introduces the CA 800 COVID-19 tab within the CA 800CCR workbook for reimbursement of costs and provides instructions associated with the temporary increase in rates that may be needed to care for these youth as a result of the COVID-19.

## **BACKGROUND**

On March 4, 2020, Governor Newsom issued a Proclamation of a State of Emergency for California in response to the COVID-19 in California. Accordingly, the California Department of Social Services (CDSS) has issued the above referenced programmatic guidance pursuant to House Resolution (HR) 6201 and multiple Executive Orders (EOs) issued by the Governor's Office. The following is the corresponding claiming guidance for reimbursement of costs and shall be effective with the June 2020 quarter.

## **EXTENDED FOSTER CARE - SUPPORT BEYOND AGE 21**

Per [ACL No. 20-45](#), the Extended Foster Care (EFC) program will temporarily be extended through June 30, 2020 for all NMDs who are 21 years of age on or after April 18, 2020. Other than the exceptions described in ACL No. 20-45, all other EFC requirements continue to apply for NMDs under this temporary extension, including the need for monthly caseworker visits (which may occur remotely, consistent with guidance provided in [ACL No 20-25](#)). The maintenance payments for supporting NMDs beyond the age of 21 are funded at 100 percent State General Fund (GF) and funding ends on June 30, 2020.

To claim the extended EFC maintenance payments for NMDs beyond their 21<sup>st</sup> birthday, per ACL No. 20-45, counties must claim these costs to Aid Code 43 (Non-Federal Non-Minor Dependents) and are instructed to claim the extension costs on the new CA 800 COVID-19 tab (See Attachment I). More specifically:

- Nonfederal EFC cases currently reported to Aid Code 43, but are being extended per this provision, shall be reported on the CA 800 COVID-19 tab on row 21 "*Main Payroll Persons Count*". Costs for these cases shall also be claimed under Aid Code 43 on row 17 "*EFC Support Beyond Age 21*" of the new CA 800 COVID-19 tab, which will be paid with 100 percent GF.
- Federally eligible EFC cases currently reported to Aid Code 49, but are being extended per this provision, shall be switched to Aid Code 43 on the CA 800 COVID-19 tab on row 21 "*Main Payroll Persons Count*". Costs for these cases shall also be claimed on row 17 "*EFC Support Beyond Age 21*" of the new CA 800 COVID-19 tab, which will be paid with 100 percent GF.

Because the funding for this extension is temporary, all NMD cases receiving extended EFC maintenance payments under this provision will need to be tracked manually. Once this temporary extension ends on June 30, 2020, counties must cease claiming for these payments through Aid Code 43 as funding for this population will no longer be available. Counties should begin to immediately identify and track these cases so that

payments to these NMDs may continue uninterrupted and to ensure the appropriate reimbursements are received. Please see ACL No. 20-45 for more information.

### **EDUCATIONAL AND EMPLOYMENT ACTIVITY DISRUPTION**

Effective April 18, 2020, all NMDs who have met the eligibility requirements for EFC and have lost their employment, or have experienced a disruption in their education program, may continue to receive payments. Counties are reminded that NMDs who cannot meet the EFC participation criteria through employment or education due to COVID-19 will continue to be eligible for the EFC program when they are participating in programs or activities designed to promote, or reduce barriers to, employment or when a medical condition renders them incapable of participating in any eligible activity. Please see [ACL No. 20-45](#) for more information on establishing an NMDs participation under one of the five existing EFC eligibility criteria whenever possible.

However, in the event an NMD still does not meet any of the EFC eligibility criteria as outlined in ACL No. 20-45, payments to these NMDs shall continue uninterrupted until June 30, 2020, and the reasons for not meeting the criteria must be documented in the case plan. To ensure continuity of funding for these cases, counties shall claim as follows:

- Federally eligible cases currently reported to Aid Code 49 that no longer meet EFC eligibility criteria per ACL No. 20-45, shall continue to receive payments. These cases must be switched to Aid Code 43 on the CA 800 COVID-19 tab and be claimed to the corresponding Main Payroll line. State GF will be provided in lieu of federal and county Local Revenue Funds for a sharing ratio of 00/70/30 (fed/state/county).
- Per ACL No. 20-45, nonfederal cases shall continue to be claimed according to standard claiming procedures under Aid Code 43 on the CA 800CCR 18+ Nonfed tab.

Once any of the five program eligibility criteria are met, or on June 30, 2020, whichever occurs first, the cases that were previously switched from Aid Code 49 to Aid Code 43 (COVID-19 tab), shall revert back to Aid Code 49 and their payments shall be claimed on the CA 800CCR 18+ Fed tab. Beginning July 1, 2020, cases that do not meet one of the five EFC program criteria and are no longer eligible for the EFC program, may not be claimed under any EFC aid codes.

### **PAYMENTS FOR SUPERVISED INDEPENDENT LIVING PLACEMENTS (SILP)**

Pursuant to the Governor's EO N-53-20, dated April 17, 2020, and the guidance contained within ACL No. 20-45, all NMDs who experience housing disruptions, including those who were previously living in a college dormitory as their SILP, must be provided with assistance in identifying a safe and appropriate alternative housing option, consistent with guidance outlined in [ACL No. 19-105](#). Additionally, if an NMD is displaced from their dorm, counties should continue the SILP payment until such time that the NMD informs the county of the new or temporary residence, per ACL No. 20-25.

Additionally, per [ACL No. 11-77](#), NMDs may live in an unapproved SILP temporarily while awaiting approval of the new SILP (WI&C section 11402.2). In a situation where an NMD moves unexpectedly, the county must inspect the new SILP site within ten calendar days and may use the inspection flexibilities described in ACL No. 20-45. Claiming for all SILP cases has not changed and counties should continue to claim these cases consistent with current practices.

For questions related to SILP placements and/or EFC, please contact the Transition Age Youth Policy Unit at (916) 651-7465 or e-mail [TAYPolicy@dss.ca.gov](mailto:TAYPolicy@dss.ca.gov).

### **TEMPORARY WAIVERS AND RATE FLEXIBILITY FOR PLACEMENTS IMPACTED BY COVID-19**

Pursuant to the Governor's EO N-53-20, dated April 17, 2020, and per [ACL No. 20-44](#), CDSS authorized temporary statewide waivers and flexibilities related to emergency placement criminal background check processes and eligible caregivers, and authorized rate flexibility for specified placements. The waivers and flexibilities are intended to support the emergency care and placement needs for children and NMDs due to the current COVID-19 emergency. The waivers for the programs outlined below are effective through June 30, 2020, unless otherwise stated by CDSS in official guidance.

#### **Temporary Authorization of Higher Rates for non-STRTP Placements Impacted by COVID-19**

Children or NMDs who do not qualify for placement in a Short Term Residential Therapeutic Program (STRTP) but who have been exposed to, present symptoms of, or test positive for COVID-19 may temporarily need a higher level of specialized care and supervision from their caregivers, and potentially a higher level of services from providers. As outlined in ACL No. 20-44, the CDSS authorizes the temporary use of a higher Home-Based Family Care (HBFC) rate, the Family-Only Rate (for county homes) or a Static Rate (for FFA placements) that may be authorized in the following situations:

- The child or NMD or another member of the household requires isolation or quarantine due to COVID-19 or suspected COVID-19 and as a result, there are increased care and supervision needs.
- The child or NMD requires a new placement due to sudden displacement brought on by the COVID-19 crisis and is at risk of shelter placement.

### *Family-Only Rate*

Counties will be provided GF reimbursement for the incremental increase from the rate that was previously paid for a case that qualifies due to COVID-19 as outlined above. This increased rate can be paid to an emergency caregiver, resource family, tribal-approved home, or a licensed or certified foster home on behalf of a child or NMD. For the base portion of the rate (the original amount paid prior to the temporary increase in the rate for the case) counties will continue to pay the same county share of costs at the normal statutory sharing ratios. For more information regarding existing sharing ratios and rates, please see [ACL No. 19-91](#) and [ACL No. 19-70](#), respectively.

To claim costs for the temporary rate increases for county home placements with no county share of cost, counties shall claim as follows:

- Claim the original HBFC rate and associated persons count according to existing protocol on CA 800. This will be funded at current, statutory sharing ratios.
- Only claim the increase between the original HBFC rate and Family-Only rate on the COVID-19 tab under the corresponding aid code on row 13 “*Family-Only Rate*”.
- Report the Case (persons count)\* receiving the increased rate paid under this provision on the COVID-19 tab on row 18 “*Family-Only Rate Persons Count*” in addition to usual claim reporting on the CA 800CCR Fed, CA 800CCR 18+ Fed, CA 800CCR Nonfed, or CA 800CCR 18+ Nonfed tabs.

*\*(Note: Cases being reported to the COVID-19 tab are for informational purposes only and shall not be duplicated in case counts for purposes of discount rate calculations or any other formula.)*

*Example:* For a case reported to aid code 42 receiving the Basic Level Rate of \$1,000 and qualifies for the higher Family-Only rate (\$2,609) per ACL No. 20-44, the county shall continue claiming the \$1,000 to Main Payroll on CA800CCR\_FED and will claim the incremental increase of \$1,609 (\$2,609 minus \$1,000) to row 13 “*Family-Only Rate*” on the COVID-19 tab. The \$1,000 will continue to be funded at current, statutory sharing ratios and the \$1,609 will be funded at 50/50/00/00 (Fed/State/Health/County).

*Foster Family Agency Rate Flexibilities*

If the child or NMD is placed in an FFA, and meets the COVID-19 criteria described above, the CDSS authorizes the rate paid to be increased or by utilizing the FFA Static Rate at \$6,291, which includes the \$2,609 paid directly to the FFA caregiver. Counties will be provided GF reimbursement for the incremental increase from the rate that was previously paid to the case.

For federally eligible cases, counties must claim costs for the temporary FFA rate increases, as follows:

- Claim the new HBFC rate per existing protocol on CA-800 FC-1. This will be funded at current, statutory sharing ratios.
- Claim the incremental increase in county share of cost between the case's original HBFC rate and the new increased HBFC rate (or FFA Static Rate) on the COVID-19 tab on row 14 "*Rate Differential*," which will be funded with 100 percent GF.
- Cases (persons counts)\* receiving increased rates under this provision shall be reported on the COVID-19 tab on row 19 "*FFA Rate Persons Count*" in addition to usual claim reporting on the CA 800CCR Fed, CA 800CCR 18+ Fed, CA 800CCR Nonfed, or CA 800CCR 18+ Nonfed tabs.

*\*(Note: Cases being reported to the COVID-19 tab are for informational purposes only and shall not be duplicated in case counts for purposes of discount rate calculations or any other formula.)*

For non-federally eligible cases, counties must claim costs for the temporary FFA rate increase, as follows:

- Claim the new HBFC rate per existing protocol to main payroll on CA800CCR\_Nonfed or CA 800CCR 18+ Nonfed claims, for aid codes 40 and 43, respectively. This will be funded at current, statutory sharing ratios.
- Claim the incremental increase in county share of cost between the case's original HBFC rate and the new increased HBFC rate (or FFA Static Rate) on the COVID-19 tab on row 14 "*Rate Differential*," which will be funded with 100 percent GF.
- Cases (persons counts)\* receiving increased rates under this provision shall be reported on the COVID-19 tab on row 19 "*FFA Rate Persons Count*" in addition to usual claim reporting on the CA 800CCR Fed, CA 800CCR 18+ Fed, CA 800CCR Nonfed, or CA 800CCR 18+ Nonfed tabs.

*\*(Note: Cases being reported to the COVID-19 tab are for informational purposes only and shall not be duplicated in case counts for purposes of discount rate calculations or any other formula.)*

Example: For a case reported to aid code 42 receiving the LOC 2 rate of \$2,424 and qualifies for the FFA Static rate (\$6,291) pursuant to ACL No. 20-44, the county shall continue claiming the \$2,424 on the CA800 FC-1 and will claim the incremental increase of \$3,867 (\$6,291 minus \$2,424) to row 14 “*Rate Differential*” on the COVID-19 tab. The \$2,424 will continue to be funded at current, statutory sharing ratios and the \$3,867 will be funded at 50/50/00/00 (Fed/State/Health/County).

The county placing agency must also document the increased rate in the placement agreement, send necessary documentation to eligibility staff, and update the youth’s case plan. The county must also track individual cases and payments as the increased rate is only authorized through June 30, 2020, at which time claiming increased rates due to COVID-19 will no longer be allowable.

### **STRTP Eligible Children or NMDs Placed in a Family Home Setting with Exceptional Supports**

Pursuant to ACL No. 20-44, for STRTP eligible children and NMDs who are placed in an FFA or county home, counties may negotiate with a community-based organization or FFA for an amount to be used to provide a wraparound-level of exceptional support and services. This will be referred to as the negotiated rate. The ability to negotiate the rate allows the counties the flexibility to determine what rate amounts to pay agencies and the resource parent in support of an eligible child or NMD whom has exceptional needs due to COVID-19 criteria as described in this letter.

Therefore, for STRTP eligible children and NMDs, if the FFA Static Rate or Family Only Rate is insufficient to meet the needs of the child or NMD, the CDSS authorizes counties to negotiate a higher rate, not to exceed the STRTP rate. A negotiated rate for a child or NMD placed in an FFA is any amount authorized by a county between the Static Rate (\$6,291) but no more than the STRTP rate (\$13,532). A negotiated rate for child or NMD placed in a county home, and not placed in an FFA, is any amount authorized by a county between the Family-Only rate (\$2,609) but no more than the STRTP rate (\$13,352). Negotiated rates described in this letter will be funded with 100 percent GF, and Title IV-E funds, if federally eligible. Negotiated rates are authorized to cover exceptional specified needs related to COVID-19 circumstances and must be documented in the case plan and the needs and services plan. For more information regarding negotiated rates, please see ACL No. 20-44. Any rates related questions should be directed to [LOC@dss.ca.gov](mailto:LOC@dss.ca.gov).



To claim costs for the negotiated rate amounts, counties shall claim as follows:

- Claim the increased negotiated amounts on CA800 COVID-19 tab to row 15 “COVID-19 Rate Increase” under the corresponding aid code to the case.
- Cases (persons counts)\* receiving increased rates under this provision shall be reported on the COVID-19 tab on row 20 “COVID-19 Rate Increase Persons Count” in addition to usual claim reporting on the CA 800CCR Fed, CA 800CCR 18+ Fed, CA 800CCR Nonfed, or CA 800CCR 18+ Nonfed tab.

*\*(Note: Cases being reported to the COVID-19 tab are for informational purposes only and shall not be used in case counts for purposes of calculating the discount rate or any other formula to avoid duplication.)*

Cases receiving a negotiated rate are excluded from Continuum of Care Reform (CCR) reconciliation, as the increased rate is not associated with the CCR and any costs above the normal county share are being fully funded with GF. Please see ACL No. 20-44 for more information and specific programmatic information regarding Foster Care Rates and documentation requirements.

#### Existing STRTP Placements Impacted by COVID-19

For STRTP placements impacted by facility staffing issues or capacity limits due to isolation and quarantine responses caused by COVID-19, and subsequently moved to an FFA or county home, the CDSS authorizes the rate flexibilities for the impacted STRTP placement cases.

#### *STRTP Placement to FFA Placement*

If the child or NMD is moving from an STRTP placement to an FFA placement due to the COVID-19 criteria outlined above, the CDSS authorizes the rate to be changed for the impacted case to the Static Rate using the ISFC sharing ratios. Any incremental increase to counties' non-federal share of costs due to the rate change will be funded with 100 percent GF. If the Static Rate is insufficient to meet the needs of the STRTP child or NMD, the county may also utilize the negotiated rate and follow the claim instructions as described in the above negotiated rate section.

To claim for switching from an STRTP rate to the Static Rate for federally eligible cases and applicable incremental increase to the county share costs, counties shall claim as follows:

- Claim the Static Rate for an STRTP eligible child using ISFC sharing ratios on the CA 800 FC-1.

- Claim the applicable increase in non-fed costs between the STRTP rate and the Static Rate on the COVID-19 tab on row 14 “*Rate Differential*,” which will be funded with GF. (See Table A of Attachment II for exact amount).
- Cases (persons counts)\* receiving the Static Rate under this provision shall be reported on the COVID-19 tab on row 19 “*FFA Rate Persons Count*” in addition to usual claim reporting on the CA 800CCR Fed, CA 800CCR 18+ Fed, CA 800CCR Nonfed, or CA 800CCR 18+ Nonfed tab.

To claim for switching from an STRTP rate to the Static Rate for non-federally eligible cases and applicable incremental increase to the county share costs, counties shall claim as follows:

- Claim the FFA Static rate to the main payroll line on CA800CCR\_Nonfed or CA800CCR 18+ Nonfed claims, for aid codes 40 and 43, respectively. This will be funded at current, statutory sharing ratios.
- Claim the applicable increase in costs between the STRTP rate and the Static Rate on the COVID-19 tab on row 14 “*Rate Differential*,” which will be funded with GF. (See Table B of Attachment II for exact amount).
- Cases (persons counts)\* receiving the FFA rates under this provision shall be reported on the COVID-19 tab on row 19 “*FFA Rate Persons Count*” in addition to usual claim reporting on the CA 800CCR Fed, CA 800CCR 18+ Fed, CA 800CCR Nonfed, or CA 800CCR 18+ Nonfed tab.

*\*(Note: Cases being reported to the COVID-19 tab are for informational purposes only and shall not be duplicated in case counts for purposes of discount rate calculations or any other formula.)*

#### *STRTP Placement to County Home*

If the child or NMD is moving from an STRTP placement to a county home due to the COVID-19 criteria outlined above, the CDSS authorizes the rate to be changed for the impacted case to the Family-Only Rate. Any incremental increase to counties non-federal share of costs due to the rate change will be funded with 100 percent GF, and Title IV-E, if the case is federally eligible. If the Family-Only Rate is insufficient to meet the needs of the STRTP child or NMD, the county may also utilize the negotiated rate and follow the claim instructions as described in the above negotiated rates section.

To claim for switching from an STRTP rate to the Family-Only Rate for federally eligible cases and applicable incremental increase to the county share costs, counties shall claim as follows:

- Claim the Family Only rate according to the child or NMDs associated aid code on corresponding CA 800CCR Fed, CA 800CCR 18+ Fed, CA 800CCR Nonfed, or CA 800CCR 18+ Nonfed tab. This will be funded at current, statutory sharing ratios.
- Claim the applicable increase in non-fed costs between the STRTP rate and the Family-Only Rate on the COVID-19 tab on row 14 “*Rate Differential*,” which will be funded with GF, and Title IV-E if the case is federally eligible. (See Table C of Attachment II for exact amount).
- Cases (persons count) receiving the Family Only rates under this provision shall be reported on the COVID-19 tab on row 18 “*Family Only Rate Persons Count*” in addition to usual claim reporting on the CA 800CCR Fed, CA 800CCR 18+ Fed, CA 800CCR Nonfed, or CA 800CCR 18+ Nonfed tab.

*\*(Note: Cases being reported to the COVID-19 tab are for informational purposes only and shall not be duplicated in case counts for purposes of discount rate calculations or any other formula.)*

### **Emergency Caregiver (EC) Extended Funding**

In support of emergency caregivers and as provided in [Welfare and Institutions Code Section 11461.36](#), the emergency caregiver funding was established to support the placement stability for relatives, non-related extended family members, and, under the compelling reason placement authority, community families pursuant to [W&IC Section 16519.5\(e\)](#) who received a placement prior to their approval as a resource family (RF). Guidance related to who is eligible for emergency caregiver funding is described in more detail in [ACL NO. 18-75](#), [ACL19-24](#), and [ACL 19-84](#).

Per ACL No. 20-44, temporary rate flexibility can be provided for all existing ECs (as described above) whose home is still pending approval and whose funding under the Temporary Assistance to Needy Families (TANF) (Aid Code 5K) or non-federally eligible (Aid Code 5L) will expire due to the home approval exceeding the 365-day time limit. The payments for cases that extend beyond the 365 days will be funded at 100 percent GF and end on June 30, 2020.

For EC payments extended under this provision, counties shall claim as follows:

- TANF eligible cases in Aid Code 5K that meet the COVID 19 criteria shall be claimed to the non-TANF eligible Aid Code 5L on the Main Payroll line under the “*EC Funding – 5L*” column on the CA 800 COVID-19 tab to continue payments beyond 365 days.

- Cases currently claimed under 5L that meet the COVID 19 criteria shall continue to receive payments beyond the 365-day limit; however, these cases must be claimed on the Main Payroll line under the “*EC Funding - 5L*” column on the CA 800 COVID-19 tab.

All emergency placement cases described in this section receiving extended funding due to COVID-19 beyond 365 days shall be tracked manually. Counties should begin to immediately identify and track these cases so that payments for emergency placements may continue uninterrupted. Once the end of this temporary extension is reached on June 30, 2020, counties must remove these cases from Aid Code 5L as funding for this extension will no longer be available. Counties must shift to the appropriate AFDC-FC aid code associated with the placement type immediately upon approval of the home as a resource family.

For additional questions related to the Resource Family Approval (RFA) program not addressed in [ACL No. 20-43](#) or ACL No. 20-44, please contact the RFA Policy Unit at (916) 651-1101 or at [RFA@dss.ca.gov](mailto:RFA@dss.ca.gov).

### **Increased Rates for Emergency Caregivers Pending Resource Family Approval**

Children or NMDs in a relative or nonrelative EC placement and meeting the COVID-19 criteria as described in this letter, may qualify for an increase in rate using the Family-Only Rate for county home. Counties shall claim the increased costs for these cases on the CA 800 COVID-19 tab under the “EC Funding–5L” or the “EC Funding–5K” columns, depending on the case’s federal eligibility. Any Nonfederal costs above the Basic Level Rate will be funded with 100 percent GF. Counties utilizing the increased rates for this population shall claim as follows:

- TANF eligible children or NMDs currently reported to Aid Code 5K that are paid an increase to the Family Only Rate must claim the increase in rate to row 13 “*Family Only Rate*” and have cases reported to row 18 “*Family Only Rate Persons Count*” under the EA FC–5K column on the COVID-19 tab.
- TANF eligible children or NMDs currently reported to Aid Code 5K that are paid an increase to the Family Only Rate must claim the increase in rate to row 14 “*Family Only Rate*” and have cases reported to row 18 “*Family Only Rate Persons Count*” under the EA FC–5K column on the COVID-19 tab.
- Non-TANF eligible children or NMDs currently reported to Aid Code 5L that are paid the increased Family Only Rate must claim the increase in rate to row 13 “*Family Only Rate*” and have cases reported to row 18 “*Family Only Rate Persons Count*” under the EC Funding–5L column on the COVID-19 tab.

- Non-TANF eligible children or NMDs currently reported to Aid Code 5L that are paid an increase to the Family Only Rate must claim the increase in rate to row 13 “*Family Only Rate*” and have cases reported to row 18 “*Family Only Rate Persons Count*” under the EC Funding–5L column on the COVID-19 tab.

### Emergency Caregiver Funding Cases – Community Families

Existing non-related family cases placed with community families due to a compelling reason that are already receiving EC funding will continue to be claimed per existing protocol and sharing ratios. Children or NMDs who were not previously receiving EC funding and are being placed with a community family due to the COVID-19 may be eligible for EC funding on an emergency placement basis pursuant to the flexibilities provided in ACL No. 20-44 and EO N-53-20. The non-fed share of EC funding costs for new placements into community families will be funded at 100 percent GF which will be provided until June 30, 2020, at which time EC funding flexibilities will expire.

Counties shall submit costs for reimbursement of new community family placements via invoice. The invoice should note “COVID-19 EC Funding New Community Family” as the subject header and indicate the number of emergency placements made with community families whose payments are authorized pursuant to the flexibilities outlined in ACL No. 20-44 and EO N-53-20. The invoice must be signed by the individual(s) responsible for approving EC payments for these cases as well as current contact information. Counties should submit invoices to: [Fosterca@dss.ca.gov](mailto:Fosterca@dss.ca.gov)

### Proration of Costs and Persons Counts

Proration of costs occurs when the effective date of payment or cost is incurred on any day after the first of the month. Proration calculations should be executed per normal claiming protocol for the month between the CA 800CCR Fed tab, CA 800 Nonfed, CA 800 18+ Fed tab, CA 800 18+ Nonfed tab, CA 800 TEMP RFA tab, or the EC Funding tab, as applicable. For cases identified as meeting the COVID-19 criteria described above, counties shall prorate the COVID-19 associated costs when claiming to the COVID-19 tab, based on the effective date of the placement change minus total number of days in the month and divided by total number of days in the month.

*Example:* If a child or NMD experiences a placement change on May 15, 2020, due to the COVID-19 situations described above, the county shall prorate the amount as follows:

- Total days in the month of May (31) minus days the rate change applies based on the date of placement change (15) divided by total days in May (31) equals a proration of 51.6 percent.

The case counts reported on the CA 800 COVID-19 tab are for informational purposes only and may be duplicative of cases reported on other claim tabs. The cases reported on the CA 800 COVID-19 tab should not be included in Discount Rate calculations. Additionally, cases claimed on the CA 800 COVID-19 tab do not link to the CCR Rate Tab, Rate Information Addendum or the Placement Information Addendum tabs of the CA 800CCR workbook.

**REDETERMINATIONS AND REASSESSMENTS FOR KINSHIP-GUARDIANSHIP ASSISTANCE PAYMENT (KIN-GAP) AND ADOPTIONS ASSISTANCE PAYMENT (AAP) CASES**

**Kin-GAP**

For Kin-GAP cases, the [CDSS Manual of Policies and Procedures Division 45-607.2](#) requires the county to suspend payments if a guardian fails to complete and return the Determination of Kin-GAP Eligibility (KG 2) within two weeks of the date it was mailed. During this emergency period as defined above and pursuant to [EO N-53-20](#), dated April 17, 2020, this requirement is temporarily suspended, and counties shall continue Kin-GAP payments to the guardian even if the receipt of the completed paperwork is delayed. Per [ACL No. 20-47](#), the suspension of these requirements is effective through June 30, 2020, unless otherwise stated by CDSS in official guidance. All claiming practices for these cases shall remain the same.

Questions concerning the Kin-GAP program should be directed to the Foster Caregiver Policy and Support Unit at (916) 651-7465 or [kinship.care@dss.ca.gov](mailto:kinship.care@dss.ca.gov).

**AAP**

Consistent with current practice, counties should send the AAP 3 form to adoptive parent(s) at least sixty (60), and not more than ninety (90), days prior to the date of assessment. However, it remains the parent(s)' choice to complete the form and determine whether they will seek a reassessment. If the parent(s) returns the form without a request for change, the county may process the reassessment as it would at other times or wait to process it after June 30, 2020. If the parent returns the AAP 3 form requesting an increase in assistance, the county shall process the reassessment request according to current practice. If the parent does not return the AAP 3, the rate shall continue as stated on the last signed AAP agreement. Please see [ACL No. 20-47](#) for information on exceptions for wraparound AAP cases. All claiming practices for these cases shall remain the same.

Any policy related questions regarding AAP should be directed to the Adoption Services Bureau at (916) 651-8089.

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If you have any questions or need additional guidance regarding the information in this letter, contact the Fiscal Policy & Analysis Bureau at (916) 657-3440 or at [fiscal.systems@dss.ca.gov](mailto:fiscal.systems@dss.ca.gov).

Sincerely,

***Original Document Signed By***

Salena Chow, Chief  
Fiscal Forecasting and Policy Branch  
Administration

Attachments

**Attachment I**

**INSTRUCTIONS FOR FORM CA 800CCR COVID-19  
SUMMARY REPORT OF ASSISTANCE EXPENDITURES**

**General Information**

1. This form is pre-programmed to round all amounts to the nearest dollar.
2. The county name and month and year will populate when the Certification form is completed.
3. The name and telephone number of county staff person to be contacted if there are any questions regarding the claim will be populated when the Certification form is completed.

**Current Month**

4. Line 1: For those aid codes allowing amounts to be entered on the Main Payroll line, enter the amounts shown on the integrated payroll summary. For non-integrated payrolls, enter the grand totals shown for each payroll. **Costs entered on Main Payroll line must include all current and prior month(s) adjustments.**
5. Line 6: Subtotal of Lines 1 through 5. This amount will calculate automatically.

**Prior Month Negatives**

6. Lines 7-9: All prior months negative adjustments should be included on the corresponding Main Payroll and other rates lines.
7. Line 10: Subtotal of Lines 7 through 9. This amount will calculate automatically.

**Prior Month Positive Adjustment**

8. Line 11: All prior months positive adjustments should be included on the corresponding Main Payroll and other rates lines.

**Total Payroll, Current + Prior Month (Lines 6 + 10 + 11 + 12)**

9. Line 12: This is the total of all aid payments, current and prior months. This amount will calculate automatically.

**Family Only Rate**

10. Line 13: Enter the amounts paid to cases receiving the Family Only rate, per ACL No. 20-44.

**Rate Differential**

11. Line 14: Enter the difference between the Nonfederal share of the FFA rate and the Nonfederal share of the STRTP rate.

**Covid-19 Rate Increase**

12. Line 15: Enter the amount above the Static Rate paid to an FFA.

**Extended Foster Care (EFC) Support Beyond Age 21**

13. Line 16: Enter the amount paid to cases whose EFC eligibility ended due to turning 21, but whose payments were extended through June 30, 2020 due to Covid-19.



**Total of All Payments**

14. Line 17: This is the total of all aid payments. This amount will calculate automatically.

**Family Only Rate - Persons Count**

15. Line 18: Enter the Persons Count receiving the Family Only Rate.

**FFA Rate – Persons Count**

16. Line 19: Enter the Persons Count receiving the Static Rate. Do not include the Family Only Rate cases amount in this count.

**COVID-19 Rate Increase – Persons Count**

17. Line 20: Enter the Persons Count receiving a negotiated rate *above* the Static Rate. Do not include the Static Rate cases amounts in this count.

**Main Payroll Persons Count**

18. Line 21: Enter the Persons Count for amounts paid to cases on the Main Payroll line of the claim.

**Summary of Funding**

19. Line 22 through 51 will calculate automatically.

**Attachment II**

**TABLE A**

**FFA Phase II Level of Care (LOC) Sharing Ratios and Rates**

| <b>Maintenance Sharing Ratios %</b> | <b>ISFC<br/>(Static Rate)</b> |
|-------------------------------------|-------------------------------|
| Maintenance                         | 72.99%                        |
| Federal                             | 65.96%                        |
| Non-Federal                         | 34.04%                        |

| <b>Administration Sharing Ratios %</b>                                  | <b>ISFC<br/>(Static Rate)</b> |
|---|-------------------------------|
| Administration  | 27.01%                        |
| Federal   | 38.67%                        |
| Non-Federal   | 61.33%                        |
| <b>Rate</b>   | <b>\$ 6,291</b>               |
| <i>Total NonFed Cost of Static Rate</i>                                 | <i>\$ 2,605</i>               |
| <i>Total NonFed Cost of STRTP Rate</i>                                  | <i>\$ 631</i>                 |
| <b>Amount to Claim on Row 14 "Rate Differential"<br/>(COVID-19 Tab)</b> | <b>\$ 1,974</b>               |

**TABLE B**

**FFA Phase II Level of Care (LOC) Sharing Ratios and Rates**

|  | <b>ISFC<br/>(Static Rate)</b> |
|--|-------------------------------|
| Static Rate  | \$ 6,291                      |
| Total STRTP Rate Cost  | \$ 13,532                     |
| <b>Amount to Claim on Row 14 "Static<br/>Rate Differential" (COVID-19 Tab)</b> | <b>\$ 7,241</b>               |

TABLE C

**Family Only Rate**

|  |                  |
|--|------------------|
| Current Rate   | \$ 2,609         |
| Total STRTP Rate Cost  | \$ 13,532        |
| <b>Amount to Claim on Row 14 "Static Rate Differential" (COVID-19 Tab)</b> | <b>\$ 10,923</b> |

### Attachment III

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

**SUMMARY REPORT OF ASSISTANCE EXPENDITURES  
CONTINUUM OF CARE REFORM (CCR)  
COVID-19 FOSTER CARE, EXTENDED FOSTER CARE, EA-FC AND EC FUNDING  
FEDERAL AND NON-FEDERAL**

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

|               |                   |
|---------------|-------------------|
| County        | Date (Month/Year) |
| Claim Contact | Telephone         |

|   | FOSTER CARE |             | EXTENDED FOSTER CARE |             | EA-FC     | EC FUNDING  |
|---|-------------|-------------|----------------------|-------------|-----------|-------------|
|   | Federal     | Non-Federal | Federal              | Non-Federal | Federal   | Non-Federal |
| <b>Aid Code</b>   | <b>42</b>   | <b>40</b>   | <b>49</b>            | <b>43</b>   | <b>5K</b> | <b>5L</b>   |
| 1 Main Payroll  |             |             |                      |             |           |             |
| 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 TOTAL PAYROLL, CURRENT + PRIOR MONTH (Lines 6+10+11) |             |             |                      |             |           |             |
| 13 Family-Only Rate                                     |             |             |                      |             |           |             |
| 14 Rate Differential                                    |             |             |                      |             |           |             |
| 15 COVID-19 Rate Increase                               |             |             |                      |             |           |             |
| 16 EFC Support Beyond Age 21                            |             |             |                      |             |           |             |
| 17 TOTAL ALL PAYMENTS (Lines 12 through Line 16)        | -           | -           | -                    | -           | -         | -           |
| 18 Family-Only Rate Persons Count                       |             |             |                      |             |           |             |
| 19 FFA Rate Persons Count                               |             |             |                      |             |           |             |
| 20 COVID-19 Rate Increase Persons Count                 |             |             |                      |             |           |             |
| 21 Main Payroll Persons Count                           |             |             |                      |             |           |             |

| COVID-19          |         |         |          |          |                              |         |            |  |                   |                        |                   |
|-------------------|---------|---------|----------|----------|------------------------------|---------|------------|--|-------------------|------------------------|-------------------|
| Sharing Ratios    |         |         |          |          |                              |         |            |  |                   |                        |                   |
| Aid Code          | FC (42) | FC (40) | EFC (49) | EFC (43) | EFC (43) Cases moved from 49 | EC (5L) | EA-FC (5K) | Family Only Rate (excluding 42 and 49) | Rate Differential | COVID-19 Rate Increase | Support Beyond 21 |
| Federal           | 0.50    |         | 0.50     |          |                              |         | 0.70       |  |                   |                        |                   |
| State             | 0.50    |         | 0.50     |          | 0.70                         | 1.00    |            | 1.00                                   | 1.00              | 1.00                   | 1.00              |
| State/County 2011 |         | 0.40    |          | 0.40     |                              |         |            |  |                   |                        |                   |
| County 2011       |         |         |          |          |                              |         |            |  |                   |                        |                   |
| County            |         | 0.60    |          | 0.60     | 0.30                         |         | 0.30       |  |                   |                        |                   |