

January 5, 2021

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

**EXECUTIVE SUMMARY**

**COUNTY FISCAL LETTER NO. 20/21-61**

This letter provides claiming instructions to counties for Nonminor Dependents in the Extended Foster Care program experiencing a disruption in employment or education enrollment and continued assistance support for young adults who have turned 21 years old and are no longer eligible for the Extended Foster Care Program.



**KIM JOHNSON**  
DIRECTOR

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

January 5, 2021

COUNTY FISCAL LETTER NO. 20/21-61

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

**SUBJECT:** UPDATED CLAIMING INSTRUCTIONS TO COUNTIES FOR  
NONMINOR DEPENDENTS UNABLE TO MEET EXTENDED  
FOSTER CARE PARTICIPATION CONDITIONS AND FOR  
ELIGIBLE YOUNG ADULTS WHO TURNED 21 YEARS OLD FOR  
FISCAL YEAR 2020-21

**REFERENCE:** [GOVERNOR'S EXECUTIVE ORDER \(EO\) N-53-20, DATED APRIL 17, 2020; EO N-75-20, DATED AUGUST 24, 2020;](#)  
[COUNTY FISCAL LETTER \(CFL\) NO. 19/20-89, DATED MAY 27, 2020; CFL NO. 18/19-81, DATED MAY 10, 2019;](#)  
[CFL NO. 15/16-46, DATED MARCH 18, 2016; CFL NO. 11/12-18, DATED SEPTEMBER 16, 2011; NO. 04/5-54, DATED 17, 2005<sup>\(OBJ\)</sup>](#)  
[ALL COUNTY LETTER \(ACL\) NO. 20-117E, DATED NOVEMBER 2, 2020; ACL NO. 20-117, DATED OCTOBER 23, 2020; ACL NO. 20-112, DATED OCTOBER 12, 2020; ACL NO. 20-44, DATED APRIL 17, 2020; ASSEMBLY BILL \(AB\) 79 \(CHAPTER 11, STATUTES OF 2020\); AB 89 \(CHAPTER 7, STATUTES OF 2020\); SENATE BILL 115 \(CHAPTER 40, STATUTES OF 2020\) NO. 20-117E, DATED NOVEMBER 2, 2020; ACL NO. 20-117, DATED OCTOBER 23, 2020; ACL NO. 20-112, DATED OCTOBER 12, 2020; ACL NO. 20-44, DATED APRIL 17, 2020; ASSEMBLY BILL \(AB\) 79 \(CHAPTER 11, STATUTES OF 2020\); AB 89 \(CHAPTER 7, STATUTES OF 2020\); SENATE BILL 115 \(CHAPTER 40, STATUTES OF 2020\)](#)

The purpose of this County Fiscal Letter (CFL) is to provide County Welfare Departments (CWDs) and County Probation Departments (CPDs) with claiming

instructions for Fiscal Year (FY) 2020-21 for (1) additional support or assistance payments for foster care placements, and (2) monthly payments to or on behalf of eligible young adults, as authorized by Executive Orders (EO), The Budget Act of 2020, and [Senate Bill 115](#). This CFL also clarifies that the claiming instructions for administrative funding to support Nonminor Dependents (NMDs) and young adults previously provided in [CFL No. 19/20-89](#) are rescinded, and claiming should be done in accordance with rules in existence prior to CFL No. 19/20-89, except as described below.

### **Background**

Pursuant to the authority in the [Governor's EO N-53-20](#), [ACL 20-45](#) and [CFL No. 19/20-89](#) authorized NMDs to remain in the Extended Foster Care (EFC) Program through June 30, 2020, regardless of their ability to meet one of the five education or employment participation requirements. In accordance with federal flexibilities authorized by the Stafford Act and described in [PI-20-10](#), The Budget Act of 2020 clarifies that foster care maintenance payments may be made to or on behalf of NMDs in EFC through June 30, 2021 even when they have lost their employment or have experienced a disruption in their educational programs and cannot otherwise meet any of the participation conditions. As outlined in [ACL 20-112](#), this flexibility is available through June 30, 2021 unless federal and state flexibilities for employment and education conditions are rescinded prior to June 30, 2021.

The EO N-53-20 also authorized young adults who were in EFC upon turning 21 on or after April 17, 2020 to receive continued support through June 30, 2020. The Budget Act of 2020 extended this financial and case management support through June 30, 2021.

### **Assistance Claiming Instructions**

The following section outlines updated instructions for claiming assistance payments associated with NMDs who are not meeting any of the five participation conditions for EFC due to COVID-19, or for young adults who turn 21 years old while in EFC until June 30, 2021.

### **Employment or Education Activity Disruption**

In accordance with [ACL 20-112](#) and the federal waiver authorized by the Stafford Act, effective the July 2020 claiming month, the funding policy previously described in [ACL No. 20-45](#) and [CFL No. 19/20-89](#) may continue through June 30, 2021, unless the federal and state flexibilities are rescinded sooner. The guidance in ACL 20-112 and the instruction outlined below supersedes the instruction provided in CFL No. 19/20-89,

effective with the July 2020 claiming month for NMDs who are not meeting participation conditions due to COVID-19. Counties shall claim those NMDs not meeting any of the five participation conditions due to COVID-19 as follows:

- Federally eligible youth shall be claimed according to standard claiming practices for youth who would otherwise be federally eligible if they were meeting participation conditions under Aid Code 49 on the CA 800CCR 18+ FED tab.
- Non-federally eligible youth shall be claimed according to standard claiming practices for youth who would be claimed as non-federally eligible if they were meeting participation conditions under Aid Code 43 on the CA 800CCR 18+ NonFed tab.

Counties are not required to make retroactive adjustments for cases claimed on the COVID-19 tab of the CA 800CCR workbook between April 17, 2020 and June 30, 2020 in accordance with the instruction from CFL No. 19/20-89. However, for payments issued for the July 2020 benefit month and beyond, counties must claim eligible cases per instruction outlined for this population above.

### **Support for Young Adults Beyond Age 21**

The continued assistance for eligible young adults 21 years and older (young adult) is retroactive to April 17, 2020 (please refer to [CFL No. 19/20-89](#) for April 17, 2020 to June 30, 2020, and this CFL for July 1, 2020 onwards). If a county discontinued assistance payments for young adults that were in EFC when they reached their 21<sup>st</sup> birthday on or after April 17, 2020, pursuant to [ACL 20-117E](#), the county must contact these youth to resume assistance payments. Counties shall claim costs for these cases according to instruction outlined in this letter.

As authorized by the Budget Act of 2020, funding provided on behalf of young adults who have turned 21 years old on or after April 17, 2020 through June 30, 2021, shall continue to be claimed on the CA 800CCR COVID-19 tab per instruction outlined in [CFL No. 19/20-89](#), up to June 30, 2021. Specifically:

- Former federally eligible cases reported to Aid Code 49 but are receiving support after turning 21 per the Budget Act of 2020 shall be switched to Aid Code 43 on the COVID-19 tab on row 21 "*Main Payroll Persons Count*" of the CA 800 claim. Costs for these cases shall be claimed on row 16 "*EFC Support Beyond Age 21*" of the COVID-19 tab on the CA 800 claim, which will be paid with 100 percent GF.

- Former nonfederal cases reported to Aid Code 43 but are receiving support after turning 21 per the Budget Act of 2020 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 16 "*EFC Support Beyond Age 21*" of the CA 800 COVID-19 tab, which will be paid with 100 percent GF.

Although the title of the row on the CA 800 references "EFC Support Beyond Age 21," please note young adults are no longer in EFC upon turning 21 years old. Adjustments for this population are only eligible from April 17, 2020, and onwards, pursuant to the authority contained in [EO N-53-20](#) and the Budget Act of 2020. For costs claimed on the COVID-19 tab of the CA 800CCR workbook, costs claimed should be a net total inclusive of all positive and negative adjustments.

### **Infant Supplement Rate for Cases Receiving Support Beyond Age 21**

Effective with the July 2020 claiming month, counties may claim the Infant Supplement Rate in the CA 800CCR assistance claim workbook for cases receiving support beyond age 21, as outlined in [ACL No. 20-117E](#). Please see Attachment I for the updated COVID-19 tab of the CA 800CCR workbook and instructions for completing the claim template. This instruction is effective for FY 2020-21. Counties shall claim costs for the rate supplement for Federal and Non-federal cases as follows:

- Costs shall be claimed on line 17 *Infant Supplement Rate* of the CA 800CCR COVID-19 tab under Aid Code 43. These costs shall be funded 00/100/00/00 (Fed/State/Health/County).
- Costs claimed on line 17 *Infant Supplement Rate* under Aid Code 43 should be inclusive of all prior month positive and negative adjustments.

### **Transitional Housing Program – Plus**

Transitional Housing Program-Plus (THP-Plus) is a county optional, county-certified transitional housing program for former foster youth, including those formerly supervised by probation, ages 18 to 24 who exited foster care at or after age 18. Effective July 1, 2020, a county may, at its option, extend THP-Plus services to former foster youth participating in THP-Plus as of July 1, 2020, without regard to age or length of time restrictions until June 30, 2021. Counties shall continue to claim former foster youth enrolled in THP-Plus in accordance with claiming instructions outlined in [CFL No. 04/05-54](#). Please note this program was realigned in 2011 and is funded with 100 percent Local Revenue Funds. See [CFL No. 11/12-18](#) for more information.

### **Administrative Claiming Instructions**

Pursuant to the flexibilities provided by the Stafford Act and The Budget Act of 2020, NMDs who cannot currently meet any of the five participation conditions due to COVID-19 shall retain EFC eligibility through June 30, 2021 unless state or federal flex ends sooner. and shall be claimed per normal claiming procedure with existing administrative claiming codes. This is available through June 30, 2021, unless flexibilities are rescinded sooner.

### **Claiming Instructions for the September 2020 and December 2020 quarters**

The following sections outline instructions for claiming case management costs associated with eligible young adults upon turning 21 years old while in EFC on or after April 17, 2020, for the time period between July 1, 2020 and June 30, 2021.

For the September 2020 and December 2020 quarters, counties shall continue to utilize existing program codes (PC) to claim administrative costs associated with young adults as outlined below. A percentage of costs charged to those codes will shift to the newly established Ledger 191 (NMD COVID INELIGIBLE-CWD) and Ledger 192 (NMD COVID INELIGIBLE-CPD). The SUOs established below will shift costs to be funded with 100 percent GF, up to the allocation. Costs exceeding the GF allocation will be funded with 100 percent county-only funds.

### **County Welfare Departments**

For CWDs for the September 2020 and December 2020 quarters, case management costs related to eligible young adults who have turned 21 years old shall be claimed to PC 842 (EFC Case Management). Effective with the September 2020 quarter, Ledger 191 (NMD COVID INELIGIBLE-CWD) is established to capture costs associated with the GF allocation for these young adults. The SUO 793 (Reduce GF% NMD COVID INELIGIBLE-CWD) reduces costs claimed to PC 842 by 49.93 percent and SUO 794 (Move GF% to NMD COVID INELIGIBLE-CWD) shifts those costs to access the GF allocation for CWDs. This percentage was determined based on a methodology using CWD-supervised eligible young adults 21 years of age or older caseloads multiplied by additional social worker time for continued support of young adults who were in EFC upon turning 21 years of age divided by total time study hours. Costs exceeding the GF allocation shall shift to county only via SUO 795 (SUO O/M NMD COVID INELIGIBLE-CWD).

County Probation Departments

For CPDs for the September 2020 and December 2020 quarters, case management costs related to eligible young adults who have turned 21 years old shall be claimed to PC 851 (EFC Case Management). The SUO 796 (RED/MOVE CO%-NMD COVID INELIGIBLE-CPD) reduces and shifts costs claimed to PC 851 by 22.32 percent to access the GF allocation for CPDs. This percentage was determined based on a methodology using total program allocation divided by total expenditures. Costs exceeding the GF allocation shall shift to county only via SUO 797 (SUO O/M NMD COVID INELIGIBLE-CPD).

**Claiming Instructions for the March 2021 and June 2021 quarters**

Effective the March 2021 quarter, PC 867 (Case Management – Young Adult A3/21) and PC 868 (Case Management Probation – Young Adult A3/21) are established to capture case management costs (which include the costs of tracking and issuing benefits) associated with young adults who are receiving support beyond age 21 for CWDs and CPDs, respectively. Costs associated with this population will also track to Ledgers 191 and 192 and funded with 100 percent GF.

County Welfare Departments

PC	867	Case Management – Young Adult A3/21
TSC	8671	Case Management – Young Adult A3/21
PIN	867003	Transportation
PIN	867088-91	Operating Costs*
PIN	867092	Casework Overtime (OT)/Compensating Time Off (CTO)
PIN	867093	Support Staff – OT/CTO
PIN	867094	Start Up/Nonrecurring Costs
DTP	A89	Young Adult - Support Staff

The sharing ratio for this code is 00/100/00 (Fed/State/County)

\*The County must have a Letter of Intent on file with the California Department of Social Services (CDSS) to use Support/Operating PIN codes ending in 88-91 (see [CFL No. 00/01-78](#) for more information on direct charge process).

Costs claimed in excess of the GF allocation will shift to 100 percent county only dollars using SUO 795 (SUO O/M NMD COVID Ineligible -CWD).

Time Study Code Description

CODE 8671 CASE MANAGEMENT – YOUNG ADULT

Includes activities directed to a specific young adult when the young adult meets the eligibility criteria for continued support as well as the tracking of cases and issuance of the benefits. The following are allowable activities:

- Assessing the young adult’s needs.
- Referrals to services when necessary.
- Monthly visitation.
- Travel time associated with any of the above activities.
- Tracking of eligible cases and issuance of benefits for this population

County Probation Departments

PC	868	Case Management Probation – Young Adult A3/21)
NTSC	8680	Case Management Probation – Young Adult A3/21)
PIN	868059	Probation Expense

Costs claimed in excess of the GF allocation will shift to 100 percent county only Probation dollars using SUO 797 (SUO O/M NMD COVID Ineligible – CPD).

*Non-Time Study Code Description*

CODE 868 CASE MANAGEMENT PROBATION – YOUNG ADULT

Includes activities directed to a specific young adult when the young adult meets the eligibility criteria for continued support as well as the tracking of cases and issuance of the benefits. The following are allowable activities:

- Assessing the young adult’s needs.
- Referrals to services when necessary.
- Monthly visitation.
- Travel time associated with any of the above activities.
- Tracking of eligible cases and issuance of benefits for this population

To the extent that case management and other administrative activities associated with the young adult population has an overall effect of increasing certain costs already



borne by a local agency for programs or levels of service mandated by the 2011 Realignment Legislation, it shall apply to local agencies only to the extent that the state provides annual funding for the cost increase. Any new program or higher level of service provided by a local agency for the case management of the young adult population above the level for which funding has been provided shall not require a subvention of funds by the state or otherwise be subject to Section 6 of Article XIII B of the California Constitution.

### **Discount Rate Calculation**

The young adults receiving support beyond age 21 are not included in the Foster Care Title IV-E Nonfederal Discount Rate (Discount Rate) calculation. NMDs who cannot meet any of the five participation conditions due to COVID-19 impacts shall continue to be included in the Discount Rate calculation. The [Administration of Children, Youth, and Families Program Instruction PI-20-10](#) permits states to have temporary policies that permit NMDs who would have otherwise lost EFC eligibility due to education or employment activity disruption to retain their eligibility until the emergency declaration period related to the COVID-19 pandemic has ended. Therefore, the cases and claiming instructions outlined in this letter will not impact county Discount Rates and shall continue to be calculated according to the formula outlined in [CFL No. 15/16-46](#). Please see the most recent Discount Rate template in [CFL No. 18/19-81](#).

For more information on the continuing support for young adults beyond the age of 21 described in this letter, please see [ACL No. 20-117E](#). Additionally, more information on the continuance of assistance payments for NMDs in EFC can be found in [ACL No. 20-112](#).

Program-related questions should be directed to the CDSS Children and Family Services Division at [CFSD@dss.ca.gov](mailto:CFSD@dss.ca.gov). For claiming questions or requests for additional guidance regarding the information in this letter, contact the Fiscal Policy and Analysis Bureau 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

Attachment

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

**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**

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						
<b>6 Subtotal (Lines 1 - 5)</b>						
7 Prior Months Cancellation Contra Roll						
8 Recoveries of Aid						
9 Prior Month Negative Adjustment						
<b>10 Subtotals (Lines 7 - 9)</b>						
11 Prior Month Positive Adjustment						
<b>12 TOTAL PAYROLL, CURRENT + PRIOR MONTH (Lines 6+10+11)</b>						
13 Family-Only Rate						
14 Rate Differential						
15 COVID-19 Rate Increase						
16 EFC Support Beyond Age 21						
17 Infant Supplement Rate						
<b>18 TOTAL ALL PAYMENTS (Lines 12 through Line 17)</b>	-	-	-	-	-	-
19 Family-Only Rate Persons Count						
20 FFA Rate Persons Count						
21 COVID-19 Rate Increase Persons Count						
22 Main Payroll Persons Count						

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

**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**

County	Date (Month/Year)
Claim Contact	Telephone

Summary by Funding	Federal	State	State/County 2011	County 2011	County	Total
<b>23 COVID-19 Foster Care (42)</b>						
24 Family-Only Rate						
25 Rate Differential						
26 COVID-19 Rate Increase						
<b>27 FC (42) Total Payments</b>						
<b>28 COVID-19 Foster Care (40)</b>						
29 Family-Only Rate						
30 Rate Differential						
31 COVID-19 Rate Increase						
<b>32 FC (40) Total Payments</b>						
<b>33 COVID-19 Extended Foster Care (49)</b>						
34 Family-Only Rate						
35 Rate Differential						
36 COVID-19 Rate Increase						
<b>37 EFC (49) Total Payments</b>						
<b>38 COVID-19 Extended Foster Care (43)</b>						
39 Family-Only Rate						
40 Rate Differential						
41 COVID-19 Rate Increase						
42 Support Beyond Age 21						
43 Infant Supplement Rate						
<b>44 EFC (49) Total Payments</b>						
<b>45 COVID-19 Emergency Assistance - Foster Care (5K)</b>						
46 Family-Only Rate						
47 Rate Differential						
<b>48 EA-FC (5K) Total Payments</b>						
<b>49 COVID-19 Emergency Caregiver Funding (5L)</b>						
50 Family-Only Rate						
51 Rate Differential						
<b>52 EC (5L) Total Payments</b>						
<b>53 COVID-19 TOTAL PAYMENTS</b>						

Last Modified: 10/31/2020

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 claimed on Main Payroll line should be inclusive of all prior months positive and negative adjustments.
5. Line 6: Subtotal of Lines 1 through 5. This amount will calculate automatically.

**Prior Month Adjustments**

6. Lines 7-9: No information shall be entered into these lines. All prior months positive and negative adjustments should be included in the net total entered on the Main Payroll line.  
Line 10: This total will match the subtotal from Line 6.  
Line 11: No information shall be entered into these lines. All prior months positive and negative adjustments should be included in the net total entered on the Main Payroll line.

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

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

**Family Only Rate**

8. Line 13: Enter the amounts paid to cases receiving the Family Only rate.

**Covid-19 Rate Increase**

9. Line 14: Enter the amount *above* the Family Only Rate entered on Line 13 for cases who receive a negotiated rate above the Family Only Rate (up to the Short-Term Residential Therapeutic Rate).

**Supervised Independent Living Program (SILP)**

10. Line 15: Enter the amount paid to NMDs for those SILP cases whose housing was disrupted due to Covid-19

**EFC Support Beyond Age 21**

11. Line 16: Enter the amount paid to cases whose EFC eligibility ended due to turning 21, but whose payments were extended through June 30, 2021 due to Covid-19.

**Infant Supplement Rate Supplement**

12. Line 17: Enter amounts paid to cases receiving the infant supplement rate for young adults receiving support beyond age 21.

**Total of All Payments**

13. Line 18: This is the total of all aid payments. This amount will calculate automatically.

**Family Only Rate – Persons Count**

14. Line 19: Enter the amount of cases receiving the Family Only Rate

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

15. Line 19: Enter the amount of cases receiving a negotiated rate *above* the Family Only Rate. Do not include the Family Only Rate cases in this count.

**Main Payroll Persons Count**

16. Line 22: Enter the total Persons Count for each aid code, excluding the Family Only Rate and Covid-19 Rate Increase Persons Counts.

**Summary of Funding**

17. Lines 23 through 53 will calculate automatically.