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Distribution Date	e: January 21, 2022
To:	PPOC.40
	Consortium.RegionalManagers.All,
	Committee.FosterCare.All
CIT Name:	Expectant Parent Payment
From:	CalSAWS Project
PPOCs, please fo	orward to the appropriate impacted staff in your county:
BenefitsCal	
Description: (Including any step-by-step instructions)	Purpose The purpose of this CIT is to provide CalSAWS counties with the temporary process to issue payment for an expectant parent who resides in an eligible Foster Care placement as explained in ACL 21-123 New Expectant Parent Payment.  Background Beginning January 1, 2022, an expectant parent payment will be available to pregnant minors and nonminor dependents (NMDs) three months prior to the expected due date, in accordance with Assembly Bill (AB) 153. This payment will be in addition to the infant supplement payment which begins the month of birth. Payment is to be made directly to the pregnant minor or non-minor dependent.  Additional Information:
	System Change Request (SCR) CA-231834 has been created to address system changes. This SCR is currently scheduled for 23.05 Release (May 2023).

Until automation can occur, the Expectant Parent Payment is issued as a lump sum of \$2,700; counties will need to establish a manual way to track these cases for State and Fiscal reporting purposes. Note: Tracking and processes may require

adjustment when CFL 21/22-XX <u>Claiming Instructions for the Expectant Parent</u> Payment for Minor and Non-minor Dependents is published.

Until automation can occur, counties can use the recommended process below to issue benefits.

## **County Action:**

Eligibility staff take the following steps to issue payment to eligible pregnant foster youth:

- If the pregnant youth is not in a Supervised Independent Living Placement (SILP) and their own payee, follow your County process to add the youth to the Foster Care Resource Data Bank, suggested Placement Type: Court Specified Home. Notate the Resource ID number to easily locate the foster youth/ payee in step 4. Note: The License Detail page need not be completed.
- 2. In the context of a Foster Care case, click on Eligibility on the global navigation tab, and select Customer Information from the Local drop list menu. Scroll down the Task Navigation bar and select **Needs**.
- 3. On the Needs List page, select Add Need.
  - a. Select the pregnant youth from the **Name** drop list.
  - b. Select Foster Care/Kin-GAP Services from the Category drop list.
  - c. Select Foster Care Incidental Payment from the Type drop list.
  - d. Enter the **Begin Date** as the current date. Enter the **End Date** as the last day in the current benefit month.
  - e. Enter Expectant Parent Payment in the Description text field.
  - f. Select Status Indicated and Status Reason Documented
  - g. Select Service Arrangement from the Save and Add New drop list and click Go.
- 4. On the Service Arrangement Detail page
  - a. Enter the benefit month begin and end date in the Arrangement Period text box.
  - b. Select the Aid Code from the Aid Code drop list.
  - c. Select **Same as Provider** from the **Payee** drop list.
  - d. Click on **Select** under **Provider**, and enter the **Resource ID** number for the pregnant youth. Click **Select**.
  - e. Select **Yes** or **No** in the **Employed** drop list.
  - f. Enter **Expectant Parent Payment** in the **Service Type Description** text field.
  - g. Enter 2700.00 in the Total text field.
  - h. Select **Approved** from the **Status** drop list, **Eligible for Service** from the **Status Reason** drop list, and enter the date in the **Status Date** field.
  - i. Click Save and Return.
- 5. Click the **Service Arrangement ID** hyperlink.
  - a. Click on Create Payment Request
  - b. Enter 2700.00 in the **Requested Amount** text field.

	c. Select the benefit month from the <b>Service Month</b> drop list.
	d. Select <b>Not Applicable</b> from the <b>Pay Code</b> drop list. Note: this
	selection is intended to assist Fiscal in identifying these payments.  e. Click <b>Save</b> .
	6. Approve the <b>Payment Request</b> per your County approval process.
	8. Approve the <b>rayment kequest</b> per your country approval process.
	<b>Note:</b> Payment request are approved based on assigned security rights in each county. The approving person cannot be the same worker that created the payment request.
	If you have questions on this CIT, please reach out to the Primary Contact and cc your Regional Managers.
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Backup Project Contact: (Name and email address)	Laura Ould OuldL@calsaws.ora Committee.FosterCare.Facilitator@CalSAWS.org
Attachments:	None
Web Portal Link:	OR
	You may also retrieve the CIT document and attachments by following these steps:  1. Click on the CRFIs & CITs link at the top of the page.  2. Click on the "CalSAWS Information Transmittal (CIT)" folder.  3. Click on the "2022" folder.  4. Click on the appropriate CIT # folder.

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