

- CalSAWS M&E       CalWIN Migration

<b>Distribution Date:</b>	June 16, 2022
<b>To:</b>	PPOC.40 Consortium.RegionalManagers.All, Consortium.FosterCare.All
<b>CIT Name:</b>	ACL 22-21 Interim Process to Issue Innovative Model of Care Rates
<b>From:</b>	CalSAWS Project

**PPOCs, please forward to the appropriate impacted staff in your county:**

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| <input type="checkbox"/> General                 | <input type="checkbox"/> Reports              |
| <input checked="" type="checkbox"/> Policy       | <input type="checkbox"/> Fiscal               |
| <input type="checkbox"/> CW                      | <input type="checkbox"/> Caseload Movement    |
| <input type="checkbox"/> CF                      | <input type="checkbox"/> Management           |
| <input type="checkbox"/> MC                      | <input type="checkbox"/> Fiscal               |
| <input type="checkbox"/> CMSP                    | <input type="checkbox"/> Security             |
| <input checked="" type="checkbox"/> FC/KG/AAP    | <input type="checkbox"/> Batch and Interfaces |
| <input type="checkbox"/> Child Care              | <input type="checkbox"/> Imaging              |
| <input type="checkbox"/> WtW                     | <input type="checkbox"/> Migration            |
| <input type="checkbox"/> Other Program(s) _____  | <input type="checkbox"/> Conversion           |
| <input type="checkbox"/> BenefitsCal             | <input type="checkbox"/> Technical            |
| <input type="checkbox"/> Your Benefits Now!      | <input type="checkbox"/> Training             |
| <input type="checkbox"/> Customer Correspondence | <input checked="" type="checkbox"/> Help Desk |
| <input type="checkbox"/> Other _____             |   |

<p>Description: (Including any step-by-step instructions)</p>	<p><b>Purpose</b></p> <p>The purpose of this CIT is to provide guidance to counties issuing a program-specific or a child-specific rate for a county-designed Innovative Model of Care (IMC) to support foster children and Non-Minor Dependents (NMDs) with complex needs unable to be met in existing Aid to Families with Dependent Children-Foster Care (AFDC-FC) programs or using alternative funding sources.</p> <p><b>Background</b></p> <p>The passage of Assembly Bill (AB) 2944(Chapter 104, Statutes of 2020) Welfare and Institutions Code (WIC) section 11460(a)(3), provided the ability to develop, implement, and approve individualized rates, which may be program-specific or child-specific. An IMC must provide children and NMDs with complex needs with service alternatives to residential care, enhance the ability of children to remain in the least restrictive, most family-like setting as possible, and promote services that address the needs and strengths of individual children and their families.</p> <p>Please see ACL 22-21 <a href="#">Guidelines for Counties to Request a Program-Specific or Child-Specific Rate for an Innovative Model of Care to Support Children and Non-</a></p>
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	<p><u>Minor Dependents with Complex Needs Unable to be Met in Existing AFDC-FC Programs or Using Alternative Funding Sources.</u></p> <p>CalSAWS has created CA-244200 to address future system changes for this effort, however system changes cannot be identified or implemented until further instruction from CDSS has been received.</p> <p><b>Additional Information:</b> This CIT explains the interim process for issuing payment under a county IMC.</p> <p><b>County Action:</b> Eligibility staff should take the following steps to issue payment for a child or youth placed in an approved child-specific or program-specific IMC home.</p> <p><b>Note:</b> The following steps assume the new Foster Care Resource has been added to the Foster Care Resource Data Bank according to your county business practice.</p> <ol style="list-style-type: none"> <li>1) In the context of an active Foster Care case, click on <b>Eligibility</b> on the global navigation tab, and select <b>Child Placement</b>. Click <b>Add</b>.</li> <li>2) Click <b>Select</b> to locate the new IMC placement home, enter the Resource Name or ID number. <b>Select</b> the appropriate payee from the Search Results Summary.</li> <li>3) Verify the applicable <b>Placement Type</b>, enter <b>Care Provider Relationship to Child</b> and <b>Begin Date</b> as appropriate.</li> <li>4) Click <b>Add</b> in the <b>Rate List</b> section. The <b>Rate Detail</b> page opens.</li> <li>5) Select <b>Non-Standard Rate</b> from the <b>Type</b> drop list. Enter the authorized monthly payment amount in the <b>Rate</b> field, and <b>Monthly</b> from the <b>Frequency</b> drop list. Enter the <b>Begin Date</b> of the payment, Click <b>Save and Return</b>.</li> <li>6) Review the <b>Child Placement Detail</b> page for accuracy, click <b>Save and Return</b>.</li> <li>7) On the Task Navigation bar, click <b>Run EDBC</b>. Follow current business practice for EDBC authorization, complete a case <b>Journal</b> entry.</li> </ol> <p>If you have questions on this CIT, please reach out to the Primary Contact and cc your Regional Managers.</p>
<p>Primary Project Contact: (Name and email address)</p>	<p>Ignacio Lázaro <a href="mailto:lazaroi@calsaws.org">lazaroi@calsaws.org</a> <a href="mailto:Committee.FosterCare.Facilitator@CalSAWS.org">Committee.FosterCare.Facilitator@CalSAWS.org</a></p>
<p>Backup Project Contact: (Name and email address)</p>	<p>Laura Ould <a href="mailto:OuldL@calsaws.org">OuldL@calsaws.org</a> <a href="mailto:Committee.FosterCare.Facilitator@CalSAWS.org">Committee.FosterCare.Facilitator@CalSAWS.org</a></p>
<p>Attachments:</p>	<p>ACL 22-21</p>
<p>Web Portal Link:</p>	<p>██████████</p> <p>OR</p> <p>You may also retrieve the CIT document and attachments by following these steps:</p>

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|  | <ol style="list-style-type: none"><li>1. Click on the CRFIs &amp; CITs link at the top of the page.</li><li>2. Click on the "CalSAWS Information Transmittal (CIT)" folder.</li><li>3. Click on the "2022" folder.</li><li>4. Click on the appropriate CIT # folder.</li></ol> |
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