

## STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY **DEPARTMENT OF SOCIAL SERVICES**

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



August 19, 2016

ALL COUNTY LETTER (ACL) NO. 16-65

TO: ALL COUNTY WELFARE DIRECTORS

ALL CHIEF PROBATION OFFICERS ALL COUNTY ADOPTION AGENCIES ALL GROUP HOME PROVIDERS

ALL COUNTY MENTAL HEALTH DIRECTORS

ALL COUNTY FISCAL OFFICERS

ALL TITLE IV-E TRIBES

SUBJECT: ASSEMBLY BILL (AB) 403 GROUP HOME EXTENSION REQUEST

TO CONTINUE PLACEMENTS AND CURRENT RATE

CLASSIFICATION LEVEL (RCL) RATE

REFERENCE: WELFARE AND INSTITUTIONS CODE (W&IC) SECTION 11462.04;
AB 403 (CHAPTER 773, STATUTES OF 2015);

The purpose of this ACL is to provide instructions to county welfare and probation departments and group home (GH) providers about how to proceed with an extension request, pursuant to Welfare and Institutions (W&IC) section 11462.04, and to clarify what rate is operative during the extension period. AB 403, Chapter 773, Statutes of 2015, creates a new GH program licensing category called a Short-Term Residential Therapeutic Program (STRTP) which will be funded using a new rate structure.

Effective January 1, 2017, GH's must either transition to a STRTP or receive an approved extension request from the County and California Department of Social Services (CDSS). The current RCL rate system will no longer be used to set rates as of December 31, 2016. In addition, the GH moratorium exception for increasing bed capacity will no longer be in effect. The extension will allow the GH to continue to be paid at their current RCL rate in existence at the time of the request. Until the extension requests have been processed and granted, child welfare or probation departments may continue to place youth in a GH when it is the only viable placement option for the youth.

REASON FOR THIS TRANSMITTAL

[X] State Law Change

[] Federal Law or Regulation

Change
[] Court Order

[] Clarification Requested by

One or More Counties

[] Initiated by CDSS

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Counties can begin to submit extension requests following the process outlined in this letter. The extension for a GH may be granted up to December 31, 2018. Counties will have the ability to request extensions in either six or twelve month increments.

## PROCESS TO REQUEST THE EXTENSION

Counties should work with their GH providers and discuss capacity needs. The county Child Welfare Services or Probation Departments must request an extension on behalf of a GH provider by submitting to CDSS the enclosed GH Extension Request form. Every GH requesting an extension would include all facilities in that program. For example, the extension may cover several facilities in multiple counties for that GH provider's program. If the extension request is not made by the host county (which is the county agency in which the provider obtained their license), a placing county (a county agency that places multiple youth in the GH) may support the extension request for a GH. If a placing county requests an extension and it is subsequently approved by the CDSS, the placing county shall provide a copy of the extension approval to the host county. Only one county agency needs to apply.

The submission of an extension request by the county will be reviewed by the CDSS, Foster Care Audits and Rates Branch (FCARB). Counties will send the attached Extension Request form directly to FCARB who will review extensions along with additional information such as determining if there are any financial audit findings, mental health certification status and Community Care Licensing Division (CCLD) concerns that may impact the approval. Forms can be mailed to the address listed on the form or sent by email to fosterca@dss.ca.gov.

Counties are expected to mitigate the risk of displacing youth in GH's by implementing strategies to increase the number and quality of Home Base Family Care (HBFC) placement options. Resources were allocated for foster care recruitment efforts. The plans submitted to CDSS which outlined activities and strategies to be undertaken using Foster Parent Recruitment, Retention, and Support funds will be reviewed.

In determining whether a GH extension request should be submitted, the following criteria should be considered:

1) The GH is in the process of converting to a STRTP and has indicated the need for additional time to begin and/or complete AB 403 related requirements which may include submitting an updated plan of operation which includes a program statement, or submitting an application to CCLD to become a STRTP. In meeting these specific mandates, counties and the CDSS will take into account the progress a GH has made at the time of the submittal.

- 2) The GH does not intend to convert to a STRTP and the county needs to have the GH continue to serve youth while the county implements a plan to transition the youth to a HBFC setting or another appropriate setting. Counties must be able to articulate what actions are being taken to transition youth rather than justifying the extension solely based on a lack of HBFC placement options.
- 3) The county lacks specific types of resource families with the ability and experience to provide the care, needed services, and supports for youth that have unique needs which cannot be readily met without the proper training. This may include but not be limited to training for the care and supervision of youth with intensive specialized needs, therapeutic foster care, or how to handle probation or commercially sexually exploited youth.

The CDSS will notify the child welfare and probation county placing agency, the GH, and CCLD by sending a copy of GH extension request form to the county and provider which will indicate the decision to approve or deny the request. The FCARB will review and process extension requests within a 45 day period.

Please be advised that in order to retain your Aid to Families with Dependent Children-Foster Care (AFDC-FC) rate you must maintain your license issued by CCLD, Title 22 regulations and your Secretary of State registration. Your rate is conditioned upon your nonprofit status and CCLD requirements. If you lose any of these, you will not be entitled to an AFDC-FC rate and your rate may be terminated.

Counties and GH's should note that the granting of an extension that allows the GH to continue receiving placements or their existing RCL rate past January 1, 2017, does not guarantee approval of an application for a STRTP. The STRTP rate shall be paid once an application is approved pursuant to W&IC section 11462.

If you have any questions regarding this ACL, please contact the Foster Care Rates Bureau, at (916) 651-2752 or email fosterca@dss.ca.gov.

Sincerely,

## Original Document Signed By:

Cheryl Treadwell for GREGORY E. ROSE Deputy Director Children and Family Services Division

Enclosure

## GROUP HOME EXTENSION REQUEST FOR THE RATE CLASSIFICATION LEVEL (RCL) SYSTEM

This form is to request an RCL extension (pursuant to WIC section 11462.04) on behalf of a group home provider and must be signed by a child welfare director, chief probation officer, or designee and sent to the Foster Care Audits and Rates Bureau (FCARB).

Name of County:		Check One:	Host	Placing Coun	ıty
Non-Profit Corporation	name (group home provid	er):			
Corporation's program	number given by FCARB:			RCL:	
Corporation's headqua	arter address:				
	Street		County	Zip (	Code
Extension to the RCL	system is requested for:	mc	onths.		
This RCL extension is ba	sed on the following criteria	a. Check all that a	apply:		
The group home is in the Therapeutic Program.	the process of converting to	a Short-Term F	Residential		
The provider is not congroup home.	ntinuing with CCR, and nee	eds more time to	transition y	outh out of the	
There are insufficient group care.	home based placements ar	nd/or services to	transition y	outh out of	
Child Welfare Services Director or Chief Probation Officer/or Designee Signature				Date	
County Contact Name				Phone Number	
Send to:	California Department of Foster Care Audits and F Foster Care Rates Bures 744 P Street, M.S. 8-11-7 Sacramento, California 9	Rates Branch au ( 74 t	Or email th	e form @dss.ca.gov	
RATES USE ONLY:					
APPROVE DENY					
Rates Consultant			Date		