



CDSS

WILL LIGHTBOURNE
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES
744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



EDMUND G. BROWN JR.
GOVERNOR

March 22, 2013

ERRATA

COUNTY FISCAL LETTER (CFL) NO. 12/13-29E

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY FISCAL OFFICERS
ALL COUNTY AUDITOR CONTROLLERS
ALL COUNTY PROBATION OFFICERS
ALL TITLE IV-E AGREEMENT TRIBES

SUBJECT: INTERIM COUNTY ASSISTANCE (CA) 800 CLAIMING
INSTRUCTIONS FOR THE FEDERAL KINSHIP GUARDIANSHIP
ASSISTANCE PAYMENT (FED-GAP) PROGRAM FOR PRIOR
MONTH ADJUSTMENTS

REFERENCE: CFL NO. 12/13-29, DATED FEBRUARY 25, 2013; CFL NO. 12/13-02,
DATED JULY 30, 2012; CFL NO. 10/11-64, DATED MAY 2, 2011; ALL
COUNTY LETTER (ACL) NO. 11-15, DATED JANUARY 31, 2011;
ASSEMBLY BILL (AB) 12 (CHAPTER 559, STATUTES OF 2010);
WELFARE AND INSTITUTIONS CODE SECTIONS 11385-11393

This Errata to CFL No. 12/13-29 is to provide counties with revised claiming instructions for accurately identifying and reconciling all Fed-GAP prior month adjustment expenditures from January 1, 2011 through January 31, 2013, and to correct the omission of claiming instructions for prior month adjustments for the month of January 2013.

Reconciliation of Total Fed-GAP Prior Month Adjustment Expenditures

This Errata provides counties with a reconciliation spreadsheet (Attachment I) of the total Fed-GAP prior month adjustment expenditures for the periods October 1, 2011 through January 2013. The totals on the reconciliation spreadsheet represent the net amount of what each county reported previously as the total prior month adjustment costs for the Fed-GAP program. As a reminder, the expenditures reported for costs prior to October 1, 2011, are not eligible for Title IV-E reimbursement. The reconciliation spreadsheet will be made available on the California Department of Social Services Extranet in the section titled "Claim Forms" in a Portable Document Format (PDF) titled "Fed-GAP 4T Total Prior Month Adjustment."

Counties will use this information to reconcile the expenditures identified on the spreadsheet and report them on the “Interim Summary Report of Assistance Expenditures Kin-GAP FEDERAL, Identify Cost Claimed as Prior Month Adjustments” claim form. The expenditures reported on the claim should match the expenditures provided in the reconciliation spreadsheet (Attachment I). If a county believes there is a discrepancy between the spreadsheet and the county’s internal accounting records, please submit an e-mail immediately to Assistance.Claims@dss.ca.gov with “Fed-GAP Reconciliation Discrepancy” in the subject line. Please include a contact name and phone number.

Revised Claim for January 2013 Claiming Month

A revised claim (Attachment II) is provided to allow counties to report total Fed-GAP prior month adjustments for the January 2013 claiming month. The CFL No. 12/13-29 did not provide a mechanism to report the January 2013 Fed-GAP prior month adjustments as the timing of the CFL did not coincide with the timing of the due date for the January 2013 claim. The new claim appears the same as what was released in CFL No. 12/13-29; however, it now includes the January 2013 date in the pull down menu just below the “Date (Month/Year)” cell, and indicates a revision date of March 18, 2013.

Timelines

An extension of 15 calendar days is being given to counties to report their January 2013 Fed-GAP prior month adjustments. In total, counties have 45 calendar days from the date the CFL No. 12/13-29 was released to submit the October 1, 2011 through January 2013 prior month adjustments. The due date for submission of all Fed-GAP 4T prior month adjustment interim claims is April 11, 2013.

Questions regarding this CFL should be directed to Assistance.Claims@dss.ca.gov.

Sincerely,

Original Document Signed By:

FRAN MUELLER
Deputy Director
Administration Division

Attachments

Fed-GAP 4T Total Prior Month Adjustment	Reconcile Prior Month Adjustments	Reconcile Prior Month Adjustments
County	Period: Oct 2011-Dec 2012	Period: January 2013
ALAMEDA	\$ 723,272.00	\$ 10,098.00
ALPINE	0.00	0.00
AMADOR	0.00	0.00
BUTTE	76,326.00	(494.00)
CALAVERAS	138.00	0.00
COLUSA	0.00	0.00
CONTRA COSTA	52,652.00	10,330.00
DEL NORTE	0.00	0.00
EL DORADO	(586.00)	0.00
FRESNO	(1,319,540.00)	0.00
GLENN	2,204.00	74.00
HUMBOLDT	0.00	0.00
IMPERIAL	10,960.00	0.00
INYO	0.00	0.00
KERN	997,916.00	(1,348.00)
KINGS	38,512.00	0.00
LAKE	6,700.00	3,514.00
LASSEN	0.00	0.00
LOS ANGELES	(804,448.00)	(223,524.00)
MADERA	1,402.00	4,590.00
MARIN	0.00	0.00
MARIPOSA	2,060.00	0.00
MENDOCINO	(24,168.00)	0.00
MERCED	3,904.00	0.00
MODOC	0.00	0.00
MONO	0.00	0.00
MONTEREY	(153,400.00)	0.00
NAPA	0.00	0.00
NEVADA	7,408.00	0.00
ORANGE	41,184.00	3,078.00
PLACER	2,664.00	0.00
PLUMAS	1,674.00	0.00
RIVERSIDE	1,069,010.00	90,308.00
SACRAMENTO	4,085,688.00	7,852.00
SAN BENITO	626.00	0.00
SAN BERNARDINO	4,665,124.00	3,948.00
SAN DIEGO	(185,210.00)	520.00
SAN FRANCISCO	327,766.00	4,154.00
SAN JOAQUIN	(251,494.00)	0.00
SAN LUIS OBISPO	3,272.00	0.00
SAN MATEO	319,632.00	364.00
SANTA BARBARA	2,680.00	46.00
SANTA CLARA	60,484.00	(5,952.00)
SANTA CRUZ	49,478.00	4,418.00
SHASTA	(3,624.00)	0.00
SIERRA	0.00	0.00
SISKIYOU	39,264.00	0.00
SOLANO	1,886.00	0.00
SONOMA	9,520.00	0.00
STANISLAUS	9,924.00	0.00
SUTTER	0.00	0.00
TEHAMA	190.00	0.00
TRINITY	0.00	0.00
TULARE	402,752.00	(602.00)
TUOLUMNE	0.00	0.00
VENTURA	3,536.00	2,774.00
YOLO	6,462.00	1,660.00
YUBA	(14,450.00)	0.00
GRAND TOTAL:	\$ 10,269,350.00	\$ (84,192.00)

**INTERIM SUMMARY REPORT OF ASSISTANCE EXPENDITURES Kin-GAP FEDERAL
Identify Cost Claimed as Prior Month Adjustments**

County	Date (Month/Year)
Claim Contact	Telephone

		Kin-GAP FED							
Aid Code		4T (Prior Month Adj 10/01/12- 12/31/12)	4T (Prior Month Adj 07/01/12- 09/30/12)	4T (Prior Month Adj 04/01/12- 06/30/12)	4T (Prior Month Adj 01/01/12- 03/31/12)	4T (Prior Month Adj 10/01/11-12/31/11)	4T (Prior Month Adj 07/01/11 - 09/30/11)	4T (Prior Month Adj 04/01/11 - 06/30/11)	4T (Prior Month Adj 01/01/11 - 03/31/11)
1	Main Payroll								
2	Current Month Supplemental Payroll								
3	Current Month Cancellation Contra Roll								
4	Prior Month Supplemental Payroll								
5	Current Month Adjustment								
6	Subtotal (Lines 1 - 5)								
7	Prior Month Cancellation Contra Roll								
8	Recoveries of Aid								
9	Prior Month Negative Adjustment								
10	Subtotal (Lines 7 - 9)								
11	Prior Month Positive Adjustment								
12	TOTAL AID PAYMENTS, Current + Prior Months (Lines 6+10+11)								
13	Supplemental Clothing Allowance								
14	Number of Children Non-Recurring Payments								
15	Persons Count								
SUMMARY BY FUNDING		Federal	Federal (ARRA)	State (ARRA)	State	County 2011	County/Co. ARRA	Total	
16	Kin-GAP (Cost claimed 10/01/11 forward)								
17	Kin-GAP (Cost for 07/01/11-09/30/11) FMAP 50% (Pending Federal Approval)								
18	Kin-GAP (Cost for 03/01/11-06/30/11) FMAP 51.2% (Pending Federal Approval)								
19	Kin-GAP (Cost for 01/01/11-03/31/11) FMAP 53.2% (Pending Federal Approval)								
20	Total								

COUNTY WELFARE DIRECTOR'S CERTIFICATION

I hereby certify, under penalty of perjury, that I am the official responsible for the administration of the public welfare programs in said county; that I have not violated any of the provisions of Sections 1090 to 1096, inclusive, of the Government Code; that the amounts that the aid payments, aid repayments and adjustments reflected herein have been made in accordance with all provisions of the Welfare and Institutions Code and the rules and regulations of the California Department of Social Services.

Signature of County Welfare Director	Date
--------------------------------------	------

COUNTY AUDITOR'S CERTIFICATION

I hereby certify under penalty of perjury, that I am the officer in aforesaid county responsible for the examination and settlement of accounts; that I have not violated any of the provisions of Section 1090 to 1096, inclusive, of the Government Code; that the amounts claimed herein are in accordance with authorizations for the above-referenced public assistance programs made by the county; that said amounts correctly reflect Federal, State and County shares in the aid payments claimed and that warrants therefore have been issued, according to law and the rules and regulations of the California Department of Social Services.

Signature of County Auditor	Date
-----------------------------	------