



CalWORKs Eligibility Handbook

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California Work Opportunity and
Responsibility to Kids (CalWORKs)

San Francisco Human Services Agency
City and County of San Francisco



SAN FRANCISCO
HUMAN SERVICES AGENCY



CalWORKs Eligibility Handbook

Disclaimer: The information provided in this Handbook is only general guidelines and information. It is not intended to be comprehensive or to address all the possible applications of, or exceptions to, the general policies and procedures described. For that reason, if you have any questions concerning eligibility for a particular benefit, or the applicability of a policy or practice to you, you should address specific questions to the Human Services Agency.

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50 - Intake

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	Effective: 9-1-19

50-3 Actions and Applications

The determination of eligibility including the gathering of all pertinent information must be completed and appropriate action taken as rapidly as possible and within not more than 45 calendar days starting with the first day after the filing of the application for CalWORKs and no more than 30 days for CalFresh approvals. CF denials have to be determined on the 30th day after application, not before or after that.

"Appropriate action" means the mailing of either an aid payment or a denial Notice Of Action. The time limit may be exceeded for CW only when circumstances beyond the control of the worker exist, such as the inability of the recipient to provide necessary clarification. If the delay is caused by the refusal of the applicant to cooperate, the application is denied. The worker will assist client in getting verifications before denying the application. CF has to be determined by the 30th day after application.

If the family or child is ineligible at the time of the application, but it appears that they will be eligible within 60 days, action on the application is withheld. The applicant is notified of the withholding and of the date when the action is to be taken. CF still has to be determined by the 30th day from application.

I. Types of Action on Applications

Actions on applications consist of approvals, denials, withdrawals, or cancellations.

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A. Approvals

If eligibility is established, aid is authorized on the date that determination of eligibility is established. Such persons are also certified for Medical Assistance (Medi-Cal).

B. Denials

Action is taken to deny cash aid if:

1. Proof of ineligibility is obtained. (This does not apply when applicant will become eligible within 60 days of his application).
2. All reasonable facts concerning eligibility are examined without establishing eligibility.
3. The applicant's whereabouts are unknown.
4. Ineligibility occurs after the legal beginning date of aid but before action is taken to grant aid.
5. The applicant establishes residence in another state before the determination of eligibility is completed.
6. The applicant fails to cooperate in providing evidence of eligibility.
7. The applicant refuses to cooperate in the application process.
8. The applicant refuses or fails to comply in providing photo imaging.

C. Withdrawals

An application can be withdrawn only upon voluntary initiative of the applicant or person applying on his or her behalf. The request for withdrawal must be in writing.

There is no requirement that denial action be taken on an application which has been withdrawn.

Inform client that they will forgo their right to appeal the decision if they withdraw their application.

When an applicant requests that an application for cash aid, CalFresh, and/or Medi-Cal be withdrawn, the worker processing the application can ask the applicant to complete the CW 89 (Application Withdrawal Request). However, the applicant is not required to do so. If the applicant completes the CW 89, a copy is given to the applicant and the

original sent to be scanned. In either case, the worker must send a CW 10 (Notice of Withdrawn Application) to the applicant to confirm the request for withdrawal.

D. Cancellations

Cancellation of an application is appropriate only in those cases where the applicant dies prior to the completion of determination of eligibility.

E. Notice of Missed Interview – NOMI (CalFresh only)

If an applicant is scheduled for an Intake interview, but does not show for the interview when called, a Notice of Missed Interview must be sent, according to CalFresh regulations. CalWIN will send this Notice automatically if the scheduled Intake appointment registers as a No-Show.

II. NACF Cases in CalWORKs Intake

There are special procedures for processing cases in Intake that are coming from Non-Assistance CalFresh (NACF).

A. For NACF cases **without CAAP** that are coming to CalWORKs Intake:

- The NACF case number will be retained for the CalWORKs case.
- The CalFresh program will continue to be assigned to the NACF program until eligibility for CalWORKs is determined.
- Records Management will add CalWORKs and Medi-Cal programs to the active NACF case **before** the start of the Intake. Records Management will **not** add another CalFresh program to the case.
- Any new information entered into CalWIN during Data Collection will affect the existing CalFresh budget. This happens because the client is making a mid-quarter report of a change. These changes, if any, will show up when EDBC is run. Make sure to case comment in CalWIN about any changes reported as part of CW application.

B. Possible Outcomes

If the case is eligible to CalWORKs:

- Align the cycles with the NACF cycles **before authorizing CalWORKs.**
- Send request to CWClerical@sfgov.org with a request for CF program to be added. Request must include:

- In the subject line: **ADD CF PROGRAM**, date program needs added
- Set a case Alert to Run EDBC in the month CF Program was added

On the first of the month that the PACF program is added by RM in CalWIN, EW will receive a task to RUN EDBC in the month CF Program has been added, process task as required.

If the case is **not** eligible to CalWORKs

- The NACF program will continue as before.
 - Contact the NACF Service Center about the outcome. Advise the NACF phone EW that the client has made a mid-period report and that this may result in a change next month. Advise on task assignment needed to process NACF mid period changes.

III. TCF cases Applying for CalWORKs:

The following procedure are for TCF cases applying for CalWORKs:

1. If CW eligible, TCF must be manually discontinued at the end of the month with a 10 day Notice of Action
2. Force the Cycle for CW and PACF to match (TCF does not have a cycle)
3. RUN EDBC, do not evaluate CF in the month of TCF
4. Send a request to CWClerical@sfgov.org to add the CF Program in the month following the discontinuance of TCF
5. Set a case Alert to RUN EDBC in the month CF was added

IV. NACF cases with CAAP coming to CalWORKs Intake:

The following procedure is applied when someone applies for CalWORKs with an active NACF and CAAP case.

1. The CalWORKs case will be assigned a new case number.
2. If both CalWORKs and CalFresh pass:
 - CalWORKs cash aid can only be authorized to begin the first day after the applicants discontinuance from CAAP.
 - CalFresh should be authorized for the first day of the month following the discontinuance of the NACF case.

3. Delete the Notice of Action about the approval of the CF program. Since there is no break in aid, the Notice is not necessary.
4. Align the CalWORKs cycles with the existing CF cycles from the NACF case.
5. Contact the CAAP and NACF program Service Centers to inform them that the applicant has been approved for CalWORKs.
6. Request that the CAAP be discontinued as soon as possible.
7. Send request to CWClerical@sfgov.org with a request for CF program to be assigned to CW case load number.

V. Concurrent CAAP and CalWORKs benefit issuance

If an applicant currently on CAAP applies for CalWORKs, and is found eligible, the CAAP grant is budgeted as income for the month of application.

VI. Applicants for CalWORKs who are approved for CalFresh only:

If an applicant for CalWORKs is found to be ineligible for CalWORKs but is eligible for CalFresh benefits, the following actions must be taken:

- Determine CF eligibility and approve CF program as eligible. Follow NACF regulations and the 30 day time line for CF program approval.
- Send request to CWClerical@sfgov.org with a request for CF program to be transferred to the CF program.
- Case comment in CalWIN

VII. Modified Categorical Eligibility for Food Stamps

Effective February 1, 2011, the CalFresh resource rules changed, and the value of all resources is no longer considered when determining eligibility for CalFresh benefits, for households with gross income that doesn't exceed 130 percent of FPL and has received the "Family Planning-PUB 275" brochure. Case comment about having given Pub 275 to avoid CF error.

VIII. Applicant IEVS

During the Application Registration process, Records Management will request an applicant IEVS report.

If, for some reason, Records Management does not request the applicant IEVS report, the Intake worker will need to request a recipient IEVS report after the case has been approved.

IX. Bank Account Balance Verification

Form 801 is used by staff to obtain verification of balances in bank or credit union accounts of applicants and recipients.

This form is signed by the applicant/recipient, and forwarded to the institution by the worker to avoid charges that may be levied by the institution if the client submits the form.

X. CHDP Referrals

CHDP is an important referral resource that connects clients with primary care doctors and dentists for preventative health care. CHDP staff educate clients about how to access the health care system and the importance of preventative care.

All applicants must be informed about CHDP at Intake.

Make CHDP referrals on all applications during pending status and submit the print out of the referral to your supervisors.

In CalWIN, on the "Collect CHDP/Social Service Request Detail" screen, the worker needs to enter "Y" or "N" in the first three check boxes. If the client wants a referral to CHDP, enter "Y" in all three boxes, update the Effective Begin Date, and print the referral from the Client Correspondence subsystem. Forward the paper referral to C00X.

XI. CAPI Program

The Cash Assistance Program for Immigrants (CAPI) is a state funded program for aged or disabled persons who are ineligible for SSI due to immigration status.

The basic eligibility rules for CAPI are:

- Meet all SSI/SSP eligibility criteria except for immigration status.
- Be aged, blind, or disabled
- Be a resident of California
- Have resources below the allowable limits of \$2250 for an individual or \$3350 for a couple
- Having a sponsor who is deceased or disabled
- Have income less than the CAPI standards (the monthly CAPI grant)
- Submit proof of ineligibility for SSI/SSP from the Social Security Administration.

Follow current SSI advocacy process. Refer to CAPI program administered by the MediCal Program.

XII. MINT Program

MINT is a program that aids the newborns of incarcerated mothers. It applies only to women who are incarcerated in a federal facility.

The MINT Coordinator will contact designated EW supervisor to arrange an appointment for the applicant. Designated supervisor will e-mail task request to CWclerical@sfgov.org and request intake to be assigned on round robin on the pre-arranged date/time for the MINT intake.

The applicant must submit a letter from the MINT Coordinator that states when the applicant is expected to be released from the MINT program. The letter will also state that their shelter cost is \$5.00. The Intake worker will also ask where the mother and child will be going after their release from the MINT program. In some cases, the mother and child will relocate to another county or state. An ICT may be needed if the client is relocated to another California county. In some cases, the mother will be returned to federal custody.

CalWIN is not programmed for the MINT program. CalWIN Window-Display Institutional Care Summary must be completed with the Effective Begin Date the applicant's crime took place. Enter TYPE – Correctional Facility and Business Name – The GEO Inc

EW will complete the Intake Process on the same day, including explanations of Informing Notices. Applicant not required to attend CIS.

If case is approved, an Alert will be created to follow up on clients whereabouts after her exit date

MINT cases are child only cases. Only the needs of the child are considered for cash and CF benefits. Both the mother and child must be determined for MAGI eligibility and are eligible for Medi-Cal.

MINT applicants have the same eligibility and reporting requirements as other CalWORKs applicants.

A cover letter from the MINT coordinator will be scanned into iFiles. The assigned EW needs to let the MINT coordinator know to report to Service Center information on the client's whereabouts after the child is born. If the child does not remain with the mother after birth, the EW assigned the task must find out where the child has been placed.

The MINT coordinator's phone number is:

XIII. FRED Referrals and the Application Process

A. If the client did not cooperate with FRED during a previous application and the client has reapplied now, if the issue of the original FRED referral still exists, the EW should first assess the situation again (ask client questions to resolve the issue) and ask for verification to settle the issue. If there is no verification and the client's explanations are not consistent or believable, a FRED re-referral should be made.

B. If the issue of the previous FRED referral is no longer an issue in the current application, then the non-cooperation with FRED should no longer be used to deny the new application.

C. If the client in situation A above is asking for emergency services (EFS, IN, THA) the FRED duty workers should be consulted to help resolve the issue as quickly as possible. In situation B above, the non-cooperation with FRED should not hold up the issuance of emergency needs benefits.

D. The EW is in charge of making these decisions on the case/application, not the FRED worker or FRED supervisor. If in doubt, the worker should consult with the supervisor and if needed a manager.

XVI. Verifying Shelter Cost and Excess Deduction

Effective September 1, 2019, CWDs must accept shelter costs reported by a CalFresh applicant or recipient on a signed initial application, periodic report, or recertification application as sufficient to claim the excess shelter cost deduction, and cannot require additional verification absent certain circumstances.

With implementation of AB 494, the WIC section 18901.15 requires that CWDs accept reports of shelter costs made by a CalFresh recipient or applicant on a signed CalFresh initial application, periodic report, or recertification application as sufficient for determining the excess shelter cost deduction.

The excess shelter costs deduction cannot be more than the current maximum, unless the household includes at least one elderly and/or disabled member. CalFresh households with at least one elderly and/or disabled member are eligible to claim the uncapped excess shelter costs deduction and can have the full amount of their allowed shelter costs deducted.

The EW must not request additional verification of shelter costs, whether documentary or through a collateral contact, unless the expenses reported are questionable.

Once it is determined that a reported shelter cost is questionable, the cost must be verified before the deduction can be allowed. Types of verification include, but are not limited to, documents, such as a lease agreement, and collateral contact with appropriate third parties. The EW must not require a specific verification type or document to verify shelter expenses since multiple types of verification are acceptable.

CalWORKs Eligibility Handbook	Appointments in Intake 50-3.1
	Effective: 03-05-09

50-3.1 Appointments in Intake

Effective September 25, 2007, all CalWORKs intakes are scheduled through the CalWIN appointments subsystem.

I. Walk-In Applicants

A. If possible, applicants will be scheduled for the same day they come in to apply.

1. The cut-off time is 11 a.m. for scheduling at 1:15 p.m., if available, and 3 p.m. for the next day's 8:15 a.m. timeslot.

2. Applicants who do not show for their scheduled appointments will be assigned on a separate no-show rotation. The *reassigned worker* (?) needs to deny CalWORKs the same day and send a change of worker letter to the client. The reassigned worker needs to cancel the failed appointment the same day.

a. For the Food Stamps program, a NOMI must be issued. Food Stamps and Medi-Cal will remain in "pending" status.

b. Assigned no-show workers will contact the no-show client by phone the same day to reschedule the appointment for the client. A case comment in CalWIN has to reflect the effort by the worker to contact the client by phone and the response by the client or the lack thereof.

c. Assigned no-show workers will not get credit for intakes until the applicant shows up and the intake is initiated.

d. When the applicant shows up at Reception after missing an appointment, Reception will schedule the client and notify the worker.

e. If the applicant calls the reassigned intake worker directly to reschedule, the intake worker must notify Reception to get credit for the intake, and to avoid duplicate scheduling.

f. If a client requests to be scheduled out (future appointment) the client will be assigned on the no-show rotation and the reassigned worker will follow all no-show procedures.

B. Stand-By Applicants

1. Stand-by applicants will be seen at 2 p.m.

2. The cut-off time for clerks to assign stand-by appointments is 11 a.m.
3. Clients with stand-by appointments may run the risk of not being seen if all other scheduled clients show up. Intake staff who have a scheduled client who does not show up may be assigned a stand-by client 45 minutes after the failed appointment time.
4. Stand-by clients will be given an appointment by they can also wait to be seen as a stand-by.

C. Language

1. Language specific cases will be assigned to designated bilingual workers, if possible.
2. If bilingual workers are two cases ahead of rotation, language cases will go to a generic worker.
 - a. The generic worker will have time to arrange for an interpreter. The worker should contact the ADA Social Worker if the language is not one of the five working languages, or call the Civil Rights Officer (557-5950).

II. Staff scheduling in CalWIN

- A. Intake staff must keep their schedules updated in CalWIN at least one month in advance.
- B. Supervisors and acting supervisors will report any unexpected absence for the day to Reception by 8 a.m. the same day.

III. Rescheduling Appointments for Absent Staff

- A. Scheduled appointments for absent staff must be assigned to another worker. No-shows for absent staff will be reassigned per no-show rotation.
- B. Supervisors and acting supervisors will bring all cases that need to be reassigned to Reception by 8 a.m.

C. Two intake workers are off rotation each day to cover for absent staff. If the scheduled applicant shows up and the scheduled worker is absent, one of the two workers that were kept off the county will take the intake.

CalWORKs Eligibility Handbook	Emergency Benefits Requests: 50-3.2
	Effective: 3-12-19

50-3.2 Emergency Benefit Request: Immediate Needs, Expedited Services, and Homeless Assistance Assessment

I. Determining Immediate Need and Expedited Services Eligibility (MPP Section 40-129)

A. Things to consider when determining IN/ES eligibility

- Only liquid resources are used to determine eligibility to immediate need. Liquid resources are exempt and non-exempt items of value belonging to persons who would be included in the AU which are immediately available and reasonably converted to cash.
- Liquid resources shall include but are not limited to cash, negotiable securities, and similar resources
- Liquid resources to not include cash surrender values of insurance policies, trust deeds, household items and furnishings, personal effects, motor vehicles, or real property
- Immediate need may be requested at any time during the application process
- Immediate need may be issued in two payments up to a maximum of \$200.

- If eligibility for AFDC is determined and verified within the time frames for immediate need, staff shall issue the regular aid payment to which the applicant is eligible in lieu of the immediate need payment
- When an immediate need payment has been issued, staff shall verify the applicant's eligibility for aid within 15 working days from the date of receipt of the immediate need payment request. Case must be processed, and benefits issued or case denied within this mandated time frame.

B. First thing to identify: What is the emergency?

- Lack of housing - applicant is homeless
- Pending eviction - applicant has received any type of eviction notice, including a three day notice to pay or quit, which will evict the family from its current residence.
- Lack of food - applicant does not have enough food to sustain the family for a period of three calendar days
- Utility shutoff - applicant has received a notice of termination of utility service or such service has been terminated
- Transportation - applicant is unable to meet essential transportation needs such as those relating to food, medical care, or job opportunity
- Clothing - applicant lacks essential clothing such as diapers or clothing needed for inclement weather
- Other - applicant has other emergencies of similar importance to the family's immediate health and safety

C. Second thing to identify: Is there "apparent eligibility "to CalWORKs?

"Apparent eligibility" means that the information provided on the Statement of Facts and information otherwise available to the worker indicates that the applicant would be eligible for aid if the information on the Statement of Facts were verified.

D. Third thing to identify: If the applicant has an emergency need *and* there is "apparent eligibility":

Does the applicant meet the following conditions:

- Non-citizens: proof of eligible status
- PWO (pregnant woman only): proof of pregnancy
- Can emergency need be met by issuing expedited food stamps or homeless assistance or by another community agency?
- Does the applicant have resources that exceed the resource limitation (this does not include monthly gross income)?

- Has the applicant complied with the following technical conditions for AFDC: Social Security enumeration, Application for unconditionally available income, including UIB

Once the applicant's emergency need and apparent eligibility have been assessed, staff need to determine if the applicant is within the resource limit.

As long as the applicant meets the gross income limits for CalWORKs, there is no other determining factor for income when processing immediate need.

E. When the emergency involves transportation:

The applicant's resources must be less than the cost of the emergency. Find out what the transportation need is, and the cost of the emergency. Add up the liquid resources. If the cost of the emergency is greater than the sum of their liquid resources, the applicant is eligible to immediate need.

F. When the emergency need involves running out of food:

An immediate need cash payment should not be used to meet the costs of food.

If the applicant is eligible for immediate need, and the immediate need is met through the issuance of food stamps.

G. Expedited food stamps processing:

The following households, if otherwise eligible, are entitled to expedited services:

- Households with less than \$150 in monthly gross income, and less than \$100 in liquid resources.
- Households whose combined monthly gross income and liquid resources are less than the household's monthly rent or mortgage, and utilities.
- For households entitled to expedited services at initial application, staff shall issue and make benefits available no later than the third calendar day following the date the application was filed. A weekend is considered one calendar day.
- All efforts should be made to verify residency, income, liquid resources, and all other factors through contacts or readily available documentary evidence. However, benefits shall not be delayed beyond the delivery standards solely because factors have not been verified.
- Households entitled to emergency services shall be subject to the Social Security number provisions of MPP 63-404.2

- Households that apply after the 15th of the month and have been determined eligible to receive benefits for the initial month and the subsequent month shall receive both allotments at the same time.

H. When the emergency is a pending eviction or homelessness:

If the applicant is eligible to immediate need and the immediate need is homelessness, and the immediate need is addressed through the issuance of homeless assistance within one working day, then the immediate need has been met.

If the applicant has a pending eviction:

Find out the amount of total rent owed. If the total rent owed, including past due rent owed, is greater than the sum of their liquid resources, the applicant is eligible to immediate need.

If the emergency situation is an eviction, and the applicant is found to be eligible for an immediate need payment, the applicant shall be permitted to choose, in writing, either the immediate need payment OR the expedited determination of AFDC cash aid eligibility when all of the following conditions are met:

- The applicant is in receipt of the notice of eviction, including a three day notice to pay or quit, AND
- The applicant has insufficient funds to pay the owed rent, AND
- The applicant is currently residing in his/her home

Before the applicant chooses between the two options, staff shall inform the applicant in writing of the information and verification necessary to determine eligibility for aid.

The applicant's decision shall be documented in the case record (case comments).

If the applicant chooses expedited processing of benefits, and they have provided all requested verifications, eligibility determination and payment shall be completed within three working days from the date immediate need request was made.

Staff shall issue the immediate need payment no later than the third working day if the eligibility determination cannot be completed (e.g. the applicant does not comply with providing necessary information or verifications).

I. Meeting the immediate need request by referral to a community resource:

The county has the option to refer the applicant to another public or private resource to meet the emergency situation, other than the need for shelter or food. The immediate need payment may be denied when all the following conditions are met:

1. During the application period not more than one referral was made, and when made it is to meet no more than one need
2. Staff have verified in advance that the specific need will be fully met by the referral agency by the end of the following working day. This shall be documented in the case record.
3. The applicant has the mental and physical capabilities to travel to the referral agency. Staff must complete the referral with due regard to the family as a whole.
4. Staff shall not refer the applicant when travel to the agency will create another emergency situation.
5. When a referral is made to another agency, staff shall provide the applicant with the following in writing:
 - The name, contact person, address, and phone number of the agency they are being referred to and the specific need that will be met by the agency
 - If the other agency does not fully meet the applicant's need, and the applicant returns within the immediate need time frames and remains eligible for immediate need, the payment will be issued no later than the next working day following the day the request was received.

J. Denying immediate need (MPP Section 40-129.2):

Reasons for denying immediate need

- The applicant is eligible for immediate need based on the need for food AND the need for food has been met through the issuance of food stamps within one working day
- The applicant is eligible for immediate need based on homelessness, AND the need has been met by the issuance of homeless assistance within one working day
- The applicant is not "apparently eligible"
- The county has concluded, based upon all available information, that the applicant does not have an emergency situation
- The applicant is eligible for an immediate need payment based on eviction, and the applicant has chosen expedited eligibility determination for cash aid

- The need has been met through a referral to a community agency
- The applicant is currently receiving AFDC or RCA assistance
- The immediate need request was made by an individual being added to another AU
- The immediate request was made on behalf of a child placed in foster care
- The entire AU is currently being sanctioned
- The county is unable to establish the applicant's eligibility because the applicant has not met the technical conditions of eligibility, or has failed to appear for the face-to-face interview

If immediate need is denied:

- The applicant shall be notified in writing
- The AFDC eligibility determination process shall continue unless the applicant fails to meet financial eligibility or deprivation standards

A denial of immediate need payment request does not constitute a basis of denial of the application for aid.

II. Emergency Assessment Procedure

1. Both Intake units will have a duty schedule which will alternate between the units monthly. One worker will be taken off rotation daily and assigned to assess each SAWS 1 for emergency requests.
2. If the applicant does not have an emergency request, the applicant will be given the next available appointment.
3. If the applicant has an emergency, the worker will evaluate the emergency need based on the application process for IN/ES processing explained above.
4. If the applicant is potentially eligible to services, the applicant will be given to the next available worker on rotation within the mandated time frames.
5. If the applicant is not eligible to IN/ES, but the need can be met by issuance of a food box, referral to apply for UIB, referral to a social worker, the worker will order the food box and make the necessary referrals. Explain to the applicant how to file for UIB or other potentially available income before the Intake appointment.
6. The duty worker will keep a log of applicants that indicate on the SAWS 1 that they need emergency services, or those that asked for such services in person.
7. Supervisors will review logs daily and indicate when benefits were issued to ensure benefits were issued timely and within mandated time frames. Each supervisor is responsible for his/her own unit. Supervisors may cover for each other to ensure that logs are reviewed daily.

8. If the designated duty worker call in sick, another worker will be assigned to cover from another date on the calendar.

III. FRED Referrals

- A. If the client did not cooperate with FRED during a previous application and the client has reapplied now, if the issue of the original FRED referral still exists, the Intake worker should first assess the situation again (ask client questions to resolve the issue) and ask for verification to settle the issue. If there is no verification and the client's explanations are not consistent or believable, a FRED re-referral should be made.
- B. If the issue of the previous FRED referral is no longer an issue in the current application, then the non-cooperation with FRED should no longer be used to deny the new application.
- C. If the client in situation A above is asking for emergency services (EFS, IN, THA) the FRED duty workers should be consulted to help resolve the issue as quickly as possible. In situation B above, the non-cooperation with FRED should not hold up the issuance of emergency needs benefits.
- D. The EW is in charge of making these decisions on the case/application, not the FRED worker or FRED supervisor. If in doubt, the worker should consult with the supervisor and if needed a manager.

IV. Victims of Disaster and Evacuees from Wildfires

The danger and damage caused by the major wildfires have made it necessary for some families to be evacuated from the county areas where they live. The evacuees must be treated expeditiously if they request CalWORKs benefits.

Current recipients of CalWORKs are eligible for several waivers of existing rules, including the once-in-a-lifetime limit for Homeless Assistance ((MPP Section 44-211.5) and Welfare-to-Work requirements. Additionally, due to the circumstances of the evacuees' departures and the devastation that occurred in their home counties, it is anticipated that some evacuees will apply for CalWORKs in disaster counties or another county, due to disaster-related relocation. Many evacuees will lack documentation of various items (such as identification, age, social security number, value of property/resources, income, etc.) and may not be able to obtain such verification within standard application processing time periods. In order to promptly aid displaced families applying for CalWORKs, the following is general guidance in addressing these types of situations:

If the applicant and county make a good-faith effort to obtain verification of the evacuee's identity, time on aid, and linking and non-linking conditions of CalWORKs eligibility and are unable to make contact with the evacuee's financial institutions or other necessary entity/institution, the county shall accept the evacuee's statements signed under penalty of perjury.

When an individual or family displaced by the wildfires applies for CalWORKs, counties shall do the following:

- Establish that the evacuee was living in a County designated as a federal disaster and/or State declared emergency zone as a result of the wildfires during the period that the wildfires occurred; and,
- Ask the evacuee if anyone in his/her family is currently receiving CalWORKs in that County, or from a disaster county.

1. Determining CalWORKs Eligibility for Evacuees Not Currently Receiving CalWORKs

Evacuee applicants must meet all conditions of eligibility, including but not limited to deprivation, age, residency, immigration status, income, and property limits. However, given the circumstances of evacuees, counties should pay special attention to the following regulatory sections:

Homeless Assistance (MPP Section 44-211.5)

Many evacuees may be homeless, and should be informed of their option to apply for temporary and permanent housing assistance. Applicant families who have already received homeless assistance are entitled to an exception to the once-in-a-lifetime limit, in accordance with MPP Section 44-211.541(a). As a reminder, counties should feel free to utilize additional programs like the Housing Support Program (HSP).

Immediate Need Payments (MPP Section 40-129)

These families are in an emergency situation, and should be evaluated for an immediate need payment. Pursuant to MPP 40-129.15, liquid resources mean items of value which are immediately available and reasonably convertible to cash in time to meet the emergency situation. Many evacuees will not have been able to convert resources to cash prior to or after their evacuation.

Residency (MPP Sections 40-189.1, 42-400, 42-401, 42-403.1, 42-407.1)

The written statement of the applicant is acceptable to establish his/her intention to establish residency in California and in the county of application for the foreseeable future. For example, many evacuees may wish to eventually return to their home

counties once it is allowable, safe, and feasible to do so, but are unlikely to know when (or if) that will occur. In these cases, neighboring counties should accept applications, carry the case if approved, and initiate inter-county transfers to the home disaster county if and when appropriate.

Income [MPP Section 44-101(a)(SAR)]

Reasonably anticipated income is defined as income expected to be available to or received by an applicant/recipient, and available to needy members of the family in meeting their needs during the SAR Payment Period. It is expected that some evacuees, due to the disaster, will no longer have income that can be anticipated income.

Property/Resources (MPP Sections 42-201.1, 42-211.2 and 42-213.2)

MPP Section 42-201.1 states that real and personal property shall be considered in determining eligibility for CalWORKs benefits when it is actually available to the applicant. Many evacuees will not be able to access, occupy, or sell their property at the time of application. The county shall take into consideration the applicant's ability and circumstances in meeting the property provisions and shall make a good faith effort to assist the applicant to obtain needed verification, or accept a statement signed under penalty of perjury. As a reminder, CalWORKs recipient families are categorically eligible for CalFresh and that program does not have separate personal property requirements.

Temporary Absence (MPP Section 82-812)

Counties are reminded to consult this regulation when determining deprivation and Assistance Unit composition since some families may have been temporarily separated during the evacuation, but anticipate being reunited in the near future. If an evacuee family member expects to reunite with the applicant family within one full calendar month, consider that member to be temporarily absent from his/her family.

CalWORKs evacuee recipients can maintain a home in a county different than the county where they are physically residing if they intend to return to that home within four months (MPP Section 40-189.2).

Welfare-to-Work Participation (MPP Section 42-712 and 42-713)

Many families are in a state of crisis and will not be able to participate in welfare-to-work (WTW) activities. To ensure these families receive appropriate assistance, counties should make a WTW good cause exemption determination. This could be completed at the eligibility determination so that families are not needlessly required to attend a WTW orientation and appraisal. Because of the devastation caused by the wildfires, it may be difficult to verify some information for these determinations. Therefore, counties are encouraged to exercise flexibility in this regard. All good cause

determinations or WTW exemptions must be made on a case-by-case basis. In addition, counties should determine if an applicant or recipient needs CalWORKs barrier removal services, such as mental health services, HSP or temporary homeless assistance, and counties should provide the services or refer the recipient to these services as expeditiously as possible.

2. Authorizing and Continuing CalWORKs Benefits

Current CalWORKs recipient cases that request homeless assistance can get an exception to the once-in-a-lifetime limit, in accordance with MPP Section 44-211.541(a). The effects of the fire are likely to continue in the coming months, even after the initial crisis subsides. Counties should remain diligent in serving evacuees to the fullest extent possible under the program.

Wildfire evacuees applying for, or receiving CalWORKs aid shall be informed of their reporting responsibilities under Semi-Annual Reporting or Annual Reporting, as appropriate. Since it is anticipated that many evacuees will have provided statements under penalty of perjury as verification of various conditions of eligibility, counties shall advise them to make every effort to obtain and provide documentation of factors impacting their eligibility during the payment period, and to seek assistance from the county if they need help in obtaining such documentation.

For more information on victims of disaster and evacuees, please click on the link below:

http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acin/2015/I-85_15.pdf

CalWORKs Eligibility Handbook	Applications for a Child Already on Aid 50-3.3
	Effective: 07-26-10

50-3.3 Applications for a Child Already on Aid

There may be instances where an adult applies for aid for a child that is already aided on another case. Follow this protocol in these situations.

I. Intake

The application will be processed and an Intake interview performed.

The intake worker must not acknowledge that the other parent is on aid. The intake worker will respond that they have reason to believe that the applicant does not have care and control of the child(ren) they are applying for. The intake worker will ask the applicant questions to ascertain who has care and control of the child(ren). Questions regarding who brings the child to school, who brings the child to the doctor, where are the child's clothes, tooth brush, etc, will help with the determination.

Even if the applicant reports that they have care and control, they are not eligible. The response to the applicant can be that further investigation is needed and that they will not be eligible for the current month. Intake worker will respond to further inquiries by the applicant that they cannot give more information due to confidentiality. The applicant could be the abuser in a DV situation and it is very important not to acknowledge that the other parent and child are on aid, even if the applicant tells the intake worker that they know that the other parent is on aid. Stay professional, do not give out the information by nodding or otherwise agreeing with the applicant.

The intake worker will contact the carrying worker to let them know of the application by the other parent/caretaker. The carrying worker will contact their client and will try to establish care and control. The carrying worker will use similar language as above and ask questions to establish care and control. The carrying worker will report back to the intake worker about their findings. If care and control cannot be determined between the intake worker and carrying worker then the intake worker will make a FRED referral and mark it urgent.

If the new applicant is determined not to be eligible, the applicant must be denied immediately in writing with adequate notice. No application can ever be verbally denied. The denial notice is to be given to the applicant to take to CAAP to apply for benefits there right away. CAAP needs a copy of the denial in order to process an application there.

The new applicant does not have apparent eligibility and is not entitled to emergency assistance until care and control of the child has been resolved.

II. Carrying

In cases where one or more of the children in the case are found to be under the care and control of the new applicant parent, the Carrying worker will remove those children from the AU and discontinue the case with timely and adequate notice due to no eligible children in the home. The Carrying worker will do the intake for the new parent so that a break in aid does not occur for the children in the case. The Carrying worker will keep the new case.

If care and control is established for the new applicant parent, but there are other children in the AU still under the care and control of the currently aided parent, the Carrying worker will remove only those children from the case who are to be in the case of the new applicant parent. The Carrying worker will create a new case for the new applicant parent and children, and do the intake. The new case will then be reassigned to a new Carrying worker.

CalWORKs Eligibility Handbook	Evidence 50-11
	Effective: 4-14-04

50-11 Evidence

Eligibility factors are investigated and evaluated by the Intake Worker and appropriate disposition made. Each application is recommended or denied unless it is withdrawn by the applicant before a formal action has been taken. An application is canceled when death of the applicant occurs before aid is authorized.

I. Principles of Gathering Evidence

- A. All information secured in the process of determining eligibility shall be evaluated in light of its internal consistency.
- B. Each piece of evidence shall be evaluated in light of the motives and adequacy of knowledge of the person completing the record or document or making the statement.
- C. Evidence shall be evaluated qualitatively rather than quantitatively.
- D. When evidence is conflicting, inconsistent, or incomplete, the investigation shall be pursued to the point that the preponderance of evidence supports the decision as to eligibility.

II. Methods of Gathering Evidence

- A. Plan with the applicant for obtaining the evidence of eligibility. In making the plan, the worker considers the following:

1. Whether the acceptable evidence can be more readily obtained by the applicant or the worker.
2. The ability of the applicant to obtain the information. In general, the applicant should take as much responsibility as he can within his physical, emotional, educational or other limitations. The worker should take the responsibility if the applicant is too handicapped or if the evidence can be more readily obtained by the worker.

B. Proceed with the plan, obtain and evaluate the information, and reach a decision as quickly as possible consistent with adequate determination. In order to do so:

1. Initiate all action known to be necessary immediately upon receipt of the application.
2. Eliminate all unnecessary action and period of inactivity in order to ensure reasonable promptness.
3. Pursue the investigation with diligence through and including the decision as to eligibility and authorization of payment when eligibility is established.

C. Undertake the investigation with the full knowledge and consent of the applicant. Obtain signed consent for release of financial and other information.

D. Other sources of information are to be sought only when the applicant does not have information and other evidence to support his application, or when such information and evidence as he is able to give is contradictory, inconsistent, or inconclusive. In such case, the investigation is to be directed toward obtaining the most readily available reliable evidence for determining eligibility and need.

E. If the applicant is reluctant or unwilling to help resolve inconsistencies or questions concerning his eligibility, or to have the department pursue the investigation on his behalf, his reasons are to be considered carefully with him. Such consideration will help ensure mutual understanding of the facts and demonstrate why further investigation is needed. It also will help prevent the applicant from deciding unnecessarily or unwisely to withdraw his application when he may be eligible.

III. Preferred Types of Evidence

Regulations require that investigation be directed towards obtaining evidence to establish that the applicant meets each of the eligibility requirements and from which the correct amount of aid can be determined. The preferred types of evidence are as follows:

- A. Public records or those made for the purpose of maintaining archives or registers.
- B. Original documents rather than copies
- C. Documents and records in which there is little or no motive for misstatement.
- D. Records made contemporaneously with the event they record.
- E. Statement of the parents or relatives, if consistent with other known information.

IV. Sources of Evidence

Information usually may be found in records kept by hospitals, clinics, social agencies, various county offices such as recorder, assessor, county clerk, and vital statistics departments.

A. County Clerk's Office

- 1. Abandonment
- 2. Adoption
- 3. Divorce
- 4. Probate proceedings

B. County Recorder's Office

Evidence on the following subjects is found in the County Recorder's Office:

- 1. Marriage
- 2. Deeds
- 3. Liens

4. Mortgages
5. Transfer of real property

C. Department of Health

Evidence on the following subjects is found at the Department of Health:

1. Birth
2. Death

D. Immigration and Naturalization Service

All evidence pertaining to naturalization and aliens.

E. When records and documents are not available or appropriate, correspondence and/or statements from organizations and individuals having knowledge of the facts or circumstances are used. These would include the following:

1. Employers
2. Physicians
3. Landlords
4. Churches
5. Lodges
6. Clubs
7. Trade Unions
8. Fraternal and professional groups
9. Morticians
10. Creditors
11. Insurance companies
12. Others

F. To obtain Birth Certificates from San Francisco, other California counties, or other states, see Section 51-20.2 "Birth Certificates - How to Obtain Documents".

CalWORKs Eligibility Handbook	Social Security Number Requirements 50-20
	Effective: 08-01-18

50-20 Social Security Number Requirements

Regulations state that affirmative measures must be taken to assure that Social Security numbers will, to the maximum extent feasible, be assigned to any individual who is an applicant for or recipient of benefits under any program financed in whole or in part from federal funds, including any child on whose behalf such benefits are claimed by another person.

I. Condition of Eligibility (40-105.2 and 40-107.7)

As a "technical condition" of eligibility, the applicant or recipient must do one of the following for each member of the Assistance Unit (not including unborns):

- A. Furnish a Social Security number (SSN), or
- B. Provide verification that a completed application for a SSN has been made, and then furnishing the SSN when received.
- C. Cooperate in resolving any discrepancies regarding SSNs of members of the AU.

II. Definitions

A. A "technical condition" of eligibility is a procedural requirement which must be met before a particular person is authorized for aid. An applicant/recipient is ineligible for aid if he refuses to cooperate in securing an SSN for himself or in resolving any discrepancies regarding SSNs for himself. If the refusal relates to an otherwise eligible child, it is that child who is ineligible for aid.

B. A "completed application" means an application that has been accepted by the Social Security Administration (SSA) for processing.

1. Form MC-194 "SSA Referral Notice" is the standard form used as verification in this process.
2. Form SSA-5028 "Receipt for Application for a SSN" is also acceptable proof that an application has been made.
3. Form SSA-2853 "Message from Social Security" is acceptable proof for children who were born at a hospital which offers a special application process called "Enumeration at Birth."

NOTE: Newborns will be added to Medi-Cal at birth without verification.

(A newborn child may not be added to the AU until proof is received that the client has applied for the child's SSN).

III. Time Factors

A. When proof of application is required:

1. For newborns, by the end of the month following the month in which the mother is released from the hospital.

Verification received by this date insures that the child's Beginning Date of Aid (BDOA) can be the date of birth. After this date, the BDOA can be no earlier than the date the verification is received, unless there is "good cause" (e.g., the birth certificate was not available before the deadline).

2. For all others, within 30 days the date of application for aid. If not received by that date, aid can be denied for that person while others are approved. After this date, the BDOA to add the person can be no earlier than the date the verification was received.

B. When an SSN and/or copy of the card should be furnished:

1. For applicants for aid with SSNs, within 30 days the date of application for aid. If not received by that date, aid can be denied for that person while others are approved. If the number is furnished after that date, the BDOA can be no earlier than the date it is received.
2. For newborns whose SSNs were applied for through the "Enumeration at Birth" process, within 6 months after the client receives the number, or at redetermination, whichever occurs first.

3. For those whose completed applications for SSN numbers/cards were verified with the MC-194 or SSA-5028, "when received." According to SSA, it takes about four to six weeks to process an application. However, clients are usually allowed three months to provide the SSN/card.

C. When a discrepancy needs to be resolved:

Sometimes a SSN has already been furnished but there is a discrepancy that needs to be resolved. Recipients are usually given the customary 10 days to cooperate. If the MC-194 process is necessary, however, see Item B.3 above.

IV. Acceptable Verification of Social Security Numbers

A. It is San Francisco County policy that the preferred means of verifying an SSN is for the worker to personally view the card.

B. The following are also acceptable forms of SSN verification:

1. An award letter, Medicare card or a check from the SSA showing the applicant/recipient's name and SSN with the letters A, HA, J, T, or M following the SSN.
2. A MEDS "W" verification code showing on MEDS or IEVS. (Don't confuse this with the J code in #2 above.)
3. SSA's form series OA-702 or any other written verification from SSA.

Note: Photo-copies of the above verifications or MEDS/IEVS screen prints should be filed in the case record in Section 1.

SSN-VER – Valid User Input	
Code	Explanation
1	SSN reported by client, not sight verified/no SSA referral initiated
2	SSN application filed at SSA district office, confirmation received by reporting entity
3	SSN reported by client, sight verified by reporting entity
5	SSN reported by client, not sight verified, SSA referral initiated
6	Client does not have an SSN, SSA referral initiated
SSN-VER – MEDS Generated	
Code	Explanation
7	No valid SSN verification status reported by entity reporting the SSN to MEDS
H	SSN verified via Title II and Title XVI data match – failed SSA NUMIDENT data match
I	SSN verified via Title II data match – failed SSA NUMIDENT data match
J	SSN verified via Title XVI data match – failed SSA NUMIDENT data match
K	SSN verified via Title II and Title XVI data match – SSN not recognized as an SSN issued by SSA in

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	NUMIDENT data match
L	Verification request pending for SSN reported as sight verified
M	Verification request pending for SSN reported as not sight verified
N	SSN verification failed SSA NUMIDENT data match on birthdate
O	SSN verification failed SSA NUMIDENT data match on birthdate and failed Title XVI data match
P	SSN verification failed SSA NUMIDENT data match on birthdate and failed Title II data match
Q	SSN verification failed SSA NUMIDENT data match on birthdate and failed Title XVI and Title II data match
S	SSN verification failed SSA NUMIDENT data match on surname or given name
T	SSN verification failed SSA NUMIDENT data match on surname or given name and failed Title XVI data match
U	SSN verification failed SSA NUMIDENT data match on surname or given name and failed Title III data match
V	SSN verification failed SSA NUMIDENT data match on surname or given name and failed Title XVI and Title II data match
X	SSN identified as verified via prior SSN verification process, but SSN verification subsequently removed
Y	SSN identified as unverified via prior SSN verification process
%	SSN verification failed SSA NUMIDENT data match – probable transcription error identified
&	SSN verification failed SSA NUMIDENT data match – SSN not recognized as an SSN issued by SSA
*	SSN identified as verified via SVES SSN verification process but SSN verification code subsequently removed by worker
#	SSN identified as verified via SVES SSN verification process but SSN verification code subsequently removed by SSI/SSP update
@	Death code verified by SSA via SVES SSN verification process but subsequently removed by worker, also removed SSN verification; this code is temporary and should immediately trigger SSN or SSN Citizenship Verification, and would be updated to L or M

V. Procedure for Referrals Using the MC-194

All applicants/recipients must have a Social Security number and verification that the number is correct. Referrals to apply for SSNs, to obtain a replacement card, or to resolve a discrepancy are usually made during Intake and Reinvestigation, and at the time a new family member is to be added to the AU, but may be done at any time that the worker discovers that it is necessary.

These referrals are usually made using the form MC 194 Social Security Administration Referral Notice. If the MC-194 is necessary, follow the procedure below.

A. Issuing the MC 194

EWs shall hand-issue the Form MC 194 to the applicant/recipient, verbally explaining the referral process.

NOTE: Referrals to SSA can be made only after the 14-digit Medi-Cal ID number has been determined.

1. The MC 194 Section I must be completely filled out by the worker as follows:

a. Part A - Use the SFDSS address stamp or write out the address in full. There are two methods of return listed, but it is county policy to always indicate that the SSA office return it to the client.

b. Part B - Print the address of the SSA office

c. Part C - Check the appropriate box for the required service. In addition to requesting a new SSN and card, there are other common situations listed which may be selected.

d. Part D - Enter:

1st line: Last name, first name and middle initial of the individual for whom the referral is being made.

2nd line: Date of birth and sex of the individual.

3rd line: The 14-digit MEDS number: e.g., 38-30-0123456-0-11, where:

- a) 38 is the county number,
- b) 30 is the first two digits of the aid type,
- c) 0123456 is the case number with a leading zero,
- d) 0 is the second digit of the FBU and
- e) 11 is the individual's person number.

4th line: The individual's SSN, if applicable.

5th line: The Case Name.

e. Part E - Enter the EW name, the date the form was completed, the EW number and the EW phone number.

f. Part F - Add comments, if necessary.

2. Once the form is completed,

a. File the original (white copy) in Section 1 of the case record;

b. Give or mail the second (yellow) copy to the individual to take to the SSA office, with instructions as to how the stamped form must be returned. Be sure to communicate the Department's need for a copy of the Social Security card upon its receipt by the client.

B. Requirements to Apply for a Social Security Number

On the reverse side of the MC 194 there is an explanation of the documentation which is necessary to apply for an SSN. Also, in order to process an application for a minor child the following is required:

1. The child's official birth certificate
2. Proof of the relationship of the applicant to the child. The applicant is usually the parent of a child; thus, the child's birth certificate will establish the relationship. Other relationships will require additional documentation.
3. Proof of the identity of the applicant. Form MC 194 coded with the case number establishes the identity of the applicant. Other documentation, such as a driver's license, should be submitted if available.

C. Return of the MC-194

The Form MC-194 should be returned with the lower portion completed by the SSA office. Do the following:

1. If it is not returned, or if it indicates that an application was not completed, and the deadline (specified in Item III.A above) has passed, take appropriate action to deny aid for the person. If it is the only eligible child, the entire AU is ineligible. Provide the client with another MC-194 to use in any future attempt (follow the procedure in Item III.A).
2. If it indicates that the SSN application was completed, take appropriate action to add the person to an existing AU or include the person in an applicant AU that is being approved.
3. File the MC 194 in Section 1 of the case record.

Note: The 15th of the month is always used as the due date, so that negative actions may be taken before cut-off.

D. Follow-up on the MC-194 process

1. At the beginning of a due month, if the appropriate verification has not already been received, request that the client to submit a photocopy of the SSN card by the 15th of the month.

2. If the client does not provide the SSN or card by the due date, take appropriate action as described in Item VI of this section.
3. If the client does provide the SSN/card, file the photocopy of the card in Section 1 of the case file.

VI. Denial/Discontinuance

When the SSN requirement is not met by the applicable deadline (see Item III above "Time Factors"), appropriate negative case action may be taken.

In instances where the SSN was applied for via the MC-194 or the Enumeration at Birth process, discontinuance may not be appropriate since SSA provides the SSN's directly to the State through MEDS. A MEDS Alert report is issued when the number is received by the system; do a MEDS or IEVS screen print as instructed in Item IV.B.2 above. If the MEDS Alert report indicates a discrepancy, however, the discrepancy needs to be resolved; this may involve another referral via the MC-194.

A. Aid, including payment of an immediate need, may not be denied, delayed or discontinued unless the worker has determined that:

1. The applicant or recipient has failed or refused to furnish the SSN and/or verification of it, or
2. The applicant or recipient has failed or refused to apply for a SSN.
3. The SSN and/or verification is not already in possession of the county, including data on MEDS.

B. Failure to furnish or apply for a Social Security number or verification results in the following actions:

1. Exclude from the AU any person who fails or refuses to cooperate in applying for an SSN for himself or in obtaining verification of the number.
2. Exclude a child(ren) if the parent or caretaker relative fails or refuses to cooperate in applying for an SSN on behalf of the child in his care or in obtaining verification of the number.
3. Deny or discontinue the entire case if the parent or caretaker relative fails or refuses to cooperate in applying for an SSN on behalf of the only eligible child or in obtaining verification of the number.

VII. Supervisor Responsibilities

A. Every month the Unit Supervisor receives a report on Social Security Numbers from that lists all active recipients who do not have SSNs. The supervisor must review with each worker the status of every SSN application. The supervisor should make notations directly on the form, such as the following.

1. "MC 194 on file - SSN due 7/15/09."
2. "SSA-2853 on file - SSN due 12/15/09"
3. "SS card received 8/5/09"

The supervisor should sign the report and indicate the date of the supervisor-worker conference.

B. Every three months the Unit Supervisor forwards the accumulated reports to the appropriate manager.

VIII. Manager Responsibilities

The Manager will collect the reports from the supervisors every three months and review them with each Unit Supervisor at the regularly scheduled quarterly conference, requesting corrective action where necessary.

IX. Special Procedures for Non-Work Social Security Numbers and Cards

The Social Security Administration now allows Social Security Numbers to be issued to legal noncitizens without work permits. The Social Security Administration recognizes that SSNs are required for various such as to:

- enlist in the military
- pay taxes
- get a driver's license
- register a motor vehicle, and
- apply for public assistance

In order for an eligible noncitizen applicant without a work permit to obtain a "non-work SSN", the applicant must have an official letter from our office which:

- requested the non-work SSN to be issued
- identifies the applicant by name, date of birth, gender, and alien number,
- cites the Welfare and Institutions Code which requires all applicants to have a Social Security number, and
- indicates that the applicant has met all other eligibility factors, except for the SSN.

Form 8082 is used to request a SSN. (Form 8082 is located on Forms Central.) When completed, it contains all the required information and language as stated above. On the reverse side, it also contains information from the SSA website to remind the SSA staff that issuing these non-work SSN is allowed.

Note that the applicant must be given the original, as completed and signed by the EW/ES, and the applicant must present the original to the SSA office. The SSA office will not accept photocopies of the completed form. A copy must be filed into our case record.

CalWORKs Eligibility Handbook	Form CA 5 - Veterans' Benefit Verification and Referral 50-24
	Effective: 05-24-07

50-24 Form CW 5 - Veterans' Benefit Verification and Referral

Applicants and recipients are required to take all action necessary to obtain unconditionally available income. Income is considered unconditionally available if the client has only to claim or accept the income. An example of such income is Veterans' Benefits. Form CW-5, Veterans' Benefits Verification and Referral, is used to verify veterans' benefits. Its use is mandatory whether or not the veteran is in the Assistance Unit. However, during the periodic reinvestigation, if the recipient is receiving or is potentially eligible to receive veterans' benefits, it is necessary to complete a CW-5 only when circumstances indicate a change in the recipient's eligibility for the benefits. Spouses may be entitled to veteran's benefits and referrals should be initiated on their behalf.

I. Types of Veterans' Benefits Available

There are three major types of benefits which are available. These are:

A. Compensation

This is for service-connected disability and there is an additional allowance for dependents.

B. Pension

This is for disability not traceable to service and there is an additional dependents allowance.

C. GI Bill/Veteran Education Benefits

This is for eligible veterans attending an approved educational institution. There are additional dependent allowances. Additional types of benefits are available to veterans and their families. The VA will assist in obtaining these benefits and may also be helpful in assisting the veteran's spouse in obtaining an apportionment of veterans' benefits if this is appropriate.

Questions regarding benefits may be directed to the Veterans' Administration, 4150 Clement St, San Francisco CA 94121. Phone 221-4810.

II. Identifying Potential Applicants for Benefits

The worker must send a CW-5 to the Veterans' Administration to verify veterans' benefits or assist veterans or their dependents in applying for them.

The CW-5 is to be sent, either by mail or hand-carried, if the worker has obtained one of the following three veteran's numbers:

1. Veteran's Social Security number and date of birth
2. Veteran's VA Claim number
3. Veteran's Military Serial number (if applicable).

If the worker does not have at least one of these numbers then the CW-5 is to be filed for follow-up to obtain at least one of these numbers. After the case leaves Intake, the Carrying worker will need to follow up on the CW-5.

If the worker does have at least one of these numbers, then the top 4 copies of the CW-5 are to be mailed to: Veterans' Administration, 4150 Clement St. San Francisco CA 94121,

The 5th copy of the CW-5 is to be filed in the case record.

The worker needs to follow-up from the VA in 30 days. When the VA sends its initial response, file that copy in the case and throw away the control copy. If there are any further actions by the VA, that office will send another copy of the CW-5, to be permanently files along with the initial response.

III. Definitions Related to Veterans

A. Eligible Veterans

Eligible Veterans are those who were members of military service for a continuous period, or were disabled and discharged or separated from active duty. Persons serving in reserves, or auxiliaries, or in the Merchant Marine or National Guard may be eligible for benefits as well.

B. Veteran's Dependents

These are dependents who might be eligible to benefits. They include: unmarried legal spouses, or the surviving spouse if not divorced from the veteran at the time of his death; or a surviving spouse who has terminated a subsequent marriage; parents of a veteran; and natural or legally adopted child of the veteran, including stepchild.

C. Claimant

A claimant is a person applying for VA benefits. The claimant may be the veteran or a dependent of the veteran on whose behalf the claim is filed.

IV. General Information

The California Department of Veterans' Affairs has informed us that they would prefer us to mail the CW-5 to the VA. However, if we are assisting someone in obtaining benefits, or we need the information quickly, the response may be sped up by having the CW-5 hand-carried. Do not make a referral or request for verification until you are able to obtain at least one of the veteran's three numbers under which information is

filed, as there are generally too many duplicate names for the VA to determine which veteran is involved.

Form CW-5 is to be sent to the VA for any person applying for aid who indicates on the Statement of Facts potential eligibility for benefits. No substitute form is permitted for the verification of veterans' benefits.

CalWORKs Eligibility Handbook	Inter-County Transfers - Incoming 50-27
	Effective: 6-1-17

50-27 Inter-County Transfers - Incoming

For an Inter-County Transfer (eICT) to San Francisco from another county, the ICT coordinator (lobby clerk supervisor) will send incoming eICT's to be assigned as a task. Some counties are still sending ICT's via hard copy packets.

Note: No SFIS is required for incoming ICT's.

The assigned EW will review the incoming ICT information and process it as an ongoing, carrying case with minimum disruption to services and aid to the client. The Manual of Policies and Procedures (MPP) 40-188.13 requires receiving counties to review the most current SAWS 2 Plus, SAWS 2A SAR, and SAR 7 received and not to duplicate them, unless there are changes requiring a mid-period report.

Circumstances that may require a new SAWS 2 Plus are:

- new employment
- addition of a new AU member, or
- acquisition of new property not exempt from program asset tests.

In this case, the most recent SAWS 2 Plus should be used for client to mark the new information on. The updated SAWS 2 Plus does not change the cycle that had been based on the date of application and RRR dates remain the same.

If a family moves during the last 2 months of RRR period the assigned EW in the sending and receiving counties will communicate as to who will complete the RRR to minimize impact on client and not to delay aid to client.

Homeless assistance has to be determined and issued in the county the client physically resides. The issuance is based on the date the county receives the request for HAP. A written statement of the recipient is acceptable to establish his/her intent to reside in the county where HA has been requested.

CW 215 and CF 215 reflect the changes from ICT as intake to ICT as ongoing case and are required forms for all ICT's.

The CW 215 also includes a section for the WTW Plan. CW 215 is a required form, substitutes permitted with approval by CDSS.

New ICT Process for CalWORKs and CalFresh 2017

[All County Letter \(ACL\) 17-58](#) outlined changes to the CalWORKs and CalFresh ICT process pursuant to Senate Bill (SB) 1339. Those changes ensure continuity of benefits and services for CalWORKs and CalFresh recipients who move from county to county and help provide a smoother transition of client case information. These changes are effective June 1, 2017.

Recipient/County Notification

- Recipients must notify the sending county (where the recipient(s) lives and/or receiving CW or CF assistance and/or benefits) or receiving county (county where the recipient is moving or relocating) of a change in residence within 10 days of their actual move.
- Notification can be made in-person, mail, by phone or online (if available).
- Whichever county the recipient notifies of the move, that county must initiate the ICT **within 7 business days** of receiving the notification.
- The sending county will initiate the ICT with the CW 215 form via a written or electronic process.

- The receiving county will initiate the ICT by requesting, either electronically or by written request, the sending county to transfer the recipient's case.
 - If the recipient notifies the receiving county of a change in residence, the recipient shall not be required to also notify the sending county and request the sending county to transfer the case. The receiving county is responsible for coordinating this process.
 - The recipient will no longer be required to go to the nearest welfare office in the new county and be required to interview, complete new or additional applications or verification requests or have a redetermination of eligibility. (An exception would be if the recipient's annual recertification or other periodic reports are due).
 - Receiving counties are allowed to interview incoming ICT recipients regarding participation in the Welfare-to-Work program.
 - Sending counties must provide copies of documents necessary to verify current benefits and grant amount to the receiving counties within 7 business days. Recipients must not be asked to provide copies of documents that were previously provided.
 - If a move is from Region 1 to a Region 2 county, or vice versa, the receiving county will adjust the AU's grant at the end of the transfer period.
 - The ICT process cited above also applies to NACF and TCF cases.
- To ensure uninterrupted childcare, it may be appropriate to complete the Child Care Request Form (CCP 7) as part of the ICT process. However, it's the recipient's responsibility to apply for child care in the receiving county.

Homeless Assistance

If a homeless client is requesting to have the case transferred into a new county AND is also requesting homeless assistance, (either THA or PHA) in the new county, then the client must establish their intention to reside in the new county before homeless assistance can be issued. This requirement can be satisfied by a written statement from the client.

Redetermination/Recertification and SAR Reports

- If a recipient moves out of the county during either of the last two months of the semi-annual period, the receiving county will be responsible for completing the SAR 7. The

sending county may process the SAR 7 if both the sending county and receiving county mutually agree it is in the recipient's best interests to do so, but ICT timeframes must be adhered to.

- If the recipient moves out of the county during either of the last two months of the certification period, the receiving county will complete the redetermination/recertification. The sending county may complete the redetermination/recertification if both the sending county and receiving county mutually agree it is in the recipient's best interest to do so. Regardless, ICT timeframes must be adhered to.

References:

SENATE BILL (SB) 1339; INTER-COUNTY TRANSFERS - OUTGOING: MPP 40-187 THROUGH 40-191, 40-197; ALL COUNTY LETTER 17-58, DATED 6/23/2017; WELFARE AND INSTITUTION CODE (WIC) 10003, 11052.6, 11053, 11053.2 AND 11102; CW ELIGIBILITY HANDBOOK 57-2 INTER-COUNTY TRANSFERS – OUTGOING.

CalWORKs Eligibility Handbook	Intra-Program Transfer Between Foster Care and CalWORKs 50-38
	Effective: 06-02-10

50-28 Intraprogram Transfer Between Foster Care and CalWORKs

If a child in Foster Care is determined to be state, rather than federally eligible, and the child is placed with a relative, the Foster Care application is denied and the caretaker relative is referred to CalWORKs. Per regulation, relatives are ineligible to receive state funded Foster Care. The procedures below outline the responsibilities of Foster Care Eligibility and CalWORKs intake staff upon determination that an intra-program transfer shall be initiated.

I. Denial of Foster Care Application: Intraprogram Transfer to CalWORKs.

The Foster Care eligibility staff will forward a packet of documents to CalWORKs intake for processing. This packet shall include:

- Foster Care to CalWORKs Transfer Sheet

o The Foster Care eligibility worker shall make every attempt to obtain the DOB and SSN of the caretaker relative. This information, in addition to contact phone numbers for the caretaker relative, shall be included on the Transfer Sheet.

- SAWS 1
 - o Initial intake: The SAWS 1 signed by the Protective Service Worker will be included in the application packet.
- Change of Placements: Ongoing non-federal cases that involve a change of placement to a relative will also be transferred to the CalWORKs intake units. In these cases, the beginning date of aid will be the placement date listed on the 1502 Change of Placement Notice. The Foster Care eligibility worker will complete a SAWS 1 on behalf of the relative provider; the date of the SAWS 1 must coincide with the placement date listed on the Form 1502. This date is the application date for CalWORKs.
- Birth Certificates for child and parent(s), if available
- CW 51
- Form 4122
- Form 1501 Initiating Placement Notice or Form 1502 Change of Placement Notice.

NOTE: Foster Care eligibility will authorize payment via All County funds for the month of application at the CalWORKs rate when the child will be added to an existing Family Budget Unit. Per CalWORKs regulations, the addition of a member to the FBU occurs on the first of the month following application.

II. Tracking

CalWORKs intake staff shall maintain a spreadsheet available on the O drive detailing information on all intraprogram case transfers.

III. Relatives Residing in San Francisco

CalWORKs intake staff will process the intake for the caretaker relative. If the placement is in San Francisco, the caretaker relative must come into the office to complete the intake.

Intake responsibilities: upon receipt of the SAWS 1 from Foster Care Eligibility:

- CalWORKs Intake supervisor will assign to the specialized CalWORKs eligibility worker for processing. Within 24 hours of receipt, the EW must take to Records Management for App Reg and assignment of a CalWORKs case number.
- Contact the caretaker relative to schedule an appointment. If unable to reach the caretaker relative by telephone, send an appointment letter and follow standard intake appointment scheduling, application processing, and denial procedures.
- Alert the intake supervisor to situations in which the caretaker relative has indicated he/she does not wish to apply for CalWORKs. The intake supervisor will contact the caretaker relative within three working days, explaining the benefits to the family and child of applying for CalWORKs.
- If the application is denied, the EW shall email the intake supervisor and include the case name, child's name, case number, and reason the caretaker relative failed to complete the application process, if known. The supervisor will review the denial. Following the supervisory review, the supervisor will forward the email to:
 - o Foster Care eligibility manager
 - o Foster Care eligibility intake supervisor
 - o Protective Services Worker
 - o Protective Services Worker supervisor.
- Upon approval of the application, the case shall be transferred to the specialized carrying worker.

IV. Relatives Residing Outside San Francisco

Intake Responsibilities:

- Upon receipt of the SAWS 1 from Foster Care eligibility, the CalWORKs intake supervisor will assign to the specialized CalWORKs EW for processing. Within 24 hours of receipt, the EW must take to Records Management for App Reg and assignment of a CalWORKs case number.

- Contact the caretaker relative to schedule a phone interview. If unable to reach to caretaker relative by telephone, send an appointment letter and follow standard intake appointment scheduling, application processing and denial procedures.
- If telephone contact is made with the caretaker relative, the intake can be completed without the caretaker relative being present. The caretaker relative will complete the intake forms and mail them back to the intake worker.
- The case can be approved in San Francisco and then sent to the caretaker relative's resident county as an Intercounty Transfer (ICT). Intake staff will need to explain this process to the caretaker relative. The CW 51 must be included as part of the ICT packet.
- When processing an outgoing ICT in these cases, staff should add to the ICT documents: **Dependent child – no interview needed.** This will serve to inform the receiving county that no intake interview is needed on their part.
- Intake staff must also inform the caretaker relative living in another county than an application for Food Stamps must be completed in the county of residence.
- Advise the caretaker that an interview in the new county is not required for cash aid.
- All ICT packets must be sent by Certified Mail.
- Follow up to ensure that the ICT has been accepted by the receiving county.

NOTE: Effective January 1, 2009, non-needy caretaker relatives who are receiving CalWORKs on behalf of a child who is a dependent of the court (and who is not eligible for federal Foster Care) are exempt from the face to face interview requirement in their new county of residence when the family moves from one county to another. This exemption only applies to ICTs for this specific non-needy caretaker relative population. Staff must verify that the relative has been appropriately approved to care for the child, and is not receiving CalWORKs benefits.

For intake, this means that these types of non-needy payee cases coming into San Francisco as an ICT, the caretaker relative will be exempt from the face to face interview.

V. Relatives Residing Outside of California

For providers residing out of California, the caretaker relative must be advised to immediately apply for TANF/AFDC benefits in their state of residence. The caretaker

relative will be provided a 60-day transitional payment based on the TANF payment in their state of residence, allowing them time to complete the application process in their state. The EW will need to contact the appropriate state to find out the current TANF rate.

To assist the provider, CalWORKs in San Francisco must supply the caretaker relative with the following:

- A copy of the SAWS 1 application for Foster Care benefits that was completed when the child was placed in their home;
- A Social Security card and birth certificate for the child(ren);
- Any other document in the file that will help the caretaker relative establish relationship

VI. Exemption from Cooperation with Child Support

Initial Foster Care placements will not be referred to Child Support for six consecutive months. The six months starts with the application date. **A case alert must be set up as a reminder to follow up with the Protective Service in six months to determine if the good cause exemption should continue.**

Intake staff responsibilities:

- Complete a 371 for both parents. **Clearly indicate on the 371 that child support collection is NOT required.** File the 371 in the case file.
- Complete the CW 2.1Q for both parents and file copies of the forms with the referral in the eligibility file.
- Forward the CW 51s for both parents to COOX at 170 Otis.
- Delete the CW 51 from Client Correspondence.
- Create a case alert to track the six month period of the good cause exemption.
- At the end of the six months, the carrying EW holding the case must contact the Protective Service Worker to determine if a child support case should be opened.
- Ensure copies of the CW 51 are included in the transfer packet.

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- Complete the CalWIN screens. A screen must be completed for each absent parent.
 - o Claim details tab – must be populated with Effective Begin Date and Claim Date
 - o Once good cause has been granted, enter the final determination date (located under Family Support Determination). This must match the Effective Begin Date and Claim Date.
 - o Enter “N” in the “based on physical harm with evidence” field
 - o Enter “Y” in the good cause field
 - o Select “other” as type of good cause
 - o Select “Solely on Examination of Corroborative Evidence with No Investigation”
- Go to Case Special Indicator window and enter type “4P” for Family Reunification
- Document action in CalWIN in Case Comments, Include “Good cause due to reunification services” in the comments.

VII. Change of Placement (Child Moves from the Caretaker Relative’s Home)

Children in Foster Care often move from one home (placement) to another home. The EW may be informed of these changes in various ways:

- A telephone call from the Protective Services Worker
- Receipt of Form SOC 158A “Foster Child’s Data Record and AFDC-FC Certification”
- Receipt of Form 1502, “Change of Placement”

It is the responsibility of the CalWORKs EW to report all placement changes to the Foster Care eligibility manager via email. Each change will be reviewed to determine if the placement will be eligible for federal funding and consequently eligible to be funded through Foster Care, rather than CalWORKs. If an ICT is warranted, procedures in Section IV, above, must be followed.

VIII. Benefits

Relatives residing in San Francisco: CalWORKs will make monthly payments based on the current CalWORKs rate in San Francisco.

Relatives residing out of San Francisco: CalWORKs will make monthly payments based on the current CalWORKs rate in the provider’s county until an ICT is initiated.

CalWORKs Eligibility Handbook	Temporary Medi-Cal Cards 50-29
	Effective: 7-15-05

50-29 Temporary Medi-Cal Card

Temporary Medi-Cal cards are issued by Distribution.

The format of the temporary Medi-Cal card is an 8 1/2 by 11 inch authorization printed on Medi-Cal Connections letterhead. The client may use this temporary authorization to receive Medi-Cal services.

Staff may authorize a temporary Medi-Cal card by completing Form 1023 (Request for Medi-Cal Cards), and submitting it to Distribution. **Make sure to put the client's CIN in the upper left corner of Form 1023 before submitting it to Distribution.**

Participants will receive their permanent Medi-Cal cards in the mail.

CalWORKs Eligibility Handbook	DV References and Resources 50-30.1
	Effective: 7-1-18

50-30.1 DV References and Resources

CalWORKs Eligibility Handbook

I. References from the Law and Regulations

ACLs 97-72, 98-41, 99-09, 99-90, 18-34, 18-78 and Errata of 7-26-00

Domestic Violence/Abuse CalWORKs Protocols for SFDHS, 6-3-98

MPP CalWORKs Welfare to Work: 42-710, 711, 713, 716

MPP 42-701.2 (d), (p); 42-710.65; 42-713.22; 42-715

W&I 11495, AB 557

II. Cross-references to Program Information Memos (PIMs)

AFDC PIM 95-11, 97-3, 97-8, 97-12E,

CalWORKs PIM 99-05, 01-01.

III. Cross-references to other sections of THIS handbook

Section 52-43: Child Support Activities, Good Cause, DV

Section 54-8.1 Homeless Assistance, VII. (AB 557) Fleeing Victims of Domestic Violence and Abuse

Section 57-15: Continuing Activities, DV

Section 58-3: Time on Aid, Exemptions and Exceptions

IV. Cross-references to Welfare-to-Work Handbook

Section 71-6: Domestic Violence and Welfare to Work

Section 73-17: Domestic Violence Services as Welfare to Work Activity

Section 77-1: Grievance Process

V. DV Resource Information

Referencing the following resources does not constitute endorsement of these resources nor does it represent an exhaustive list of available resources.

2-1-1 <http://www.211.org/>

This easy to remember, toll-free phone number, is available 24-7 throughout the U.S. and can be accessed by phone, text, and the internet. Callers are connected to a community resource specialist in their area who can help them find critical services and resources including shelter and housing options and utilities assistance, emergency information and disaster relief, and a safe, confidential path out of physical and/or emotional domestic abuse.

National Domestic Violence Hotline

Telephone: 1-800-799-7233

<http://www.thehotline.org/>

Since 1996, the National Domestic Violence Hotline has been the vital link to safety for women, men, children and families affected by domestic violence. Advocates and staff respond to calls 24/7, 365 days a year. They provide confidential, one-on-one support to each caller, offering crisis intervention, options for next steps and direct connection to sources for immediate safety. Their database holds over 5,000 agencies and resources in communities all across the country. Bilingual advocates are on hand to speak with callers, and their Language Line offers translations in 170+ languages.

Homeless Shelter Directory

<https://www.homelessshelterdirectory.org/>

The Homeless Shelter Directory was started as a list of homeless shelters. The web site also lists other homeless resources such as transitional resources for the homeless, medical and dental clinics for the homeless, and low cost and free alcohol and drug treatment rehab centers. This is strictly a web site. Shelters and other services identified on the web site which are specific to California may be found at <https://www.homelessshelterdirectory.org/california.html>.

50-31 DV Principles

Both TANF and CalWORKs legislation provide considerations for victims of domestic violence. The intent is to balance the special security and safety needs of victims of domestic violence with the need to provide them the opportunity to achieve independence and economic self-sufficiency through work. The stated intents are as follows:

Ensure that CalWORKs participants who are past or present victims of abuse are not placed at further risk or unfairly penalized by CalWORKs requirements and procedures;

Ensure that program requirements not be created or applied in such a way to encourage a victim to remain with the abuser;

Ensure that CalWORKs recipients participate in welfare-to-work activities to the full extent of their abilities, including support services such as counseling and treatment programs, to enable the recipient to obtain unsubsidized employment and move towards self-sufficiency.

I. Principles

A. Identifying clients who have been or are victims of abuse, while protecting confidentiality

All applicants and recipients are given many opportunities to self-identify. Provide safe space to disclose abuse.

Inform client about the limits of confidentiality (e.g. mandated reporting), otherwise assure confidentiality.

No negative consequences for client coming forward and reporting or doing so later.

No contacting the batterer to verify information.

B. Notice

Notice clients in writing and orally regarding available domestic violence considerations.

Provide client with written notice, resource brochure and brightly colored slip of paper for child support right not to cooperate.

Notice given at application and recertification, orientation and Employment Plan development. Sensitivity and discretion on noticing possible victim in presence of possible batterer.

Any notice sent to client should not reference domestic violence. The notice will cite the regulations.

C. Individual case assessments

Establish the fact or allegation.

Assess immediacy of risk and do safety planning for those who self identify (clients and their children).

Determine degree of impairment in terms of participating in welfare-to-work. If possible, make a safety plan that fits in with welfare to work activities. If the client is too fragile with such overwhelming health and safety needs, s/he probably should not be in a welfare-to-work plan. Let the client decide.

Refer client to domestic violence advocate from the contracted service provider (Riley Center as of 01/2004) to discuss safety planning and options.

If participation in welfare-to-work activities is detrimental to an individual or his/her family, this is Good Cause for Not Participating. Program requirements can be waived on a case-by-case basis. Waivers are temporary. The initial waiver is not to exceed six months and is to be reviewed at least every three months. A waiver must be accompanied by a Service Plan designed to provide safety and lead to self-sufficiency. If necessary, the Service Plan may be renewed after six months.

Diversion assistance may be a better alternative than CalWORKs assistance for some applicants.

D. Referring identified domestic violence victims to resources/supportive services

When the participant is working with a domestic violence service provider, no details of services other than the fact of participation and the number of hours of participation are required to be reported to DHS for Service Plan or Employment Plan monitoring.

Domestic violence services can also be part of the Employment Plan.

E. Self-identification

All CalWORKs applicants and recipients shall be allowed many opportunities to self-identify as victims of abuse.

Victims shall be allowed to voluntarily and confidentially disclose abuse at any time.

Victims who choose not to self-identify shall not be penalized.

No applicant or recipient shall be required to answer any question about abuse, but rather shall be afforded the opportunity to self-disclose when and if s/he feels ready and safe to do so.

F. DHS shall create a safe space for victims to disclose abuse

Confidential space shall be made available for interviewing.

Posters about domestic violence shall be posted in each orientation room, bathroom and private interview space (as space permits).

Telephones shall be available for abuse victims to use to call resources in a confidential manner.

CalWORKs Eligibility Handbook	Definitions of Abuse 50-32
	Effective: 9-15-04

50-32 Definition of Abuse

“Domestic Abuse” means assaultive or coercive behavior including:

1. Physical abuse;

2. Sexual abuse;
3. Psychological abuse;
4. Economic control;
5. Stalking;
6. Isolation;
7. Threats or other types of coercive behaviors occurring within a domestic relationship.

Domestic abuse and **domestic violence** are terms used interchangeably in this handbook.

“Domestic Relationships” are relationships between or among:

1. Adults or minors who are a current or former spouse;
2. Adults or minors who live together or have lived together;
3. Adults or minors who are dating or have dated;
4. Adults or minors who are engaged in or who have engaged in a sexual relationship;
5. Adults or minors who are related by blood or adoption;
6. Adults or minors who are or formerly were related by marriage;
7. Adults or minors who are engaged or were formerly engaged to be married;
8. Persons who have a child in common;
9. Minor children of persons listed above in 1. – 8.);
10. An adult or minor acting in concert with or on behalf of a perpetrator in a relationship identified above in 1. – 8.).

CalWORKs Eligibility Handbook	DV Advocate 50-33
	Effective: 9-15-04

50-33 DV Advocate

The county contracts for Domestic Violence (DV) Advocate services. The DV contract with Riley Center was effective 01-2004. DV Advocates are on-site at the CalWORKs 170 Otis Street office.

The Domestic Violence Advocate:

- Provides DV presentation(s) at CalWORKs Orientations;
- Provides counseling with applicants/recipients/participants by appointment and on a drop in basis, as available;

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- Assists clients to complete the form Sworn Statement of Abuse and Request for CalWORKs Waiver (Form 4127);
- Refers clients to domestic violence services available in the community, as appropriate;
- Refers to support groups for DV victims.
- Completes, approves and signs the CalWORKs First Service Plan (7025 CW) and Extension(s) (7025A), forwards Plan to CalWORKs worker for final approval;
- Monitors participation in DV Service Plans;
- Is available to consult with CalWORKs staff individually, in case conference, unit meetings or MDT's;
- Works with the Housing Authority DV Crisis Intervention Specialist to provide documentation of abuse to assist in re-housing participants who are in danger.
- The Advocate shall assess whether applicants/recipients who self-identify or are otherwise identified as abuse victims are in need of a waiver of any CalWORKs requirement due to the abuse.

Note: This description of DV services is also printed in the WTW Handbook, Section 71-6, Domestic Violence and WTW.

CalWORKs Eligibility Handbook	DV Notice Procedure 50-34
	Effective: 1-1-17

50-34 DV Notice Procedure

Assembly Bill 1603 (AB 1603), was signed into law on June 27, 2016, repealing the CalWORKs MFG rule. Effective January 1, 2017, no child will be denied aid because he or she was born into a family that received cash aid continuously for ten months immediately prior to their birth. Children previously determined as MFG and excluded from the Assistance Unit (AU) shall have their needs included when determining the Maximum Aid Payment (MAP) and must be added to the AU effective January 1, 2017, if all other conditions of eligibility are met. Refer to Eligibility HB Section 54-14, Maximum Family Grant for more information.

I. When to give oral and written notification

Provide oral and written notice to all CalWORKs applicants and recipients about the available domestic violence considerations:

- A. At the time of application for cash aid, including applicants referred to diversion;

- B. Orientation sessions for welfare-to-work for new and continuing applicants and recipients;
- C. At the time of re-certification for cash aid;
- D. Whenever a Welfare-to-Work Employment Plan is in development;
- E. At any time that compliance with WTW is at issue;

Remember to complete the WTW Compliance Protocol Checklist (7034 CW) for every case before sending the first NOA to start the compliance process (GIS 643 or NA 840).

- F. Required reviews of WTW status including:
 - 1. Case Review for WTW 18-24-month Time Limits;
 - 2. Reappraisal, prior to developing a revised WTW Employment Plan;
 - 3. Six Month and Three Month Reviews for 60 month WTW Time on Aid reviews.

Discussion

CalWORKs provides many review opportunities. Use these required reviews to check in with an individual about CalWORKs services and the waivers of requirements available for DV victims and survivors. (At minimum, share the DV 1, DV 2, DV 2A and 4128 which are all stocked at CalWORKs offices in multiple languages).

Discussion of reasons for the worker to review DV informing at certain times follow.

Crossover cases with CalWORKs and F&CS: direct the F&CS worker to contact the DV Advocate directly regarding a waiver if the participant and the F&CS worker prefer to not share sensitive DV information with CalWORKs. Be sure the DV Advocate and F&CS workers know when all parties are involved in a crossover case.

Before sending the notice to start the compliance process, complete the WTW Compliance Protocol Checklist (7034 CW) and review the DV information in the case file; make the DV information available to the participant as appropriate. It is important with any participant who is having compliance problems to again inform about the waivers and services available in the event DV is an issue in her/his life. An individual who has been reluctant to share personal information may respond when the possibility of financial sanction is imminent.

CalWORKs Eligibility Handbook	DV Informing Notice 50-34.1
	Effective: 9-15-04

50-34.1 DV Informing Notice

I. Domestic Violence Informing Notices

A. The Domestic Violence Informing Notice (Form 4126)

Use this notice to inform applicants and recipients (Intake and RV) about the following:

1. The existence of any waivers for victims of abuse;
2. Available referrals for supportive services;
3. The confidentiality protections/protocols and any required disclosures/limits on confidentiality;
4. Assistance available to abuse victims in tailoring work and educational plans to meet their safety, confidentiality and other needs;
5. Certain immigrants who are victims of abuse may be eligible to petition for permanent residency and obtain welfare and may be eligible for exceptions to sponsor deeming requirements.

The applicant or recipient and the CalWORKs employee shall sign and date the CalWORKs Domestic Violence Informing Notice (Form 4126). The original signed notice shall be kept in the case file and a copy given to the applicant/recipient.

B. Child Support Flyer (4125)

1. The colorful child support flyer (4125) shall be given to all applicants and recipients (Intake and RV); it highlights the existence of the good cause exception to cooperation with establishing paternity and a child support order.

2. For Child Support and DV informing see Section 52-43.

II. Domestic Violence brochures

In addition to these two (2) required informing notices, the following brochures and flyers are to be shared as outlined below:

A. "What Domestic Violence Survivors Need to Know about CalWORKs"(DV1)

Give "What Domestic Violence Survivors Need to Know about CalWORKs" (DV1), the information brochure, to all applicants and recipients (Intake and reinvestigation [RV]).

B. "Are You in an Abusive Relationship?" (DV2)

Give "Are You in an Abusive Relationship?" (DV2), the referral brochure, to all applicants and recipients and at CalWORKs Orientation (Intake and RV).

C. "Safety Plan For Survivors of Abuse"(4128)

Give the Safety Plan For Survivors of Abuse (4128) that provides practical advice for the abuse victim, to all applicants and recipients (Intake and RV). In addition, give this flyer to the client when making a referral to the DV Advocate for services.

D. Counseling Resource List for Clients (DPH) (7009 CW)

Give the Counseling Resource List for Clients (DPH) (7009 CW), at CalWORKs Orientation and to all recipients at RV.

III. Communicate clearly and use translated forms and flyers

Forms, notices and flyers are available in translation. See Section 50-39, Forms.

When the CalWORKs Domestic Violence Informing Notice (Form 4126) is not available in the applicant/recipient's primary language, read the form in their primary language and document in the case file that the form has been read to the client.

Make every effort to provide informing in the applicant/recipient's language.

CalWORKs Eligibility Handbook	DV: Privacy and Confidentiality 50-34.2
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50-34.2 DV: Privacy and Confidentiality

ENSURE PRIVACY AND CONFIDENTIALITY FOR DOMESTIC VIOLENCE NOTICES

I. Ensure privacy and confidentiality when giving the domestic violence notice

Abuse victims may be put at increased risk if they are given the notices discussed in this section in the presence of another person who is accompanying them. This includes the other parent in two parent cases. With this in mind, if an applicant or recipient is accompanied by another person, the CalWORKs employees shall do the following:

A. Child Support Flyer (Form 4125)

Say as you introduce the child support flyer (Form 4125) this is given to everyone.

B. Meet with applicant/recipient separately to inform

As part of "office routine," make every effort to meet with the applicant or recipient separately for at least a small portion of the session. During this time, read and sign the informing notice CalWORKs Domestic Violence Informing Notice (4126) and provide other brochures and flyers.

C. Two Parent Family

In two-parent family cases, if both parents are present for the intake appointment(s), do not inform, but make a notation of the need for informing in the case file to alert the carrying EW/ES to follow up with informing at the first opportunity for individual appointments.

D. Exempt Unit

If the family is exempt from WtW and subsequently assigned to the Exempt Unit, utilize any occasion during the year, or at reinvestigation, to have one parent come to the office. During this time, read and sign the informing notice (Form 4126) and provide other brochures and flyers.

E. CalWORKs Orientation

Both parents will receive oral notice and the brochure What Domestic Violence Survivors Need to Know about CalWORKs (DV 1) at the CalWORKs Orientation sessions.

F. Welfare-to-Work

Schedule a separate meeting for each parent for WtW appraisal, assessment and development of the Employment Plan. During this time, read and sign the informing notice CalWORKs Domestic Violence Informing Notice (Form 4126) and provide other brochures and flyers.

G. Cross Reference

For more information about confidentiality and DV, see Section 50-38 Intake/Domestic Violence/Confidentiality.

CalWORKs Eligibility Handbook	DV and the Inter-County Transfer Process
	Effective: 8-24-09

50-34.3 DV and the Inter-County Transfer Process

(Reference ACIN I-60-09)

Effective August 24, 2009, a new form, [WTW 37](#), is required when disclosing any domestic abuse information during an ICT process.

The ICT process becomes highly sensitive in nature when a client has a domestic abuse situation.

Information with respect to domestic abuse victims and their dependents must not be released to any outside party, other government agencies, or any employee in either the sending or receiving county who is not directly involved in the recipient’s case.

Recipients Leaving the Sending County

Provide the recipient with references to local domestic abuse services that are located in the receiving county. These services can be found by calling 1-800-799-SAFE or by contacting the receiving county.

Make sure that all communication of domestic abuse issues, including documentation, are kept confidential so that the recipient's information is not available to any county workers in the receiving county that will not be directly involved in the recipient's case.

Don't use faxes whenever possible for ICT file transfers in these cases.

Transferring Documentation

Include any information regarding any domestic abuse services that the recipient may be receiving and waivers that the recipient may have. This includes information on domestic abuse waivers that the recipient has been granted, domestic abuse services that the recipient is receiving, and whether the recipient has claimed good cause for non-cooperation with the child support requirements. This information can only be released by the sending county if the recipient has signed a WTW 37 form in either the sending or receiving county.

The WTW 37 is valid for a maximum of one year after it is signed by the recipient.

Recipients should also be informed that if they move to a new county and have not signed a WTW 37 form, any information regarding their domestic abuse situation, such as waiver determinations, cannot be transferred to the receiving county unless they sign a new WTW 37 in the sending county.

Domestic abuse waivers

When receiving a recipient identified as a domestic abuse victim during the ICT process, find out whether the recipient had been granted a domestic abuse waiver in the sending county. Domestic abuse waivers granted by the sending county should remain in effect while a case is still in the 30-day transfer period.

After the 30 day transfer period, the receiving county may continue the waiver if the county determines that the waiver continues to meet the needs of the domestic abuse victim and is consistent with the county's written domestic abuse waiver criteria.

DV waivers are granted by managers. Present all relevant information to the appropriate manager for approval or denial of the waiver granted by the sending county.

If the receiving county determines that an existing waiver should be modified prospectively, a timely and adequate notice of action must be issued through a safe mode of communication. Reasons for modification may include, but are not limited to, the situation for granting the original waiver no longer exists, the services and activities available in the receiving county necessitate a modification of the waiver, the sending county's waiver does not meet the needs of the recipient's current situation, etc.

See also 57-2: Outgoing ICT's

CalWORKs Eligibility Handbook	DV: Diversion 50-35
	Effective: 9-15-04

50-35 DV: Diversion

Explore with applicants at intake who are victims of abuse whether diversion may be appropriate instead of CalWORKs assistance.

Diversion shall be available for such purposes as:

- Assistance to buy a car to bring children to day care and travel to work if batterer has control over the car;
- Assistance to relocate from one employment location/branch to another to increase one's safety; and
- Other means to assist victims of abuse to achieve greater safety and self-sufficiency that might preclude a need for long-term aid.

CalWORKs Eligibility Handbook	DV Waiver Requirement 50-36
	Effective: 9-15-04

50-36 DV Waiver Requirement

I. Case by case decisions on waivers of program requirements

Waive, on a case-by-case basis, for so long as necessary, following a determination of good cause, any program requirements that would make it more difficult for the victim

CalWORKs Eligibility Handbook

of domestic violence and/or her/his child(ren) to escape abuse and that would be detrimental to or unfairly penalize past or present victims of abuse.

II. Waivers, DV Advocates and CalWORKs Workers

Eligibility Workers and Employment Specialists are responsible for granting the waiver and must consult with/refer to a DV Advocate in regards to all waivers of CalWORKs and WTW requirements. This assures consistency of services to any CalWORKs recipient who is or has been a victim of domestic violence.

The decision to grant a waiver is discussed in: Section 52-43: Child Support, Good Cause and Domestic Violence.

See also WTW Handbook Section 71-6, Domestic Violence and WTW.

III. Requirements that may be waived include, but are not limited to

“Any” program requirement can be waived (with the exception of program eligibility requirements regarding deprivation, income and assets, 42-715.511) if it makes it more difficult for the abuse victim or her/his children to escape abuse or puts the family at increased risk of abuse. Program requirements that can be waived are included but are not limited to those enumerated below:

Paternity establishment and child support cooperation requirements;

Relocation family grant (utilizing homeless funds to locate out of the city);

Requirements that teen parents live in an adult-supervised setting;

Educational requirements (based on the teen school requirement);

Maximum Family Grant;

Sponsor deeming requirements can be waived for non-citizen abuse victims;

60 month time limits on receipt of assistance;

Welfare-to-work participation requirements.

IV. Examples of Domestic Violence Waivers for Eligibility

Examples of situations in which Domestic Violence Waivers are warranted for CalWORKs eligibility include but are not limited to:

1. Waivers of requirements to disclose information, such as paternity, where the applicant or recipient is afraid such disclosure will increase the danger of abuse to the applicant or recipient or that individual's dependents;
2. Waiver of paternity and child support cooperation requirements or penalties for failure to cooperate with child support determination and paternity establishment when the applicant or recipient reasonably believes that cooperation would put the applicant or recipient or that individual's dependents at risk;
3. Waiver of residency requirements when an applicant or recipient flees to the state of California to escape abuse.
4. Waiver of maximum family grant:
 - For applicants and recipients who need full benefits for their family to escape violence or remain free of the abuser or
 - Where the conception of the excluded child was the result of rape, coercion or incest.
5. Waiver of requirement that teen recipients live with a parent, legal guardian or other adult relative where a battered teen parent believes her and/or her children's safety would be enhanced by relocating.
6. Waiver of limitation on assistance when the child is absent from home for a certain number of days where the batterer has held the child past his/her visitation time or kidnapped the child.
7. Domestic violence waiver of WTW participation stops the 60month time clock, when the recipient is complying with a Service Plan.

In the event the domestic abuse victim/client has been aided for 60 months, s/he may be eligible for a Time Exception/Time Extender and be added back into the AU. Domestic Violence is the one clock stopper that does not require all adults in the home to qualify for an exception/extender. (See Section 58-3, Time on Aid, Exemptions and Exceptions.)

See WTW Handbook 71-6 for examples of WTW participation waivers.

CalWORKs Eligibility Handbook	DV: Notice to Deny Waiver 50-36.1
	Effective: 9-15-04

50-36.1 DV: Notice to Deny a Waiver

ASSURE CONFIDENTIALITY

Denial of a request for waiver of program requirements shall be in writing and shall state the reason for denial. Remember to preserve confidentiality and safety when noticing recipients/participants who have self-identified as abuse victims. The case file must include documentation of any need for alternate noticing requirements and the method chosen. See Section 50-38: Confidentiality.

- Use the program notices for CalWORKs eligibility requirements to deny those waivers.
- Or use Notice of Action, CalWORKs Good Cause Denial (7214 CW), checking "other" in order to maintain confidentiality for the applicant/recipient/participant.
- Use the 7214 CW to tell the client of the denial of the request to waive time limits and/or WtW participation requirements.

This notice may also be used when a participant does not follow through with an initial referral to the DV Advocate.

CalWORKs Eligibility Handbook	DV: Evidence and Standards of Proof 50-36.2
	Effective: 9-15-04

50-36.2 DV - Evidence and Standards of Proof

I. Sworn statement is sufficient proof

The sworn statement by an applicant or recipient of being a past or present victim of abuse is *all* that is needed to determine good cause for any CalWORKs-related

documentation requirements (cash aid or WtW), unless there is *written* contradictory evidence.

1. Provide applicants/recipients who are considering a waiver with the form *Sworn Statement of Abuse and Request for CalWORKs Waiver* (Form 4127), that can be used in preparing the sworn statement.
2. This form is to be used to provide proof of abuse.
3. Refer the applicant/recipient to a Domestic Violence Advocate for services, including assistance with completing the *Statement of Abuse and Request for CalWORKs Waiver* (Form 4127).
4. Do not contact the person believed to be the perpetrator of abuse, or any other person deemed by the victim to be unsafe to contact, for the purpose of corroborating, verifying, or refuting evidence of abuse.
5. At no time will an applicant's or recipient's decision not to disclose eligibility for waivers due to abuse preclude disclosure at a later date, nor will it preclude future access to services or waivers.

II. Other documentation is accepted

- An applicant or recipient may have other documentation of abuse to support his/her claim, such as:
- Police, government agency, or court records or files;
- Documentation from a domestic violence program, legal, religious, medical, or other professional from whom the applicant or recipient has sought assistance in dealing with abuse;
- Other evidence, such as a statement from any other individual with knowledge of the circumstances which provide the basis for the claim;
- Physical evidence of abuse; or
- Any other evidence that supports the statement.

The *Statement of Abuse and Request for CalWORKs Waiver* (Form 4127) is not required if the above documentation is available.

50-37 DV: Grievance

At all points of decision, the Worker should remind applicants/recipients that they may appeal or grieve any Department decision; they may consult a Client Advocate or an advocate of their choice. For more information on this, consult WtW Handbook Section 77-1.

Workers should view the Client Advocate as an ally in resolving participant complaints and grievances.

Applicants/recipients may request a State Fair Hearing at any time, prior to, parallel with or after grieving through the Department's process.

If applicants/recipients have a grievance with a service provider or employer or other non-Departmental Welfare to Work (WTW) assignment, the participant must exhaust that grievance procedure. If dissatisfied with the results, the participant shall report this to the Worker and the Grievance Coordinator.

CalWORKs Eligibility Handbook	DV: Confidentiality 50-38
	Effective: 05-01-09

50-38 DV: Confidentiality

Strict adherence to the rules of confidentiality in domestic violence cases cannot be over-emphasized. Following is a discussion of confidentiality issues in relation to domestic violence. This policy is also found in the WtW Handbook Section 75-3 pages 4 & 5.

I. Identifying information is confidential:

Any identifying information pertaining to any applicant/recipient of aid who claims to be a past or present victim of abuse, and their dependents, whether provided by the victim or by a third party, shall be kept confidential. This information shall be used by DHS solely for the purpose of referral to services, determining eligibility for waivers, or developing an individualized plan.

II. To be shared ONLY as follows:

Information with respect to victims of abuse or anyone who claims to be a victim of abuse shall not be released to any outside party or parties or other governmental agencies, or to any other employee of DHS who is not directly involved in the applicant's/recipient's case, unless the information is required by law to be disclosed, or unless authorized in writing by the applicant/recipient.

This includes but is not limited to:

- Information on the applicant's/recipient's current address, workplace or work placement or training site
- That the individual has been identified as a victim of abuse or any details concerning the abuse

III. Discuss how to communicate with the survivor about DHS business:

Whenever an applicant or recipient self-identifies or is otherwise identified as an abuse victim, DHS staff shall discuss with the applicant or recipient how to direct any future communications and correspondence, including notice of sanctions and denial of waivers, in a way that does not jeopardize the safety of the applicant or recipient. If an alternative mailing address is requested, the actual address must be periodically verified.

- **EXAMPLE:** a recipient might want mail directed to an address, and/or phone calls directed to a phone number, of a friend rather than her/his own home where the batterer might see it.

IV. Confidential Material: Names, Social Security numbers, CalWIN Screenshot Printouts

Names of applicants and recipients, as well as their Social Security numbers, are considered confidential information.

Papers containing the names and social security numbers of applicants and recipients must be disposed of in waste bins marked "Confidential". Do not put this information into the regular paper recycling bins.

Screenshots from CalWIN that contain names and Social Security numbers must be disposed of in the confidential bins. Do not recycle these in the regular paper recycling bins.

CalWORKs Eligibility Handbook	DV: Forms 50-39
	Effective: 3-1-05

50-39 DV: Forms

This section includes brochures and flyers, forms and written notices relative to domestic violence.

I. Brochures/Flyers

DV-1(4-00) What Domestic Violence Survivors Need to Know about CalWORKs Provides information about CalWORKs and domestic violence policies.

DV-2(11-01) Information and Options for Survivors of Domestic Violence Includes local resources for getting out of a domestic violence situation. "Are you in an Abusive Relationship?"

4128(8/00) Safety Planning for Survivors of Abuse A handout for staff and/or Participants when domestic violence is a concern.

7009 CW(6-03) Counseling Resource List for CalWORKs Clients (DPH) Handout to clients: SF Mental health and substance abuse service providers.

II. Forms

WTW 2(1/98) Employment Plan - Activity Assignment This SDSS-required form specifies up to two welfare to work activities the Participant is committing to engage in.

WTW 2A Revised (12/00) WtW Employment Plan The WtW 2A is the County's WtW Employment Plan, required for every Participant. It documents the Participant's vocational goal and the activities assigned to support the goal. The activities may be concurrent and/or sequential. Potential employment barriers are identified along with supportive services to be provided to assist the Participant to become employed.

4125(7/98) No name (bright pink) A colorful flyer highlighting the existence of the domestic violence good cause exception to cooperation with establishing paternity and a child support order.

4126(9/98) Domestic Violence Informing Notice. Use to inform all applicants and recipients of domestic violence services, protections and waivers of requirements in CalWORKs.

4127(9/98) Sworn Statement of Abuse and Request for CalWORKs Waiver(Domestic Violence) When an applicant/recipient completes and signs the sworn statement of abuse, this shall be sufficient documentation to establish abuse.

7025 CWRevised (09/04) CalWORKs First DV Service Plan(Domestic Violence) Used by DV Advocate and participant to request a waiver of WtW time limits or work requirements and outline a service plan designed to provide safety and lead to work. Signed by the DV Advocate and participant, ES and Unit Supervisor.

7025A CW(09-04) CalWORKs DV Service Plan Extension DV Service Plan Extension is completed when a second or subsequent DV Service Plan is needed. Consultation is required. Approval signatures include DV Advocate, client, Advocate's Supervisor, ES and Unit Supervisor.

8014(15)(9/92) Authorization to Release Information Standard DHS form for client signature – ES must have a client's authorization before communicating with any agency or party outside DHS about the client.

III. Written Notices

7213 CW(9/98)(9/2004) Notice to Review Good Cause(Domestic Violence) Notice of appointment for review of Domestic Violence Waiver status.

7214 CW(11/02)(9/2004) Notice of Action, CalWORKs Good Cause Denied(Domestic Violence) NOA – Denial of request for a Domestic Violence Waiver

CalWORKs Eligibility Handbook	Safe Surrender/Relinquishment 50-40
	Effective: 05-01-10

50-40 Safe Surrender/Relinquishment

Reference: ACIN I-19-10

The Safely Surrendered Baby law provides a safe alternative to abandonment of a newborn baby. The intent of the law is to provide freedom from prosecution and maintenance of confidentiality for the individual surrendering a baby within 72 hours of birth at a designated safe surrender site.

There is a statewide, toll-free hotline providing safe surrender baby site locations throughout California.

The number is 1-877-BABYSAF, or 1-877-222-9723.

Callers to the new safe surrender baby hotline will receive information about safe surrender site locations in local communities by ZIP code.

CalWORKs Eligibility Handbook	ADA Procedures 50-41
	Effective: 04-01-15

50-41 ADA Procedures

I. Definition of ADA

II. Invite CalWORKs Participants to Disclose their Disabilities Under the ADA

III. Completing the Invitation to Disclose Form With CalWORKs Participants

IV. Providing Reasonable Accommodations to CalWORKs Participants

V. Tracking ADA Requests

VI. Disability Resources

VII. Tips for Working with Persons with Disabilities

VII. Language Access

I. Definition of ADA

The Americans With Disabilities Act, or ADA, enacted on 1990, protects individuals with disabilities from discrimination on the basis of disability in the services, programs, or activities of all State and local governments.

If an individual meets any one of the following conditions, the participant is considered to be an individual with disability for purposes of coverage under ADA:

1. The individual has a physical or mental impairment that substantially limits one or more major life activities, such as being deprived of sight, hearing, mobility, etc.
2. A record of such an impairment exists
3. The individual has been regarded as having such impairment.

Conditions not covered under ADA:

1. Although high-risk pregnancies are not covered under the ADA, CalWORKs will do home visits to facilitate the application for assistance in high-risk pregnancy cases.
2. Lack of proficiency in English, or illiteracy, is not considered a disability under the ADA, unless the individual suffers from a physical or mental impairment.
3. An individual illegally using drugs is not covered under the ADA.

II. Invite CalWORKs Participants to Disclose their Disabilities Under the ADA

To address the special needs of participants with disabilities, a DHS brochure, "The Americans with Disabilities Act: Your Rights to DHS Programs and Services", FORM OCR1 and a blue DHS Invitation to Disclose Form OCR2, must be included in every CalWORKs application and renewal packet.

Form OCR1 informs participants of their rights under the ADA to access DHS programs and services. Form OCR2 invites the participant to inform DHS of any disability that may interfere with his or her application for CalWORKs benefits and gives the participant the opportunity to identify what accommodations would help in meeting eligibility requirements. This form documents that the worker and the participant have discussed his or her rights under the ADA.

The EW/ES can also provide these forms at any time when becoming aware of a participant's disability. The worker will either provide a reasonable accommodation, such as assisting in completing forms, or refer the participant to the Duty Social Worker. The signed and completed DHS Invitation to Disclose Form (OCR2) should be filed in the case folder.

The participants's declaration of a disability is sufficient for DHS to provide reasonable accommodation. If the participant's statement is questionable, DHS may need to get verification of the participant's disability. The EW/ES shall require the participant to

provide verification by a reasonable and specific date, while continuing to provide services.

III. Completing the Invitation to Disclose Form with CalWORKs Participants.

At every Intake and Renewal, the DHS ADA brochure described above (OCR1) must be given to the participant, along with the Invitation to Disclose, (OCR2).

The worker will:

A. Review with the participant the DHS brochure (OCR1).

1. At the top of the form, note whether the participant has indicated if they need help, and whether the participant has identified the specific area(s) where help is needed.
2. If the participant does not provide a written explanation of the type of help needed, the worker should ask the participant what is needed. The worker should write "Participant states..." in the middle of the form.
3. The worker should ensure that the participant signs, dates, and puts his or her Social Security number on the Form OCR2.
4. At the bottom of the form, the DHS worker should record the help provided, if any, and sign, entering the worker number and date.
5. The worker should provide the participant with a copy of the OCR2, and file the original in the case file.

IV. Providing Reasonable Accommodations to CalWORKs Participants

Providing participants with reasonable accommodations is a service designed to better meet their needs during the CalWORKs eligibility process.

DHS staff should provide reasonable accommodations to participants who have indicated a need on the OCR2. The process of providing reasonable accommodation must not delay the determination of the applicant's eligibility for benefits.

A. Examples of Reasonable Accommodations the worker can provide:

1. Assisting the participant in reading the forms
2. Assisting the participant in completing forms

3. Referring the participant to the social worker on duty.

B. Examples of accommodations that may require the approval of a Supervisor or the involvement of the Duty Social Worker:

1. Requesting an American Sign Language (ASL) interpreter.
2. Expediting the application process.
3. Arranging a home visit for a applicant or participant who has a physical or mental limitation.
4. Arranging for the assistance of an Duty Social Worker at the participant's request.

V. Tracking ADA Requests

It is necessary to keep track of ADA clients in order to provide appropriate accommodations and to keep count of actual services provided. Staff must do the following:

1. Put a "blue dot" on the case folder, on the tab section, whenever it has been determined that it is an ADA related case that needs to be processed in accordance with ADA requirements.
2. Forward the case folder with the completed Form OCR2 to the unit supervisor for approval.
3. Supervisors will keep a list of ADA (blue dot) cases in their units and monitor these cases for compliance with the ADA accommodation plan.

NOTE: It is important to remember that it is the special handling that is being flagged - not the disability.

VI. Disability Resources

A. Staff Resources

For questions on how to best provide accommodations for applicants with disabilities, the worker may consult or contact any of the following:

1. Unit supervisor
2. Duty Social Worker

B. Community Resources for Hearing Disabilities

There are two main resources available for communicating with clients with hearing impairments:

1. California Relay Service. Staff may dial 711, or 1-800-735-2922. California Relay Service can act as an intermediary for phone conversations with Text Telephone users. The service operates 24 hours a day, seven days a week, and can provide services in English or Spanish.
2. Bay Area Communication Access (BACA), at 356-0405. BACA can provide sign language interpreters. To schedule a session with an interpreter, call the social worker, or the DHS Office of Civil Rights at 557-5576.

VII Tips for Working with Persons with Disabilities

A. General

1. Ask the participant about his or her functional limitations and ask how to provide appropriate accommodations.
2. You only need to know what the functional limitation is and how to provide an accommodation.
3. Avoid referring to participants by their disability. For example, a participant is not "an epileptic", but rather "a person who has epilepsy".
4. Conduct the interview as you would with anyone. Be considerate without being patronizing.
5. Feel free to ask the Duty Social Worker for help at any time.

B. Hearing Impairment

1. At the initial meeting, find out how the participant can best communicate with you. Start by exchanging notes. Other methods include using a sign language interpreter, moving to a quieter space, and lip-reading.
2. Speak in a normal tone of voice. Look and speak directly to the participant you are addressing, not at another person who may be assisting.
3. Only raise your voice when requested. It may be helpful to communicate with brief, concise notes.

C. Visual Impairment

1. When greeting a participant with a vision impairment, always identify yourself and introduce anyone else who may be present.
2. When offering seating, ask if you can help. If the participant gives you permission, place his or her hand on the back or arm of the chair.
3. Ask what the participant can and cannot see. Ask whether any assistance is desired in moving to the interview area.
4. Ask the participant what is his or her preferred method of receiving information. If the answer is Braille, explain that DHS will try to provide it. In the meantime, offer the participant some options, such as help in reading or filling out forms.
5. Let the participant know if you move or need to end the conversation.

D. Partially blind

1. Provide forms or written information in large print.
2. Ask the participant if the participant needs any help in filling out forms.

E. Mobility Aids

1. Enable participants who use crutches, canes, or walkers to keep them within reach.
2. When speaking to a participant in a wheelchair for more than a few minutes, sit in a chair. Place yourself at the participant's eye level to facilitate conversation.

F. Speech Impairment

1. Give your whole attention when talking to a participant who has speech impairment.
2. Listen carefully. Do not pretend to understand if you do not. Try rephrasing what you think you heard to find out if you were correct, or ask the participant to repeat what you do not understand.

3. Ask the participant short questions that require brief answers or a nod of the head.
4. Show patience - do not finish the participant's sentences before the participant has a chance to complete them.
5. Do not raise your voice unless asked to do so by the participant. Many people with speech impairments can hear adequately.

VII. Language Access

- A. Whenever possible it is preferable to use in-person interpretation services. telephone interpreting services are not intended to replace bilingual staff interactions, or in person interpreters (see CW HB Section 56-3 Language Access for more information).
- B. HSA maintains a Language Line for over-the-phone translation services. Translators on the Language Line are available in most languages.
- C. The language line can be accessed using any phone to contact a client, or by using a dual handset phone when the participant is present in the office.
 - 170 Otis Office has phones on the first floor with dual handsets. One is located in the reception area, and the other is located in a locked interview area. Staff must obtain key to gain access to confidential interview area.
 - Whenever using a phone to communicate with a client in an open area, make sure that the content of the conversation is brief, and that you are not disclosing, or asking any confidential information of the participant.

D. How to access an Interpreter

From any phone follow the instructions below, if you have conference calling features be sure to use it before you place your call.

1. Dial **1-888-419-0164**
2. Select the language you need
 - a. Press 1 for Spanish
 - b. Press 2 for all other languages and state the name of the language you need
 - c. Press 0 for assistance if you do not know the language

3. Provide your 3 digit access code: **159**
4. Provide your worker number to the agent
5. You will be connected to an interpreter who will provide his/her name and ID number

Brief the Interpreter. Summarize what you wish to accomplish and give any special instructions.

ADD THE CLIENT to the line.

Say "End of Call" to the Interpreter when the call is completed.

* If you are asked for your Client ID # please provide **501641**

IMPORTANT INFORMATION:

INTERPRETER IDENTIFICATION - Interpreters identify themselves by name and ID number. Feel free to note this information for future reference if your organization requires it for their records or to comply with regulatory requirements.

WORKING WITH AN INTERPRETER – At the beginning of the call, briefly tell the interpreter the nature of the call. Speak directly to the limited English speaking speaker, not to the interpreter, and pause at the end of a complete thought. Please note, to ensure accuracy, your interpreter may sometimes ask for clarification or repetition.

CUSTOMER SERVICE– To provide feedback, commend an interpreter, or report any service concerns, please contact the Office of Civil Rights at (415) 557-5576.

For the complete HSA Quick Reference Language Line instructions, go to the HSA Intranet, look under "Resources" and select Language Line from the list

CalWORKs Eligibility Handbook	Red Dot/Yellow Dot Procedures 50-42
	Effective: 6-13-19

50-42 Red Dot/Yellow Dot Procedures

The Human Services Agency (HSA or Agency) is committed to maintaining a workplace free from violence and threats of violence, and will not tolerate acts or threats of violence in the workplace.

According to the Personnel Handbook, "Violence" includes both acts and threats of violence. Violence includes any conduct, verbal or physical, which causes another to reasonably fear for his or her own personal safety.

All employees are responsible for reporting any acts of intimidation, threats of violence, or acts of violence to their supervisors or managers. Supervisors and Managers are responsible for documenting and reporting all observed or reported incidents of workplace violence.

In effort to provide a safe environment for both clients and employees, the Human Services Agency has developed a process to deal with violence incidents involving clients. The process is referred to as Red Dot/Yellow Dot, and it is designed to help flag new incidents of violence, as well as track existing ones. The Red Dot/Yellow Dot process is observed by all HSA programs that use CalWIN; this helps ensure consistency on the implementation of the process, as well as consistency in client experience:

- To provide a safe work environment for staff and clients alike;
- To send a clear message that violent and/or unacceptable behavior will not be tolerated; and
- Specific consequences will result from such behavior.

In accordance with the guidelines outlined below, a red or yellow dot is entered between the case name and case number on the folder (if applicable). Also enter "Red Dot" or "Yellow Dot" in the Collect Case Special Indicator field in CalWIN.

These procedures provide guidelines for case workers and supervisors to help identify, flag, and engage clients known to the Agency, as previously involved in a verbal and/or physical altercation.

For a more comprehensive guideline regarding Violence in the Workplace, staff should consult the [Personnel Procedures handbook](#) for more information.

The City and County of San Francisco [Employee Handbook](#) also addresses workplace violence with a zero tolerance policy.

Definitions

- **Red dot** - signifies the client has been involved in an incident of physical violence or attempted physical violence (example: the client has either physically attacked or attempted to attack a staff member, threatened to kill a staff person, or engaged in property destruction) and should be considered DANGEROUS.
 - **Yellow Dot** - signifies that the client has acted extremely inappropriately, in a disruptive, hostile and/or threatening manner and should therefore be handled with CAUTION by staff.
1. Upon occurrence of incident, worker(s) involved will immediately inform their supervisor(s). Worker(s) will complete a [Red Dot Form using Docu-sign](#). The form must contain a complete explanation of the incident. Any City employee, contractor or security personnel that witnessed the incident will also complete the [Witness Docu-sign](#) statement form.
 2. The [Red Dot form](#) will be sent to the Unit Supervisor of the involved worker(s) for review via Docu-sign. The unit Supervisor(s) will recommend a Red or Yellow Dot designation and sign form, forwarding to the appropriate Section Manager for review and signature via Docu-sign. Next signoffs are by CalWORKs or Workforce Development Program Manager.
 3. The CalWORKs or Workforce Development Program Manager decision overrides all other recommendations. After final signoff, incident report is sent to entities in

each ESSS program, Security, Distribution, and Investigations via Docu-sign. For CalWORKs and WDD, form will be sent to i-files.

4. Upon receiving the completed [Red Dot form](#) via Docu-sign with all signatures complete, the CalWORKs or Workforce Development Program Manager's designee will send a [standard form letter](#) (for Red Dot designees only) including the date of the incident, a brief synopsis of what occurred and information regarding how to make future appointments. The letter will be signed by the CalWORKs or Workforce Development Program Manager. The letter will be mailed to the client's current address in CalWIN. If time is of the essence, the letter may be hand delivered to the client by security personnel in addition to being mailed.
5. If the client disagrees with the decision, the client may request a conference with the Manager.
6. After CalWORKs or Workforce Development Program Manager's approval, Program Manager's designee will enter into client red/yellow dot info into CalWIN and retain physical copies of red dot/yellow dot clients in binder. Clients will be designated Red or Yellow Dot for a period of one calendar year. (Each program or building may have an additional process for notifying others in their program or building).
7. If a client is involved in additional incident(s), the standard reporting procedure using Form will be followed with additional flags in CalWIN. Each flag will have its own 12 month expiration period.
8. If staff schedules an appointment with a red dotted client, they should contact HSA Security with the client's name and appointment time. HSA Security will stop the client at the entrance and escort them throughout the building.
9. When a red dot client returns to the building and is not accompanied by an approved authorized representative or security, the first employee who notices in CalWIN that the client is "red dotted" should contact security immediately to have security accompany the client.

If the Hyperlinks above do not work, please copy and paste these links into your browser for the respective forms:

Report of Red Dot/Yellow Dot Threat Link:

<https://na2.docusign.net/Member/PowerFormSigning.aspx?PowerFormId=e6e0a0b6-4aac-4863-8c43-d415cc456485>

Witness Statement for Red Dot Threat or Incidence of Violence Link:

<https://demo.docusign.net/Member/PowerFormSigning.aspx?PowerFormId=01cac602-618a-40b0-be3f-fb6966c4779e>

CalWORKs Eligibility Handbook	Case Transfer Requirements for WtW 50-43
	Effective: 2-21-19

50-43 Case Transfer Requirements for WTW

I. Cross References: ACL 04-41 and Errata

II. Introduction

CalWORKs mandates “universal engagement” of all recipients required to participate in Welfare-to-Work effective December 1, 2004.

Universal engagement means participants must complete WTW appraisal and assessment and sign an employment plan within the following time frames:

- Within 90-days of the date on the Intake Approval Notice of Action (NOA) when eligible for aid on date applied.

Or

- When ineligible for aid on the application date, but will become eligible in the following month: within 90-days of the start of aid.

To assure compliance with these requirements, mandatory WTW participants' cases must be transferred out of Intake within 5 working days of the approval NOA.

This handbook section outlines the intake process to implement universal-engagement time frames.

III. Intake Eligibility Worker (EW):

CalWORKs Eligibility Handbook

A. Prior to Intake Interview

- Make sure a thorough clearance was conducted by records management.
- MEDS: TRAC, KCAL, PSUM
- Page Center (Child Support)
- Identify MEDS issues needing correction.

B. Inform applicants about universal engagement

Emphasize the following requirements and be sure the individual understands.

Go over in detail with applicant:

1. Transition to WTW:

- Welfare-To-Work Program Notice (WTW5)
- Intake WTW Informing (4072) – requires applicant and workers signatures.

2. Exemption information:

- CalWORKs and WTW time Limit Exemption Request Form (CW 2186A)
- Medical Report (CW 61, 61 A, 61 B)
- *New WTW Exemptions effective August 1, 2009 through June 30, 2011.*

Effective August 1, 2009, families may be eligible for a categorical WTW exemption if they are caring for a single child aged 12-23 months, OR if they are caring for two children under six.

This exemption applies even if there are older children in the AU.

For two parent families, only one parent may take the exemption.

EW will screen for exemptions during the Intake process. The TEMP 2186A replaces the original CW 2186A until June 30, 2011. The client is given the TEMP 2186A for completion. If the client checks 'yes' for question #11 on the form, the 2186A must be placed on the top of the case file to flag the case for the temporary exemption. This will alert the Carrying EW and the EW of the exemption when the case is transferred out of Intake.

For Carrying EWs: Data entry for the new exemption is done by the ES in the ES subsystem, but the EW has to run EDBC, re-evaluate back to the appropriate month and authorize the case. The ES will notify the EW by phone and email to take this action. Copy the EW and ES supervisors on the email.

The Carrying EW mails the Time on Aid notice, the TEMP M40-107a. This is sent when making adjustments to TOA clocks. This NOA explains the change in the exemptions rules and provides information regarding the adult's remaining time on aid.

JOBS NOW! Referrals: The Intake EW will refer denied clients directly to WDD and the 800 number for JOBS NOW! (1-800 JOB-1NOW). All Intake clients get the JOBS NOW referral form, but Intake EWs need to explain to clients that only denied clients will need it. Approved clients will go to Orientation and will be referred to JOBS NOW there. They should not call the 800 number or go to WDD directly.

Carrying refers all eligible clients to their ES who will determine JOBS NOW eligibility. Carrying should refer all CalWORKs ineligible clients directly to WDD and the 800 number.

Carrying EWs do not need to refer Safety Net clients to WDD or the 800 number.

A link to the How-To titled "EW: Temporary WTW Exemption" is [here](#).

C. Recommend case for approval

1. Complete initial filing and all other case related work including resolving as many issues as possible.

2. Complete TOA if:

- No previous record
- Recent SF history only
- No child support
- TOA shows 12 months or less

(Note: If TOA more complex than above listing, EW transfers case without TOA. Receiving ES will complete TOA and/or refer case to TOA Coordinator.)

3. Forward completed 4003 and file to Supervisor for approval.

IV. Supervisor Approval

- As soon as possible, but within no more than 24 hours, Supervisor must:
- Review case file
- Approve case or return to worker for corrections.
- Upon approval sign SAWS 2 and CalWORKs Case Transfer Instructions (4003).
- Send file and 4003 to Intake Clerk.

V. Intake Clerk begins transfer process

As soon as possible, but within no more than 24 hours, Clerical Staff must:

- Assign to ES according to case distribution protocol and record ES.
- Schedule participant for CalWORKs Orientation within 7 working days of Approval NOA or as soon as Orientation schedule allows.
- Enter GIS notice # 034 for English language and mail Orientation Letter (7201CW) to language participant
- Make two (2) copies of signed 4003. Send to Unit Supervisor and ES.
- Send copy of language Orientation Letter (7201CW) to ES. English GIS turnaround will go to assigned ES.
- Return file and signed 4003 to EW.

VI. EW - Transfer Case out of Intake

As soon as possible, but within no more than 24 hours of receiving case back from Intake Clerk, the EW will:

- File turnarounds and ensure all forms are complete and documents filed appropriately.
- Check MEDS to ensure Medi-Cal and Food Stamps are active.
- If there is an issue in MEDS, e-mail MEDS Coordinator with detail and print a copy for case folder.

- Send case and signed 4003 to Supervisor for transfer.

VII. Supervisor - Transfer case out of Intake

As soon as possible, but within no more than 24 hours of receiving case back from the EW, the Supervisor will:

- Check case
- Forward signed 4003 and file to Intake Clerk

VIII. Intake Clerk - Transfer case out of Intake

As soon as possible, but within no more than 24 hours of receiving case from Supervisor, Intake Clerk will:

- Log transfer
- Change EW in CDS to ES listed on 4003
- Send file to new Unit Clerk

IX. Forms Referenced

CalWORKs Case Transfer Instructions (4003)

Intake WTW Informing (4072)

Medical Report (CW 61, 61 A, 61 B)

Orientation Letter (English: GIS 034; languages: 7201CW)

Welfare-To-Work Program Notice (WTW5)

51- Eligibility Determination

CalWORKs Eligibility Handbook	Case Transfer Requirements for WtW 50-43
	Effective: 2-21-19

51-1 Deprivation of Parental Support or Care

Deprivation of support or parental care is a separate, specific and mandatory eligibility factor. A child's deprivation is based on the status of parent or parents, or on his relinquishment for adoption. Bases of deprivation have been established and are outlined below. If there is more than one basis of deprivation, all shall be considered at the time of application and at the time of each redetermination of eligibility. When there is more than one basis of deprivation, choose the basis that ensures federal eligibility. Regardless of the basis of deprivation upon which the child is determined eligible, the requirements for securing absent parent support remain unmodified, except in the case of the child relinquished for adoption.

I. Basis of Deprivation

A child is considered deprived of parental support or care if:

- A. The child has been relinquished for adoption.
- B. Either parent is deceased.
- C. Either parent is physically or mentally incapacitated.
- D. The parent who is the principal wage earner is unemployed.
- E. Either parent is continually absent from the home in which the child is living.

II. Definitions and Responsibilities

A. Parents

"Parent" means either the father or the mother, natural or adoptive, whether married or unmarried. Deprivation is based on the person presumed to be the legal parent, unless rebutted by a statement of the mother or a court order. Assistance of the District Attorney should be requested if there is a problem in determining the person presumed to be the legal parent. Cases involving a child born out of wedlock without a signed Declaration of Paternity shall be referred to the District Attorney.

The law presumes that a man who was married to the mother is the father when the child was born during the marriage or within 300 days of the termination of the marriage or dissolution, annulment, or divorce. In addition, the man is presumed to be the father if he signs the Declaration

of Paternity and/or consents to being named the father on the birth certificate or receives the child into his home and openly holds out the child as his natural child. These presumptions can be refuted by clear and convincing evidence.

All parents, regardless of their age or their marital status, are responsible--to the extent of their ability--for the support and care of their children, including a child who is in foster care. This responsibility continues even though the parent is not living with his child, the marriage of the parents has been legally dissolved, the parents were never married, or there has been a court order removing the child(ren) from the parent's custody. Responsibility ceases only when a relinquishment for adoption is in effect. The parents of an unwed minor are required to support their child, but are not responsible for their grandchildren.

B. Stepparent

A stepparent is a person who is married to the parent of a child of whom he is not the parent.

III. Termination of Deprivation

Regulations provide for a readjustment period not to exceed three months when deprivation due to relinquishment, incapacity, or absence ceases. The purpose of the readjustment period is to enable aid and service to be provided in order to help the family to become re-established and to eliminate situations that will cause the family to have need for further public assistance. Assistance may continue during the readjustment period provided the family continues to be in need.

CalWORKs Eligibility Handbook	Relinquishment for Adoption 51-4
	Effective: 3-1-98

51-4 Relinquishment for Adoption

Deprivation due to relinquishment of a child for adoption is a basis of deprivation. It exists when:

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I. Relinquishment of a child to a county adoption agency has been signed; or

II. Relinquishment of a child to a private adoption agency has been signed; and

A. The child was receiving AFDC/ TANF/ CalWORKs at the time of the relinquishment;

or

B. The agency has certified in writing that the child is unplaceable for adoption.

Termination of deprivation due to relinquishment ends when the child is placed for adoption or when relinquishment is terminated.

A copy of the signed statement from the adoption agency that the child has been relinquished for adoption shall be necessary to support a determination of deprivation.

CalWORKs Eligibility Handbook	Deprivation Due to Death 51-6
	Effective: 3-1-98

51-6 Deprivation Due to Death

Deprivation due to death of either parent is a basis of deprivation. A copy of the death certificate is necessary to support a determination of deprivation.

If both parents are deceased, the caretaker must be a defined relative; otherwise, foster placement must be considered. If the child is living with a relative other than a parent and either parent is living, then a child support referral must be considered.

An application for any possible Social Security Benefits must be made and the possibility of Veterans' Benefits, using a Form CA-5, Veterans' Benefits Verification and Referral, should be explored.

I. How To Secure A Death Certificate

If the client does not have a death certificate in his possession, it will be necessary to secure one. The procedures or securing verification are outlined below.

A. If Death Occurred in San Francisco

1. Complete Form 806, Death Verification, in duplicate.
2. Place the original in the designated collection point for the unit clerk. Retain the copy in the IM record. The information will be secured from the San Francisco Department of Public Health and returned to the worker.

B. If Death Occurred Outside the County and/or State

1. Complete a Form VS-112, Application for Certified Copy of Death Record, in duplicate. Retain the copy for the case record.
2. Address an envelope to the appropriate office of vital records in the state where the event occurred. See Section 59-30 for a list of various state offices (or refer to the Public Welfare Directory). For California (other than S.F. county) use this address:

State Department of Health Services
Office of Vital Records
304 S Street
Sacramento, California 95814

The fee is \$8.

3. Complete a Form 4028, Request for a Check, in duplicate.
4. Attach a return self-addressed envelope with your worker number in the lower left-hand corner.
5. Forward all of the above to the cashier's office in the Accounting division.

II. Other Documentation

If the worker has any questions concerning the validity of a certificate, if it appears to have been tampered with or appears fraudulent in any way, the procedures outlined above should be followed.

Other reliable documentation may include an award letter from the Social Security Administration based on the death of the parent or a newspaper account of the parents' death. This may assist in expediting a claim for assistance; however, it is recommended that a death certificate still be obtained to substantiate the claim.

CalWORKs Eligibility Handbook	Deprivation Due to Physical or Mental Incapacity 51-8
	Effective: 3-1-98

51-8 Deprivation Due to Physical or Mental Incapacity

Incapacity is a basis of deprivation of support and care. It is a physical or mental illness, defect or impairment that reduces substantially, or eliminates entirely, the parent's ability to support or care for the child for a period which is expected to last at least 30 days and which is supported by acceptable evidence. The 30-day period is not intended to be a waiting period. Deprivation due to incapacity may not be established if the illness is not expected to last 30 days; if the illness, in fact, lasts longer, payment shall be granted retroactively, effective the correct beginning date of aid.

I. When Deprivation Exists

Deprivation exists if the incapacity:

- A. Prevents the parent from working full-time at a job in which he/she has been customarily engaged, and from working full-time on another job for which he is equipped by education, training or experience, or which can be learned by on-the-job training; or
- B. Is the reason employers refuse to employ the parent for work that he/she could do. This includes behavioral disorders which interfere with the securing and maintaining of employment; or
- C. Prevents the parent from accomplishing as much on a job as a regular employee and is the reason the parent is paid on a reduced basis even though working full-time; or
- D. Qualifies the parent and he/she is employed in a job which is rehabilitative, therapeutic or in a sheltered workshop not considered to be a full-time job; or
- E. Eliminates or reduces substantially the parent's ability to care for the child(ren).

II. How To Determine Incapacity

The determination that incapacity exists shall take into consideration the limited employment opportunities of handicapped individuals and be based upon acceptable evidence. All verifications of incapacity shall be documented in the case record. Incapacity shall be based on the following acceptable evidence:

A. A completed copy of the Form CA 61, Medical Report, or other written statement from physician, licensed or certified psychologist, or by an authorized member of his staff with access to the patient's medical records, that provides information sufficient to substantiate the determination of incapacity and includes the following:

1. Diagnosis of the condition and an explanation of the extent to which it prevents him from engaging in employment or why it reduces substantially, or eliminates, the patient's ability to support or care for the child(ren).
2. The expected duration of the condition and the date of the next scheduled examination or appointment.
3. The doctor's name, address, and phone number.

B. A finding of eligibility for OASDI, SSI/SSP, Workers Compensation, or SDI benefits based upon the parent's disability or blindness. Such evidence is conclusive of incapacity for eligibility purposes when verified by the authorizing agency.

III. Documentation of Evidence

Verification of all facts pertinent to a finding of incapacity of the parent(s) shall be recorded on the Statement of Facts, and, where appropriate, on supporting documents, such as the CA 61, and photocopied material filed in the case record.

If a written statement cannot be obtained without delay, for reasons beyond the control of the client, a verbal statement from the physician, licensed or certified psychologist or an authorized staff member with access to the client's medical records, verifying incapacity, may be accepted pending written verification up to a maximum of 60 days.

If obtained verbally, documentation must include the date verification was obtained, the name of the person who supplied the verification, and the name of the worker who obtained the information.

IV. Review if Incapacity

A. Even if the individual's incapacity is expected to last more than one year, it is to be reviewed at the annual reinvestigation.

B. If the condition is not expected to last more than one year, a review is to be completed at the time the condition is expected to end or earlier if there is reason to believe there has been a change in the condition.

CalWORKs Eligibility Handbook	Deprivation Due to Unemployment of a Parent 51-10
	Effective: 3-1-98

51-10 Deprivation Due to Unemployment of a Parent

Unemployment is a basis of deprivation. The requirements of this section apply to all applications for aid where the basis of deprivation is unemployment and both parents of a child live in the home, whether or not they are included in the Assistance Unit (AU).

I. Definition of Unemployed Parent (EAS 41-440.1)

An unemployed parent (U-parent) is a natural or adoptive parent with whom the child is living and who is also the principal wage earner (PWE). An unemployed parent:

A. Is the principal wage earner.

The principal wage earner is one of the two parents living in a home of a child who earned the greater amount of income in a 24-month period, the last month of which immediately precedes either:

- The month of application for aid on the basis of the unemployment of a parent; or
- The date in which a family's circumstances have changed in such a way as to change the deprivation of the case to unemployment, for example, the absent parent returns to the home.

1. When neither parent qualifies as the principal earner because both parents earned an identical amount of income in such 24-month period, or neither parent had earnings in this period, the eligibility worker designates which parent is the principal earner. The following guidelines apply:

- a. If no income was earned by either parent in the 24 month period outlined above, income earned prior to the 24 months can be used to determine the PWE.
- b. Once the principal earner has been determined, that parent continues to be the principal earner for each consecutive month for which the family receives aid.

2. The date of application for the purpose of determining the principal wage earner is the latest date of application or request for aid, interprogram status change, or interprogram transfer. The latest date of application is used even if there has been a break in aid for only one day. An "application" for this purpose is not limited to taking a SAWS-1 or SAWS-2, but can include any method of requesting aid, such as a CW 7, CW 8, or other documented contacts.

3. A PWE determination is made in the following situations:

- a. When a continuing case becomes a U-parent case because an absent parent returns home;
- b. When a parent is no longer incapacitated and deprivation changes back to unemployment;
- c. When there has been a break in aid of one day or more. (The PWE will be based on the 24-month period that precedes the new restoration/application request month.)

4. If the principal earner is not meet the definition of an unemployed parent, unemployment may not be used as a basis of deprivation. If no other basis of deprivation exists, the AU is ineligible.

B. Meets the definition of "unemployed":

- 1. Is not currently employed; or
- 2. Is currently employed fewer than 100 hours per calendar month.
- 3. Is employed 100 hours or more in the current calendar month, but the hours exceeding 100 are of a temporary nature and the PWE has worked fewer than 100

hours in each of the two previous months and is expected to work under 100 hours in the following month.

NOTES:

The PWE must be employed fewer than 100 hours, but the other parent can work more than 100 hours if financial eligibility requirements are met.

C. Is not currently on strike.

If the parent is on strike or unemployed due to a strike in which he is voluntarily participating, there is no deprivation and the case is ineligible. (See Section 52-16, Strikers.)

D. Has been unemployed for at least 28 consecutive days.

The 28 day-period begins the first day of a calendar month in which the PWE worked less than 100 hours.

Examples: If the U-parent was laid off in the month before the month of application, but worked more than 100 hours prior to the lay-off, the 28-day waiting period would start the first day of the month of application. The application would be approved effective on the 29th day. If the U-parent was laid off in the month before the month of application, but worked less than 100 hours prior to the lay-off, the 28-day waiting period would have started the first day of the month of the lay-off. The application can be approved, then, effective the day of the application, since the 29th day would have already passed.

E. Has cooperated in applying for and/or receiving UIB, when determined to be eligible for it.

II. Acceptable Evidence of Unemployment of a Parent (EAS 41-440.5)

The evidence necessary to support a determination that the child is deprived of parental support and care due to unemployment of a parent can be:

A. A statement from employers that indicates:

1. The number of hours worked per month and per week or, if the applicant is still employed, the number of hours working per month and per week.
2. The date and reason for leaving if applicant is no longer employed.

3. That additional hours of work were not offered.

B. A statement from EDD which indicates the amount of UIB received by the PWE for one year prior to the date of application for aid and the amount, if any, being received on the date of application.

III. Continuing U-parent Cases

The factors which establish the deprivation of unemployment should not be used for recipients of aid whose eligibility is already based on it. For example, a PWE may start working over 100 hours per month, but the family can remain eligible (as long as the entire AU is still income-eligible). However, if there is a break-in-aid of even one day, the family reverts to "applicant status" and may no longer be eligible (aid can be restored for any members of the AU who are eligible based on another deprivation).

CalWORKs Eligibility Handbook	Deprivation Due to Continued Absence of Parent(s) 51-16
	Effective: 3-1-98

51-16 Deprivation Due to Continued Absence of Parent(s)

Deprivation due to the continued absence of a parent(s) from the home is a basis of deprivation of parental support and care.

I. Definition of Continued Absence

"Continued absence" exists when the natural parent is physically absent from the home and the nature of the absence results in an interruption or termination of the parent's functioning as a provider of maintenance, physical care, or guidance for the child, regardless of the reason for the absence or the length of time the parent has been absent, and the known or indefinite duration of the absence precludes counting on the parent's performance in planning for the present support or care of the child.

A. Situations in which Continued Absence exists

For purposes of eligibility, "continued absence" shall be considered to exist even when:

1. The parent who is physically absent from the home remains in contact with the child through regular or frequent visitation;
2. The child lives with each parent for alternating periods of time;
3. The parent who is a convicted offender is permitted to live at home while serving a court-imposed sentence by performing unpaid public work or unpaid community service during the workday. (This parent could also be eligible.)

B. Situations in which Continued Absence does NOT exist

For purposes of eligibility, "continued absence" does not exist when:

1. One parent is physically absent from the home on a temporary basis, such as trips, visits, or temporary assignments undertaken in connection with current or prospective employment (EAS 82-812);
2. A parent is absent for the sole reason of performing active duty in the uniformed services of the United States.
 - a. "Uniformed service" means the Army, Navy, Air Force, Marine Corps, Coast Guard, National Oceanographic and Atmospheric Administration, and the Public Health Service of the United States.
 - b. When an individual provides appropriate evidence to establish that continued absence would exist irrespective of the parent's performance of active duty in the uniformed service of the United States, continued absence shall be considered to exist.

C. Factors to Consider in Determining Whether Continued Absence Exists

When a question exists regarding continued absence of a parent, various factors may be considered, such as, but not limited to:

1. Does the parent provide day-to-day care and control of the child?
2. Do the parents maintain separate homes?
3. Do the parents have separate mailing addresses?

4. Do the parents maintain their money separately?
5. Do the parents have access to each others' income or resources?
6. Is the parent absent due to hospitalization; attendance at school, visiting; vacationing; or moving or trips made in connection with current or prospective employment?

Other similar factors may also be considered. More than one factor may be required before a determination can be made.

II. Circumstances the Meet the Definition of Continued Absence

Continued absence of a parent from the home includes, but is not limited to, the following circumstances:

- A. The parents are not married to each other and have not maintained a home together.
- B. The parent:
 1. Is not legally able to return to the home because of confinement in a penal or correctional institution; or
 2. Has been deported; or
 3. Has voluntarily left the country because of the threat of, or the knowledge that, he or she is subject to deportation.
- C. A parent has filed, or retained legal counsel for the purpose of filing, an action for dissolution of marriage, for a judgment of nullity, or for legal separation.
- D. The court has issued an injunction forbidding the parent to visit the custodial parent or child.
- E. The remaining parent has presented a signed, written statement that the other parent has left the family and that the nature of the absence falls within the definition of "continued absence."
- F. Both parents are physically out of the home and their whereabouts are unknown.

III. Evidence Required to Determine Continued Absence

The written statement of the applicant or recipient parent may be considered sufficient evidence of "continued absence" of the other parent, unless conflicting information is known to the county or reasonable doubt indicates that further evidence is necessary. If conflicting information is known to the county or reasonable doubt indicates that further evidence is necessary, the written statement of the applicant or recipient parent must be supported by at least one of the following:

- A. Additional evidence which may include written statements of the absent parent or other persons with prior knowledge of the family relationship; or
- B. Evidence of the actions of the applicant or the recipient or the absent parent that clearly indicate not only the physical absence of the other parent, but also the continued nature of the absence as defined in Item I of this section.

IV. Beginning Date of Continued Absence

Deprivation due to "continued absence" exists as of the date that one of the circumstances in Item II of this procedure occurs, as demonstrated by evidence presented in accordance with Item III.

CalWORKs Eligibility Handbook	Age Requirements 51-20
	Effective: 6-25-09

51-20 Age Requirements

There are no age requirements for parents/caretaker relatives. A child (married or unmarried) is eligible on the basis of age until his/her 18th birthday. Nineteen and 20-year-olds are never eligible as children. Eighteen-year-olds are eligible if they meet certain conditions.

Eligibility Requirements for 18-Year-Olds

An 18-year-old is eligible as a child only if he/she is attending a full-time high school program or a vocational/technical program (if he/she has not completed high school), provided that either the high school program or the vocational/technical program can be completed before reaching age 19.

I. High School Attendance

An 18-year-old is eligible if he is attending high school on a full-time basis. Full-time attendance is defined by the school: a student is considered to be attending full-time until enrollment is terminated by the school or the student.

- A. An 18-year-old must be able to complete the high school program before his 19th birthday.
- B. The school requirement cannot be met by correspondence work.

II. Vocational/Technical Program Attendance

If an 18-year-old has not completed high school, and is attending a full-time vocational/technical program, he/she is eligible provided the following two conditions are met:

- A. The program will not result in a college degree. (Courses given at City College generally provide credit for a college degree. Courses given by the Community College System generally provide vocational/technical training which does not result in college credit.)
- B. He can reasonably be expected to complete the vocational/technical program before reaching age 19. Vocational/technical program requirements cannot be met by correspondence work.

III. Examples

- A. An 18-year-old who will be 19 in August is attending high school, and, according to the school, is expected to graduate in June. The 18 year old remains eligible until he graduates in June.
- B. In April, an 18-year-old who will be 19 in August, is attending high school but the school reports that due to the number of courses the student must complete before graduation, the individual will not be able to graduate until February. The 18-year-old is ineligible and is discontinued from the case effective the end of the month after his 19th birthday.

C. An 18-year-old who will be 19 on May 6 is expected to graduate from high school in June. The 18-year-old is ineligible because graduation will occur after his 19th birthday.

D. In April, an 18-year-old who will be 19 in August, and who has not completed high school, is attending a vocational program at a beauty school which will be completed in June. The 18-year-old remains eligible until she graduates in June.

NOTE: for certain exceptions, see Section 51-21.1, II.

CalWORKs Eligibility Handbook	How to Establish Age 51-20.1
	Effective: 3-1-98

51-20.1 How to Establish Age

Determination of a child's age shall be based on acceptable evidence including, but not limited to, the following, which the worker determines to be substantive and genuine.

I. Acceptable Evidence of Age

- A. Birth certificate
- B. Certificate of baptism or church record of baptism
- C. Confirmation papers or church record of confirmation
- D. Family Bible or genealogical records
- E. Affidavit of a reputable person if it is based upon his personal knowledge of facts and not merely a statement of belief
- F. United States census records
- G. School records
- H. OASDI records
- J. Immigration and naturalization records

- K. Passport
- L. Court records
- M. Adoption decree
- N. Insurance policies
- O. Employment records and licenses
- P. Newspaper records and local histories
- Q. Indian agency records
- R. Other governmental or local records

Obtaining Birth Certificates - see 51-20.2

CalWORKs Eligibility Handbook	Birth Certificates - How to Obtain Documents 51-20.2
	Effective: 1-28-16

51-20.2 Birth Certificates - How to Obtain Documents

Birth Certificates - How to Obtain Documents

This section describes the procedure for requesting birth certificates for CalWORKs participants. The section covers three topics:

- I. **Requesting a birth certificate for someone born in San Francisco County.**
- II. **Requesting a birth certificate for someone born in another California county**
- III. **Requesting a birth certificate for someone born in another state**

I. To request a birth certificate for a person born in San Francisco, staff must have the following information: being requested, e.g. parent or child.

First and last name of the person whose birth certificate is being requested, e.g. parent or child

- Month/Day/Year of birth
- Mother's maiden name
- Date requested
- Case name and case number
- ES/EW name, worker number, and phone number

This information must be entered into a template located on the HSA Intranet. The template must be completed and then forwarded to the lobby clerk supervisor as an email attachment. This action must be narrated in CalWIN.

Staff must print a copy of the completed template before sending it via email. Copy needs to be indexed and scanned into iFiles.

To access the template, go to the HSA Intranet homepage. Go to the CalWORKs page, and find the template listed there under Program Topics.

All requests for San Francisco birth certificates must be processed using this procedure.

Incomplete templates will be returned to staff for correction. It is the worker's responsibility to make the required corrections and resubmit the request. These actions must be narrated in CalWIN.

There is no check needed for these birth certificate requests as HSA has an account with the Department of Public Health for payment.

II. To request a birth certificate from other California counties, the EW/ES needs to:

- Complete a VS 111 form
- Place a copy of the complete VS 111 in the case record

- Request a check to be issued by the DHS cashier at 1650 Mission, using Form 4028/ The check request should be made payable to Vital Records. This form is to be routed to the cashier, along with the VS 111. The cashier will process the check request and mail it to Sacramento for processing.
- Be sure to include a yellow-striped return envelope inside a standard DHS white mail envelope with the VS 111 and Form 4028. Be sure to include the worker number on the yellow return envelope.
- The issuing authority will mail the birth certificate back to the worker using the yellow return envelope.
- California birth certificates are to be requested from Sacramento; not from individual counties.

California now offers **two kinds** of birth certificates: **certified** and **certified informational copy**. The certified ones have an official seal affixed, and are valid to prove identity, obtain a passport or other official identity documents. Certified informational copies have no seal, do not prove identity, and are used only to verify a birth record.

For CalWORKs eligibility purposes, **the certified informational copy** is sufficient to comply with Program requirements. (NOTE: if a person needs a birth certificate to obtain an identity document, such as a California ID or Driver's License, the **certified** birth certificate is required. this may apply to certain Welfare to Work activities.

NOTE: Notarization of requests for California birth certificates from a county welfare department is no longer required.

ACIN I-90-15, states that the local registrars or county recorders need to issue birth certificates without a fee to a person that can verify they are homeless. HSA is considered an agency that can verify homelessness. At the request of a homeless client fill out the affidavit in ACIN I-90-15, sign it and have client sign for client to receive a free birth certificate at this office:

**SAN FRANCISCO OFFICE OF VITAL RECORDS
101 GROVE STREET, ROOM 105
SAN FRANCISCO, CA 94102**

III. To request a birth certificate from another state:

Staff must use the HSA Intranet. Go to the Intranet Home Page, click to the CAAP page, and select "Birth Certificate Requests". Here staff will find a list of states, with an instruction page and a Form page for each state. Staff should select the desired state's instruction page and then read the instructions on how to request a birth certificate from that particular state. Staff must then print the required state form and complete it.

Hints for requesting birth certificates from other states

All states allow individuals to request their own birth certificates. If assisting a client in requesting his or her own birth certificate, the client will sign the request. This also applies to a parent requesting a copy of his or her own child's birth certificate.

Some states require a photocopy of a driver's license or official state ID to accompany the request. In these cases, send a copy of the **client's** ID.

If the client has no valid ID or no documentation acceptable to the particular state, the worker may complete the form for the client. Each state's form has a space to indicate that the request is being made on behalf of someone else. Make sure to indicate this in the appropriate place as directed on the state's form. Look for the place on the form where it asks for the relationship of the requester to the person whose birth certificate is being requested. The appropriate response is "Social Service Agency". In these cases, the worker will need to make a copy of his or her **DHS ID** and send it along with the request that the **worker** will sign.

Some states may require notarization of a signature on a birth certificate request form. Staff needing this service should contact lobby clerk supervisor for assistance. The worker number is CX40, and the phone extension is 7-5906.

Some states offer both uncertified (or certified informational copy) certificates. As stated above, an uncertified copy is sufficient to comply with CalWORKs eligibility requirements.

Requests for checks should be made using the same process as in II, above. Staff must send the cashier all required forms to mail along with the check.

CalWORKs Eligibility Handbook	School Attendance and Performance Requirements 51-21.1
	Effective: 8-2-16

51-21.1 School Attendance and Performance Requirements

(EAS 40-105.5)

Effective 6/17/15 - Do not request school verification for any minors.

Effective January 1, 2015, CalWORKs Assistance Units (AUs) will not have their grant reduced when the CWD learns that a child under 16 years of age is not regularly attending school per ACL 15-22. (Also refer to [BENDS PPM 37226 - Elimination of School Attendance Penalties, issued 7/26/16](#))

Teens ages 16 or 17 who fail to attend school regularly or who have completed high school or its equivalent are required to participate in the Welfare to Work (WTW) program (MPP 42-719).

If evidence has been provided that a child age 16 years of age or older has not been attending school and is deemed a chronic truant pursuant to Section 48263.6, the needs of the child shall not be considered in computing the grant of the family.

Use NOA's M40-105D1 (1/15) – School Attendance – Grant Increase Due to Change in Law and M40-105E (1/15) – School Attendance- Grant Decrease – Required Documentation - Use the NA 200 (4/13) budget for AUs with no income or with steady monthly income and the NA 1239 SAR (10/12) for other AUs with income.

Note: This update replaces PIM 15-01 from 1/15/15.

- **Effective January 1, 2015, school attendance verifications are no longer eligibility requirements.**
- Do not sanction clients for not providing school attendance and performance verifications at intake or at annual redetermination (RRR).
- Do not request school verification at intake or RRR.
- For all cases with a school attendance penalty imposed prior to January 1, 2015, for children under 16 years of age, the penalty must be lifted as of January 1, 2015, and the parent's portion added back to the grant on January 1, 2015.
- For all cases with a school attendance penalty imposed prior to January 1, 2015, for a child 16 years of age and older, the penalty must be lifted once the CWD receives verification the child is no longer deemed a chronic truant pursuant to Section 48263.6 or meeting at least one of the exception criteria.
- Inform applicants and recipients of California's compulsory education law, which requires everyone between the ages of six and 18 years of age to attend school, except 16 and 17 year olds who have graduated from high school or passed the California High School Proficiency Exam (CHSPE) and obtained parental permission to leave.
- Refer all pregnant and parenting teens to CalLearn.
- A child shall be presumed to be attending school unless he or she has been deemed a chronic truant pursuant to Section 48263.6 of the Education Code.
- If evidence has been provided that a child age 16 years of age or older has not been attending school and is deemed a chronic truant pursuant to Section 48263.6, the needs of the child shall not be considered in computing the grant of the family. This shall apply for any month in which the CWD is informed by a school district or a county School Attendance Review Board that the child did not attend school, unless at least one of the following exception criteria exists:
 - The CWD is provided with evidence that the is no longer chronically truant pursuant to Section 48263.6
 - The CWD is provided with evidence that the child has been attending school;
 - Good cause for school nonparticipation exists at any time during the month.

- Any member of the household is eligible to participate in the family stabilization program for any reason, including other siblings and parents;
- The CWD is provided with evidence that the child, parent, or caregiver is complying with requirements imposed by a School Attendance Review Board, the County Probation Department, or the District Attorney; or
- A member of the household is cooperating with a plan developed by a county child welfare agency such as Juvenile Probation, County Child Protective Services or Foster Care, etc.
- A child, whose needs have not been considered in computing the grant of the family, shall remain eligible for services that may lead to attendance in school.
- As of 6/17/15 do not ask for school verification.

I. Special Requirements for 16-18 Year-Olds.

Children 16-18 years old who are not attending school are required to attend school or participate in Welfare to Work (WTW) activities.

Certain disabled 18-year-olds in school full time may continue to be an eligible child in a parent/caretaker's AU, regardless of academic progress. **Certain 18-year olds are considered disabled under a 2004 lawsuit (Fry v Saenz). Students who turn 18 but are not expected to graduate, turn 19, or stop attending school full time, whichever comes first.**

Identifying and aiding disabled 18-year-olds who are attending school full time:

1. Children who currently receive or have received SSI/SSP benefits are considered disabled. Parent/caretakers must cooperate to obtain verification of receipt of SSI/SSP benefits if it is not available through MEDS. Past or present 18-year-old recipients of SSI/SSP who attend school full time continue to be an eligible child in their parent/caretaker's AU. Verification of full-time attendance in school is required.

- a. To verify in MEDS, Log on to MEDS. Go to the INQR screen. Enter the child's Social Security number. Select the QE screen. Look at "SSI Last Received" to see if SSI/SSP is or has been received.
2. Children who currently receive or previously received services through a Regional Center Program pursuant to the Lanterman Act are considered disabled. Parent/caretaker relatives must cooperate to obtain verification of receipt of services. Verification may include a statement from the Regional Center stating that the child is currently or has in the past received services.
3. Children who currently receive services at school in accordance with their Individual Education Plan (IEP), or receive services pursuant to Section 504 or the Rehabilitation Act (i.e. a Section 504 Plan, or Section 504 Accommodation Plan), or have received such services, are considered disabled.
 - a. Parent/caretaker relatives can provide a copy of the child's IEP or Section 504 Plan, or cooperate to obtain verification from the school that there is or has been an IEP or Section 504 Accommodation Plan/Section 504 Plan in place for the student.
4. When a child's disability cannot be verified by the criteria described above, the parent/caretaker can provide independent verification of a current or past disability by a health care provider, or a qualified learning disabilities evaluation professional. They may also authorize the use of the CW 61 to obtain information to verify the child's disability.

NOTE: For pregnant and parenting teens: These individuals who are 18 or are approaching their 18th birthday and are not expected to graduate from high school or vocational school by age 19, continue to have the option of establishing their own AU. They must continue to be informed of their possible continuing eligibility options.

II. Cal-Learn

Pregnant minors and minor parents have been exempt from school verification requirements, since they should be eligible for Cal-Learn. The Cal-Learn program provides any necessary incentives, penalties, and intervention services relating to school progress.

Any minors identified as Cal-Learn eligible during this verification process should be referred to the Cal-Learn program. (Also see Section 51-22.2)

III. Possible Outcomes

There are several possible outcomes for each child in this school verification process:

- Identification of Cal-Learn eligibility and referral to that program (code TN field and call 401-4878)
- Identification of ineligible 18 year old (deletion/discontinuance)
- 16 to 18 year old students identified as chronic truant pursuant to Section 48263.6 and is to be referred to WtW activities, unless good cause exists –see above.

IV. Notices of Action (NOAs)

M40-105D1 (1/15) – School Attendance – Grant Increase Due to Change in Law

This NOA was created to inform recipients who have a penalty applied to the AUs grant amount and the grant amount will be increasing due to the law change. The NOA informs the recipient of the change in law and the AU's new grant amount. Use the NA 200 (4/13) budget for AUs with no income or with steady monthly income and the NA 1239 SAR (10/12) for other AUs with income.

V. Workaround for CalWIN

CalWIN processes applies a penalty to a CalWORKs case when the 'Attendance Information' tab in the **Collect Student Detail** window indicates a child is not enrolled full time or attending regularly at RRR or on request. Please click on the following link for the workaround to ensure the CalWORKs grant is not reduced when a child under

age of 16yrs is not regularly attending school: [How To: School Verification workaround.doc](#)

References:

ASSEMBLY BILL (AB) 2382 (CHAPTER 905, STATUTES of 2014); WELFARE AND INSTITUTIONS CODE SECTIONS 11253.5; AND MANUAL OF POLICIES AND PROCEDURES (MPP) SECTION 40-105.5; ALL COUNTY LETTER (ACL) No. 14-12; ACL 15-47, BENDS PPM 37266

CalWORKs Eligibility Handbook	Cal Learn
	Effective: 2-21-19

51-22.2 Cal Learn

I. Eligible Teens must be referred to Cal Learn

The Cal Learn program is mandatory for pregnant or parenting teens under the age of 19 who are on cash aid and have not earned a high school diploma or GED. From time to time, a pregnant or parenting teen is not enrolled in Cal Learn at Intake or when the pregnancy is reported to the Carrying worker. If it is discovered that a pregnant or parenting teen should have been enrolled in Cal Learn but was not, the worker should take immediate action and refer the teen to the Cal Learn program. This action includes pregnant or parenting 18-year olds who were erroneously referred to WTW.

II. Referral Procedure

When identifying a pregnant or parenting teen:

- Email the Cal Learn Program Manager, and verify that the Cal Learn status is "approved".
- Tell the teen that a Cal Learn case manager will contact her.
- Give the teen the brochure "Reach for Your Dreams with Cal Learn" (7305 CW)
- Refer the pregnant or parenting teen to the Public Health Nurse, at 557-6351, located at 170 Otis on the first floor. The nurse will provide assistance with prenatal care and advice on diet and health issues.

III. DHS Cal Learn Model

The DHS Cal Learn Case Managers will provide services according to the Adolescent Family Life Program (AFLP) standards adopted by the California State Department of Maternal and Child Care Health and administer the Cal Learn regulation.

The communication between Cal Learn and CalWORKs EW/ES is essential. Eligibility Workers and Employment Specialists must communicate with the assigned Cal Learn Case Manager regarding any case status changes. Put the communication with the assigned Cal Learn Case Manager in writing and keep a copy of the email in the case folder.

Cal Learn issues bonuses and penalties to clients on active cases and Cal Learn Case Managers need to know about case transfers or case discontinuances and closures.

Communication to and from Cal Learn Case Managers should be documented in the CalWIN Case Comments.

IV. TAPP Services

TAPP continues to be the AFLP provider for pregnant and parenting teens in San Francisco who are not recipients of CalWORKs. TAPP also continues to provide a network of services to the pregnant and parenting teens, their siblings, and the father of the baby/child. Teens are eligible for TAPP AFLP services until age 20.

The DHS Case Managers and TAPP Case Managers will coordinate services as needed. Teens will continue to be eligible to enroll at Hilltop School, the SFUSD program for pregnant and parenting teens.

When eligibility for CalWORKs changes, the case manager of the sending agency will facilitate the transfer of the case between Cal Learn and TAPP.

V. Transitions

The following targets, when met, will ensure smooth transitions:

(CW=CalWORKs EW); (CL=Cal Learn worker)

CW to CL within one week of having an eligible CL participant in "approved" state. The status must be changed to "approved" for CL prior to making a referral for CL services. Workers must verify that the teen parent is indeed pregnant/parenting and younger than 19 years old.

CW to CL within one week of opening a CL case.

CL to CW within one week of discontinuance or return to active CW case.

CL to CW within one week of a referred client is a no show for CL Orientation.

CL to CW within one week of WTW eligibility (finished CL or aged out).

CW to CL within one week of receiving school verification or not receiving verification

VI. Transition to WTW

When a Cal Learn teen completes Cal Learn through obtaining either a high school diploma or a GED, or ages out of Cal Learn at age 20, she becomes a mandatory WTW client unless exempted.

The Cal Learn Case Manager begins the transition by de-registering the teen from Cal Learn in CalWIN. The EW completes the transition in CalWIN so that the teen is enrolled in WTW.

Cal Learn How-To's: (How To's can be access on the SharePoint application. Click on this link: [CalWORKs How To's](#))

How to Assign a Cal Learn Program to a Case Manager (084.CW.1)

How to Assign an Activity to a Cal Learn Program (085.CW.1)

How to Record Attendance (086.CW.1)

How to Approve a Cal Learn Bonus (087.CW.1)

How to De-register a Cal Learn with HS diploma by EW (088.CW.1)

How to Report Card Incomplete (089.CW.1)

How to Report Card not Returned (090.CW.1)

How to Report Card Returned Inadequate Progress/No Good Cause (091.CW.1)

How to Report Card Returned Inadequate Progress/Good Cause (092.CW.1)

How to Complete Activity in Cal Learn (093.CW.1)

CalWORKs Eligibility Handbook	Immunization Requirements 51-23
	Effective: 2-21-19

51-23 Immunization Requirements

NOTE: As of 2/1/2015 use Form CW 2209 for client to request good cause (ACL 14-98)

The Immunization Good Cause Request Form will provide applicants and recipients an avenue to request a good cause exemption to the CalWORKs immunization requirements. Caretaker relatives can use the CW 2209 form to explain why one or all of the eligible children in the assistance unit have not been immunized by checking one or more boxes or describing why their child(ren) under the age of six have not received up-to-date vaccinations/shots.

SAR and AR/CO cases EW will lift a penalty the first of the following month in which verification is received (see Section 44-316.331(d) (SAR).

I. Timeframes to Provide Verification of Immunization for All Pre-school Age Children in the AU

- A. Applicants: within 30 days of eligibility for Medi-Cal. If Medi-Cal is active at time of CalWORKs application within 45 days of eligibility for CalWORKs
- B. Recipients: within 45 days of redetermination of eligibility

- C. Children under 6 added to the AU within 30 days of eligibility for Medi-Cal, or if Medi-Cal is active at time child is added, 45 day of eligibility for CalWORKs.

II. Verification

A. Acceptable verification:

- 1. Yellow Immunization Records that include the month and year each dose was received.
- 2. Personal medical records with entries made by a physician or clinic.

B. Unacceptable verification:

- 1. Records with check marks instead of dates.
- 2. Records which state only "up to date" or "all requirements met," or "series complete."

C. Note that immunization verification is NOT required if the child is 5 years old and is enrolled in school.

III. Exemptions and Good Cause

Good Cause

The EW shall determine if good cause exists for not submitting verification due to lack of reasonable access to immunization services. Use form 2209 for the client to indicate the reason they are requesting good cause. If the county determines that good cause exists, the applicant/recipient has an additional 30 days to submit immunization verification.

Circumstances which may constitute good cause, due to lack of reasonable access to immunization services, may include but are not limited to the following: language barriers, physical distance, illness of a parent(s)/caretaker relative, bona fide transportation problems or a lack of available appointments.

Document verification of immunization, determination of good cause or any exemption in case comments.

Exemptions

A. Personal/Religious:

Verified by an affidavit objecting to the immunization requirement that includes an explanation of the personal or religious reasons.

B. Medical:

1. Permanent exemption verified by a physician's written statement indicating the child has a medical condition that rules out all or certain immunizations permanently and specifying which immunizations the child should not receive.
2. Temporary exemption verified by a physician's written statement indicating the child has a medical condition that rules out certain immunizations temporarily and specifying which immunizations must be postponed and the duration.

IV. Failure to Cooperate

A. The cash grant should be "reduced by the amount allowed for the needs of all parents or caretaker relatives in the AU," effective the first of the month following timely notice. In other words, the parent/caretaker relative is treated as a "sanctioned person."

B. For 2-parent families, both parents should be sanctioned.

C. If the parent or caretaker relative is not in the AU, no sanction can be taken. Also, if the person is already sanctioned for another reason, a "double sanction" is not possible. (Only a 25% penalty can be applied at the same time if client fails to cooperate with the District Attorney's office in establishing paternity for child support.)

D. If an AU contains both a senior parent and a minor parent (the immunization is required for the minor parent's child), the senior parent is the CR and is responsible for submitting immunization verification, so the senior parent would be sanctioned.

E. Once verification of immunization is submitted the grant is increased to reflect the needs of the parent(s)/caretaker relative effective the first of the month following the month in which verification is received (see Section 44-316.331(d) (SAR)).

F. If the unimmunized child leaves the AU and the AU still contains an eligible child, the sanction is lifted the first of the month that the child leaves.

V. Responsibilities at Intake

A. If client has verification:

1. Review medical document and make photocopy for case record.

2. Enter identification information from medical documents on DHS Client Immunization Records Form (4019) to be scanned into iFiles.
3. If yellow immunization card is submitted, use "Windows for Yellow Cards" overlay to determine if the child is current on immunizations. If another type of medical record is submitted, use the Immunizations Chart to determine if the child's immunizations are up to date.
4. If child's immunizations are up to date, inform the parent(s) that this requirement is met, and record the information on the Client Immunization Records Form (4019).
5. If the child's immunizations are not up to date, inform the parent(s) and follow the steps in Section B below.
6. If immunizations were done late, however, the child cannot complete the series of immunizations due to the spacing requirement between vaccine doses, so the child is to be considered to have met the immunization requirements. (Refer to your Immunizations Chart to make this determination).
7. Inter County Transfers: if the client is a new applicant, but has Medi-Cal already, immunization verification must be submitted within 45 days of the application for cash aid.

B. If client does not have verification:

1. Set a CalWIN alert 30 days from date of informing client of the immunization requirement.
2. If verification is not submitted, appropriate negative action is taken (see IV above).

C. If client claims exemption due to personal or religious reasons: client signs affidavit on Client Immunization Records Form (4019).

D. Provide client with form CW 2209 if client wants to claim good cause which extends date client needs to submit the verification by 30 days.

E. Note that the case cannot be transferred to a carrying caseload unless immunizations/exemptions are verified or negative action is taken.

VI. Responsibilities at RRR:

A. The informing notice (TEMP CW 101) must be included in the RV packet, which is mailed to the client.

B. Verification must be submitted within 45 days of the financial eligibility determination at annual redetermination.

C. If applicant needs information on where to obtain required immunizations, telephone numbers are on informing notice (TEMP CW 101) which must be sent to client after phone RRR.

D. If adding a child under the age of 6 to the AU, immunization must be verified. The verification must be submitted within 30 days of adding the child to the AU if child had not been active on Medi-Cal or within 45 days of adding the child if child had been active on Medi-Cal at time of being added to AU.

E. If client claims exemption due to personal or religious reasons: client signs affidavit on Client Immunization Records, Form (4019).

F. If client has verification:

1. Review medical document and make photocopy to be scanned into iFiles.

2. Enter identification information from medical documents on DHS Client Immunization Records Form (4019) to be scanned into iFiles.

3. If yellow immunization card is submitted, use "Windows for Yellow Cards" overlay to determine if the child is current on immunizations. If another type of medical record is submitted, use the Immunizations Chart to determine if the child's immunizations are up to date.

4. If child's immunizations are up to date, inform the parent(s) that this requirement is met, and record the information on the Client Immunization Records Form (4019).

5. If the child's immunizations are not up to date, inform the parent(s) and follow the steps in Section G below.

6. If immunizations were done late, however, the child cannot complete the series of immunizations due to the spacing requirement between vaccine doses, so the child is to be considered to have met the immunization requirements. (Refer to your Immunizations Chart to make this determination).

G. IF client does not have verification:

1. Set CalWIN alert 45 days from date of informing client of the immunization requirement.
2. If verification is not submitted at in 45 days, appropriate negative action is taken (see IV above).

CalWORKs Eligibility Handbook	Granting Aid for Pregnancy
	Effective: 2-22-19

51-26 Granting Aid for Pregnancy

A pregnant woman who already has at least one eligible child, and/or is already a member of an AU, is entitled to receive a pregnancy special need allowance during the last four calendar months of her pregnancy.

For those cases, please see the following sections:

51-27 Verification of Pregnancy

54-9 Pregnancy Special Needs

54-2.1 AUs and Pregnancy

55-3.1 BDOA and Pregnancy

57-3.1 Adding Newborns to the AU.

This section applies to pregnant women who have no eligible children yet. These women are eligible for aid and pregnancy special need allowance under certain conditions. Note that the unborn are not considered eligible children and are not included in either the AU or a stepparent unit. When aid is granted, payment is made for the pregnant woman and not for the unborn. The following requirements apply:

I. Who Is Eligible

A. Pregnant Woman Only (PWO) with no eligible children may be aided as an AU of one with a pregnancy special need allowance, if all of the following conditions are met:

1. The pregnant woman and child, if born, is expected to be eligible in the month of payment.
2. The woman has provided medical verification of pregnancy.
3. The pregnant woman is not an eligible child in an existing AU.

B. A pregnant woman who meets all the eligibility criteria listed in A above is entitled to receive aid irrespective of her future plans for the unborn; i.e., even if she plans to relinquish her child at birth, she is eligible as a pregnant woman until the relinquishment occurs.

C. The phrase "no eligible children" refers to any eligible children for whom the pregnant woman is caretaker including her own natural children, siblings, nieces, nephews, etc.

D. An undocumented woman who is pregnant, with no eligible children is not eligible to receive aid until the birth of the child. The child, if born in the United States, is eligible, but the undocumented parent remains ineligible.

II. When They Are Eligible (ACL 15-38 & ACL 14-04)

A. PWO who is under the age of 19 and has not obtained a high school diploma or its equivalent (Cal-Learn eligible) may be eligible from the date of application for aid (theoretically the entire term of her pregnancy).

Pregnant teens, age 18 or younger, with no other eligible children, and who had graduated from high school or obtained a high school diploma or its equivalent, are eligible for CalWORKs and the PSN payments at any time upon verification of pregnancy, and do not have to wait until the beginning of the second trimester.

B. For a PWO who does not meet the criteria in A above, effective July 1, 2015, a pregnant woman age 19 or older, with no other eligible children in the home, may be eligible for CalWORKs cash aid and \$47 in pregnancy special need (PSN) payments beginning in the second trimester of pregnancy. The second trimester begins at the six-month period immediately prior to the month of the anticipated birth. For example, if the birth is anticipated in July, the second trimester would begin in January. Consistent with existing law, eligibility begins after verification of pregnancy is provided. If she does not apply until after the beginning of second trimester, then the date of application would be the date of eligibility. PWO applicants who are in the first three calendar months of their pregnancies, and are otherwise eligible, should be referred to the CAAP Program.

C. For more information about the Beginning Date of Aid, please see Sections 55-3 and 55-3.1.

III. Establishing Eligibility (EAS 44-205, 44-209)

In order to establish eligibility for a pregnant woman only (PWO), one-person AU, it is necessary to establish eligibility, including deprivation, for the unborn as though the child were born and living with its mother or its parents. The following verifications and determinations are needed:

- A. A Statement of Facts is completed with the client indicating pregnancy on the appropriate question. For a U-parent case, the father and his work history should also be included.
- B. Pregnancy verification (Form 4020 Pregnancy Report).
- C. Deprivation determination and verification. (Again, this is not necessary when adding a pregnancy special need allowance to a continuing case with other eligible children.
- D. WTW requirements.

IV. Pregnancy Special Need Allowance (EAS 44-211.6)

Refer to Section 54-9 (forthcoming) Pregnancy Special Needs.

V. Terminated Pregnancies (EAS 44-325)

The grant for a one-person AU (PWO case) is discontinued the last day of the month in which pregnancy is terminated for a reason other than the delivery of a live infant (abortion, miscarriage, etc.), provided timely notice can be given. (Also see Section 54-9, Item VII C, for information regarding this topic for non-PWO cases.) Any aid paid for any month following a termination of a pregnancy is an overpayment and can be recovered.

VI. WIC Program (EAS 40-107.8)

All pregnant applicants/recipients must be referred to the Women, Infants, and Children Program (WIC Program). The WIC program is a special food, health, and nutrition education program for women who are pregnant, breast-feeding, or who have a child under age 5. These women can be referred to the WIC program. A notation that the referral was made and the date should be entered in case comments.

CalWORKs Eligibility Handbook	Verification of Pregnancy 51-27
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51-27 Verification of Pregnancy

In a PWO case, eligibility for aid cannot be established and the beginning date of aid cannot be determined until medical verification is provided. In a non-PWO case, the pregnancy special need allowance cannot be approved until the verification is provided. The client has the responsibility to provide the verification of pregnancy. PWOs who are granted aid in the first five calendar months of the pregnancy (see Section 51-26 Item II.C.) must provide it again for the last four months, if requested.

I. Acceptable Evidence of Pregnancy

Medical verification is a written statement from a:

Physician

Physician's assistant

State Certified nurse midwife

Nurse practitioner

Designated medical or clinic personnel with access to the patient's medical record that provides information sufficient to substantiate the diagnosis and estimated due date.

A. The only acceptable source of pregnancy verification is a private physician, a District Health Center clinic run by DPH, or a clinic run by a community-based private agency, such as Planned Parenthood. If the client provides verification from any other source, the worker must require additional verification from an acceptable source. If the client does not know of a clinic and does not have a private physician, the worker may provide the client with a list of clinics, or may refer her to the San Francisco Medical Association or Planned Parenthood. See Section 59-32 for a list of clinics in San Francisco.

B. Verification must be in writing. Form 4020, Pregnancy Report, is given to the client who is requested to have it completed by her attending physician or approved clinic. The completed form must indicate the test(s) used to verify pregnancy, the date of testing, the number of weeks pregnant at the time of

the test(s), and the EDC (Expected Date of Confinement). The form must be signed by one of the person's listed above. The same verification provided on a physician's letterhead is acceptable, but Form 4020 is preferred.

C. Acceptable Tests

Tests to verify pregnancy must provide a good degree of medical reliability. The following guidelines apply:

1. Pelvic Examination

The findings of a pelvic examination performed no earlier than the fifth week of pregnancy are the most (but not the only) acceptable verification.

2. Serum Test

If a PWO is granted aid based on the results of a serum test, the pregnancy must be verified by another method after the Medi-Cal card is issued and confirmed as received by the client.

3. Urinary HGC Test

If a PWO is granted aid based on the results of a urine test, the pregnancy must be verified by another method after the Medi-Cal card is issued and confirmed as received by the client.

4. Sonogram Test

A sonogram test which has been performed no earlier than the sixth week of pregnancy is acceptable.

This test is not regularly used by physicians to verify pregnancy; rather, it is often used if there are possible problems with the pregnancy.

5. Fetal Heart Tone Test

A fetal heart tone test is a reliable verification of pregnancy when performed no earlier than the eighth week of pregnancy.

II. Reverification of Pregnancy

It is county policy to reverify pregnancy in a continuing PWO case which was granted aid during the first five calendar months. However, an exception to this policy can be

made if the original verification was by the fetal heart tone test. Request the reverification in the sixth calendar month of the pregnancy.

CalWORKs Eligibility Handbook	Property - General 51-30
	Effective: 3-1-98

51-30 Property - General

I. General Statement

(EAS 42-200)

Real and personal property that an applicant/recipient owns and in which he has an interest must be evaluated before aid can be granted. Limits on property holdings have been established to ensure that persons in need do not have to be completely destitute to qualify for aid, as well as to ensure that those persons whose resources are sufficient to meet their needs cannot qualify for aid. Regulations governing property ownership are based on these objectives and they should be kept in mind in making decisions on the variety of special circumstances which no law or regulations can cover specifically.

II. Use Food Stamp Regulations For Property/Resources

Effective 1-1-98, most of the property/resource regulations for cash aid were replaced by those from the Food Stamp program. Please refer to the Food Stamp Handbook, Sections 82-1, 82-2, 82-3, 82-3.1, and 83-5. (See D below regarding Section 82-4.) Below are explanations of the areas where the regulations may be different for cash aid:

A. "Property" or "Resources?"

Food Stamp regulations differentiate between "property" and "resources," using the former as a subset of the latter. Cash aid regulations traditionally used the term "property" in its broader definition. So, for cash aid the two terms may be used interchangeably.

B. "Household" = AU + Sanction/Excluded Members

Food Stamp regulations always refer to the "household," which does not have significance under cash aid regulations. The persons whose property/resources are considered when determining eligibility for cash aid have remained the same as before 1-1-98:

- Members of the Assistance Unit, including needy (in the AU) non-parent caretaker relatives and step-parents.
- Persons not in the Assistance Unit who would otherwise be included but are not because they are sanctioned or excluded by law, with the exception of SSI/SSP recipients.

C. Restricted Accounts

Cash aid regulations have allowed recipients to have special accounts which are excluded from the regular property limits (see Section 51-33). These provisions were also retained after 1-1-98.

D. Ignore Food Stamp "Transfer of Resources" Provisions

Although Food Stamp regulations include provisions for applicants who transfer resources at less than fair market value (see FS Handbook Section 81-4), there are separate provisions for "transfer of assets" under cash aid regulations for recipients and these provisions specifically exclude applicants. See Section 51-31 in this handbook for details.

E. "Applicant" or "Recipient?"

Some regulations for property/resources pertain only to applicants or only to recipients. An "applicant" becomes a "recipient" when:

- All conditions of eligibility for cash aid are met AND
- Authorizing documents to approve the application are signed by the county.
- Approval of an Immediate Need or Homeless Assistance payment based on apparent eligibility is not considered and approval of the application.

Also, remember that ineligible aliens, sanctioned persons, etc. are not considered recipients since they are not in the AU.

Usually, the regulations for recipients will apply if at least one person in the AU meets the definition of "recipient."

CalWORKs Eligibility Handbook	Resource Limits - Specific 51-30.1
	Effective: 7-17-19

51-30.1 Resource Limits - Specific

CalWORKs families and CF households are allowed to retain countable resources in an amount of \$2250. If an aged (60 or over) or a disabled member is in the CW or CF case, the resource limit is \$3500.

Resources are exempted from eligibility determination for all CalFresh households, except for Expedited Services and for certain elderly and disabled households.

The value of all resources is no longer considered when determining eligibility for CalFresh benefits, for households with gross income that doesn't exceed 130 percent of FPL and has received the "Family Planning-PUB 275" brochure. Include case comments about having given PUB 275 in order to avoid CF error.

Retirement accounts i.e., the 401(a) (k), 403(a)(b), 408, 408(a), 457(b), 501(c)(18) 529, IRA and ESA accounts are excluded as countable resources for both CalWORKs and CalFresh when determining eligibility. Furthermore these accounts are exempted resources for applicant and recipient alike.

CalWORKs and CalFresh Asset Exclusions: Retirement, IRA and ESA Accounts

In 2006, only a few accounts were exempt under CalFresh and CalWORKs. In 2007, Assembly Bill 2466 signed into law guidelines for promoting self-sufficiency and wealth-building habits among low-income households by exempting certain retirement accounts from counting as property for CalWORKs recipients. However, the bill inadvertently removed some exemptions for CalWORKs applicants and left CalWORKs unaligned with

CalFresh rules because these types of accounts were already exempt for both applicant and recipient under CalFresh.

Per WIC Section 11155 and MPP Section 42-213.2, CalWORKs follows the same property exemption rules that CalFresh allows for applicant and recipient. CalWORKs regulations will be revised to clarify that MPP Section 42-213.21 and .22 are meant to be additional exemptions and are not to eliminate any exemptions for CalWORKs applicants or recipients allowed under CalFresh rules.

CalABLE Accounts

The California "Achieving Better Life Experience" Act (aka CalABLE) was signed into law through SB 324 and AB 449 and became effective 1/1/2017. The purpose of the CalABLE account is to help those individuals with disabilities maintain or improve their health, well-being and promote independence.

The CalABLE account is a tax-free savings account that allows "eligible individuals" with disabilities to save and invest money for "qualified disability expenses" (QDEs) without losing public aid benefits for certain programs like Medicaid, SNAP, SSI and/or SSDI.

An "Eligible Individual" is someone who:

- developed their disability before the age of 26
- is eligible for, or currently receiving, SSI or SSDI benefits
- is able to provide a "disability certificate" from his/her parent/guardian, confirming the disability occurred before the age of 26, along with a copy of a physician's diagnosis

"Qualifying disability expenses" (QDEs) are not limited to medical expenses, but may also include the following:

- Education
- Housing
- Transportation

- Employment training and support
- Assistive technology and personal support services
- Health
- Financial management and administrative services
- Legal services
- Funeral and burial costs

Money deposited, contributions and withdrawals used for QDEs for a CalABLE account, up to a \$100,000 limit, are not counted as income or against the limit on personal assets for individuals to qualify for CalWORKs, SSI, and other public benefits. Interest on CalABLE accounts are allowed to accumulate tax-free and withdrawals, used or applied to QDEs, are not subject to federal income tax.

CalWORKs families are able to save money with NO limit restrictions when retaining a retirement or education savings or restricted accounts for a specified purpose. (MPP 42-213.2 and 42-213.23.)

As of December 2018, family members, friends, or the account owners/beneficiaries themselves can contribute up to a combined total of \$15,000 a year to a CalABLE or ABL account.

Those account owners/beneficiaries who are employed can contribute additional amounts above the \$15,000 annual limit when not participating in an employer sponsored

retirement plan.

The additional contribution must be whichever is less:

- An amount equal to annual gross salary, or
- Federal Poverty Level of \$12,140 in 2019.

The CalABLE Extended Fact Sheet is available at the California State Treasurer’s website, which provides additional details on CalABLE and ABLE accounts.

Qualified persons can reduce their unearned income (i.e., State Disability insurance benefits, Social Security Disability Benefits, Temporary Worker’s Compensation Benefits, etc.) by making contributions to the CalABLE account to maintain their CW eligibility.

Resources:

ALL COUNTY LETTER (ACL) 08-11, 08-37, 09-75, 13-97 DATED DECEMBER 12, 2013, CalWORKs CHANGES TO ASSET LIMITS FOR FAMILIES THAT INCLUDE ELDERLY OR DISABLED, ACIN I-28-09, I-58-15 DATED JULY 10TH, 2015, HOUSEHOLD MEMBERS, WELFARE AND INSTITUTIONS (W&I) CODE SECTIONS 11155 (a), MANUAL OF POLICIES AND PROCEDURES (MPP) SECTION 42.207.2 AND 42-213.2, AND UNITED STATES DEPARTMENT OF AGRICULTURE FOOD AND NUTRITION SERVICE (FNS) – ADMINISTRATIVE NOTICE (AN) 14-55, AN 14-56; WIC SECTIONS 11155 AND 11155.6, ALL COUNTY LETTER (ACL) 17-61, DATED JUNE 27, 2017, CALWORKS AND CALFRESH PROGRAMS: ACHIEVING A BETTER LIFE EXPERIENCE (ABLE) ACCOUNTS FOR INDIVIDUALS WITH DISABILITIES IN CALIFORNIA, WELFARE AND INSTITUTIONS (W&I) CODE SECTIONS 4875, 4880, AND 4882, MANUAL OF POLICIES AND PROCEDURES (MPP) 42-213.2, 42-213.23, 44-101(f), 44-113.215, 44-133.21 and 82-832.1(d). **ACIN I-43-19, CalABLE PROGRAM.**

CalWORKs Eligibility Handbook	Transfer of Assets 51-31
	Effective: 3-1-98

51-31 Transfer of Assets

A Period of Ineligibility (POI) can be imposed on a recipient AU that "transfers an asset at less than its fair market value," in order to continue to be eligible. Note that these rules are NOT FOR APPLICANTS.

I. Continued Eligibility?

The client has a right to sell or exchange property, or change the form of holding it. But, whenever the client does this, the value of the property in relation to the client's eligibility should be considered:

- If the client had not taken this action, would he/she continue to be eligible? (Would the family's total property be over the limit?)
- If the client had gotten a "fair market value" for the property, would he/she continue to be eligible?

If the answer is "No" to these questions, the POI may have to be imposed.

Note that giving away property would be considered "transferring an asset at less than its fair market value," unless it can be proven that the property actually had no value.

Giving away cash, without receiving anything in exchange, would always be considered transferring it at less than fair market value. Any amount of lump sum income that is retained is treated as property, starting the month after receipt (see Section 53-9). So, if a lump sum is received by a client that is greater than the property limit, and he/she gives the money to a friend, the Transfer of Asset POI could be imposed. On the other hand, if the same client instead spends all of the lump sum on furniture and other exempt household items, these rules would not apply.

If the client owns a car that has a "book" value much greater than the property limit but is eligible because of the motor vehicle exemption amount, and he/she sells the car at a fraction of its value, these rules would apply. The client would have to prove that, due to its condition, the car was only worth what it was sold for. Otherwise, the Transfer of Asset POI could be imposed.

II. Good Cause

Remember that the intent of these rules is to prohibit "transferring assets at less than fair market value to qualify for aid." So, a "good cause determination" should be part of the process when applying these rules. If the client can establish that there was some other compelling reason to transfer the asset at less than fair market value, then the POI should not be imposed.

III. Fair Market Value

In order to determine the "fair market value" of an asset, use the methods that already exist to evaluate property when determining eligibility. Remember that the client will no longer be in possession of the property, so only the value that was already documented in the case record can be used, unless the client provides evidence to the contrary.

IV. Determining the POI

To determine the POI, first determine the difference between the fair market value of the asset and the amount received for it. Divide that difference by the amount of MBSAC for the family.

That amount is rounded down to the next lower whole number to provide the number of months of ineligibility. A remaining amount is NOT applied to the month following the POI.

V. Additional Notes

It appears that, since these rules do not apply to applicants, the recipient could allow his/her case to be discontinued while in possession of the asset (e.g., for excess property), then transfer the asset during the break-in-aid, before reapplying. If the transfer of property is not reported until months later, after the POI would have been imposed, aid issued during those months would be considered an overpayment. If the property that was transferred was actually owned by an "optional person" in the AU (not mandatorily included), the client can choose to delete that person from the AU so that only the optional person would have the POI.

CalWORKs Eligibility Handbook	Determining the Value of Motor Vehicles 51-32
	Effective: 11-01-19

51-32 Determining the Value of Motor Vehicles

I. Overview

A vehicle must be evaluated at initial application and at every reinvestigation (RRR). Any additional vehicle that a household acquires between RRR's must be

evaluated at the time of acquisition. Once a vehicle has been evaluated, it does NOT need to be re-evaluated again until the next RRR.

A vehicle may be excluded and may not have a countable property value for CalWORKs. Unlicensed and Licensed vehicles are treated differently, in that unlicensed vehicles are not eligible for the exemption for the EQUITY VALUE test exclusion.

Workers need to take the following steps to determine if a vehicle is excludable, or exempt:

1. Check for exclusions.
2. Check for exemption
3. If vehicle is not excluded, worker will accept client submitting DMV verification of the Fair Market Value of the vehicle. If the applicant or recipient determines that he or she overestimated or underestimated the value of the vehicle or the encumbrances, he or she shall be afforded the opportunity to provide estimates or other verification, pursuant to ACL No. 92-104 that reflects a more accurate estimate of the vehicle's value. Any Notice of Action denying an application or discontinuing benefits due to excess resources resulting from the final vehicle value used for the asset test shall inform the applicant or recipient of this right to rebut that vehicle's value.
4. If the vehicle is a licensed vehicle the worker will need to first see if the vehicle is exempt from the EQUITY VALUE determination.
5. If the vehicle is not exempt from the EQUITY VALUE determination, the worker shall compare the Equity value and the Excess Fair Market Value. The greater of the two will be used towards the property limit of the AU.

II. References

All County Letters

- o [ACLs 00-06](#) , [01-24](#), [ACL 92-104](#), [ACL 13-111](#), [ACL 18-76](#)

All County Notices

- o [ACIN I-48-99](#)

- [ACIN I-33-19](#)

CalWORKs PIMs

- PIM #00-9, #01-8

EAS

- [Property-General 42-215.4, Definitions](#)

Cross References to Other Sections of CW Handbook

- [Section 51-30 Property - General](#)

III. Definitions

Vehicle: The definition of a vehicle includes but is not limited to the following:

- Car
- Trucks
- Sports Utility Vehicle (SUV)
- Vans
- Boats
- Trailers
- Campers
- Recreational Vehicle (RV's)
- Motorcycles
- Houseboats
- Jet Ski's
- Snowmobiles

As of 1/1/2014 CalWORKs applicants and recipients will be able to retain non-exempt vehicles that have an equity value of \$9,500 or less. Equity is the amount of the Fair Market Value (FMV) of the vehicle less encumbrances (amount owed on vehicle, if any).

The new law allows clients to self-certify the amount of encumbrances, if any. The department further specifies that clients may also self-certify the vehicle's FMV.

Any equity value in excess of the \$9,500 vehicle asset limit will be counted as a resource attributable toward the Assistance Unit's (AU's) \$2,000 (or \$3,250 for families with an aged or disabled household member) maximum resource limit. The \$9,500 equity threshold will be adjusted upward annually for an increase, if any, in the United States (US) Transportation Consumer Price Index (CPI) for All Urban Consumers.

The existing \$1,500 equity exemption was eliminated effective January 1, 2014.

A new exemption has been added. Any vehicle for which ownership has been transferred to the client as a gift, donation, or family transfer, as defined by the Department of Motor Vehicles (DMV), will not count against the family's maximum resource limit.

Fair Market Value: The Fair Market Value (FMV) is the amount the Assistance Unit (AU) could expect to receive for the vehicle if it were sold.

To determine the FMV, EW must take the following steps, in sequence:

1. As of 1/1/2014 the client can self-certify the vehicle value on Form CW80. This form has been revised per ACL 18-76 dated 7/2/2018, see highlighted revisions below. This form shall only be required when a recipient reports a vehicle that was not previously reported at the time of initial application, previous SAR 7, or annual redetermination.
2. Use the "Blue Book" to determine the wholesale basic value of the vehicle unless it is an antique, custom made, or classic vehicle if client is not able to state the FMV of vehicle.
3. Use the estimate provided by the AU, if the vehicle is no longer available in the Blue Book listing, unless the estimate is questionable.
4. Use a newspaper advertisement, tax assessment or other reliable source if the AU's estimate is questionable.
5. The client may provide the FMV as per DMV issued value of vehicle.
6. Each vehicle shall be appraised individually.

Equity Value: The equity value is the FMV less encumbrances.

Encumbrance: An encumbrance is a lien or a claim against a property. The encumbrance is the amount actually owed on the vehicle (Current payoff amount). Current verification of encumbrance is needed.

Blue Book Value: The basic "low Blue Book" is the wholesale value of the vehicle.

If client is not certifying the FMV of vehicles owned use the lowest Blue Book value if client is unable to provide all information needed to complete Blue Book search. If a client states that the vehicle was obtained as a gift/donation or family transfer, the

client must obtain verification from the DMV, and the statement on the CW 80 (rev. 2/18) cannot be accepted as self-certification.

To use the Kelly Blue Book Internet site, use the following directions:

- Go to: www.KBB.com
- Click on My Car's Value on the right hand side.
- Enter you Zip Code, if asked
- Select, Year, Make, Model, and Trim (2-Door, 4-Door, etc.) all of this information should be on the vehicle registration
- Enter exact mileage (Client Statement)
- Choose the lowest value available
- Do not enter any other information
- Click on the pricing report
- Print the screen for your case records

Excess Fair market Value: The "excess" FMV, is the FMV minus the current vehicle Exclusion Limit. The exclusion limit is used to determine the value of a licensed vehicle that is not totally exempt. The vehicle exclusion limit is \$9500.

Leased: A vehicle which is leased, or on a lease to purchase option, shall not be counted as a resource until the title has been transferred to the client.

- NOTE: An alert should be set for the contract end date of the lease. EW should then determine who the owner of the vehicle is at that time and a new vehicle valuation is required.

Licensed Vehicle: A licensed vehicle is one which is currently registered with the Department of Motor Vehicles (DMV). This includes licensed vehicles owned by ineligible non-citizens, or disqualified persons whose resources are considered available to the AU.

Unlicensed Vehicle: An unlicensed vehicle is one which is NOT currently registered with the DMV.

Non Operational Vehicles: If a vehicle is registered as "non-operative", it is considered and unlicensed vehicle. In order for a vehicle to be considered licensed it must be registered as operating on public roads.

IV. How to Determine if the Vehicle is Excludable

The first step in determining the value a vehicle for an AU, is to first determine if the vehicle is totally excludable, meaning you do not need to look at the value of this vehicle for purposes of determining eligibility.

A vehicle will be totally excludable under the following conditions:

Unlicensed Vehicles:	Licensed Vehicles:
<ul style="list-style-type: none"> • If it is used as the AU's home • If it annually produces income consistent with its FMV (Self-Employed individual makes \$10,000 per year, vehicle FMV is equal to \$10,000) • Essential to the employment or self-employment of an AU member, other than daily commuting. <p>If an unlicensed vehicle is excludable under one of these conditions, narrate in case comments, and no further valuation is needed.</p>	<ul style="list-style-type: none"> • A new exemption has been added 1/1/2014. Any vehicle for which ownership has been transferred to the client as a gift, donation, or family transfer, as defined by the Department of Motor Vehicles (DMV), will not count against the family's maximum resource limit. <ul style="list-style-type: none"> • Client has to provide DMV verification. • If it is used as the AU's home • If it is used to transport a physically disabled AU, or Non-AU member, whether or not the ineligible physically disabled Non-AU member's property is included in the property limit. The disability may be temporary or permanent, and must be verified if not evident. • Used to produce income over 50% of the time. If the vehicle was used over 50% of the time in self-employment farming, the exemption continues for one year from the date the self-employed farming stopped. • If it annually produces income consistent with its FMV (Self-Employed individual makes \$10,000 per year, vehicle FMV is equal to \$10,000 • Used for long distance travel necessary for employment other

	<p>than daily commuting.</p> <ul style="list-style-type: none"> Used to transport the AU's primary source of heating fuel or water. <p>If a licensed vehicle is excludable under one of these conditions, narrate in case comments, and no further valuation is needed.</p>
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- The existing \$1,501 equity exemption was eliminated effective January 1, 2014.** A new exemption has added 1/1/2014 has taken its place. Any vehicle for which ownership has been transferred to the client as a gift, donation, or family transfer, as defined by the Department of Motor Vehicles (DMV), will not count against the family's maximum resource limit.
- Clients will be required to provide verification from the DMV of the gift/donation, or family transfer. To obtain this verification, an applicant or recipient All County will be required to request a copy, via U.S. mail, of the original title transfer or bill of sale documentation from the DMV indicating that the vehicle was a gift/donation, or family transfer. DMV charges a fee of \$5.00 for this verification. Once the applicant or recipient receives this verification from the DMV, they would then submit this verification to the CWD. CWDs are reminded of their duty to assist the applicant or recipient in obtaining verification and the payment of fees to DMV if the client is unable to obtain the verification or requests assistance.
- Per All County Letter (ACL) 18-76 dated 7/2/2018, Form CW80, Self-Certification for Motor Vehicles** has been revised to remove the exemption for family members under the age of 18 who use the vehicle for the purpose of transportation to go to work, school or training, or to seek work. Legislation for this exemption was not carried over into current law when Assembly Bill (AB) 74 was passed.

Unlicensed Vehicles:	Licensed Vehicles:
<ul style="list-style-type: none"> For all unlicensed vehicles that were not totally excludable, the last step in determining their property value 	<p>Licensed vehicles still have one more exclusion test. Licensed vehicles may be excluded from the EQUITY VALUE, then only the Fair Market Value of the</p>

<p>is to count the EQUITY VALUE of these vehicles.</p> <ul style="list-style-type: none"> • This is the Fair Market Value of the vehicles, minus any encumbrances. (This is the amount that will count towards the property limit to the AU) <p>Once you have determined the values of the vehicle narrated in case comments, and no further valuation is needed.</p>	<p>vehicle needs to be determined.</p> <p>For licensed vehicles, determine if they are exempt from the EQUITY VALUE under the following condition:</p> <ul style="list-style-type: none"> • Determine the number of adult AU members in the AU, and exempt one vehicle per adult AU member from the EQUITY VALUE determination. <u>These vehicles still must be determined for Excess FMV to determine the property amount that will count towards the AU.</u> <p>If the vehicle is exempt from the EQUITY VALUE determination for the above reason, <u>the following determination still needs to be made to determine the property limit:</u></p> <ul style="list-style-type: none"> • Fair Market Value (KBB) of the vehicle minus \$ 9,500.- <p>Once you have determined the value of the vehicle, narrate in case comments and no further valuation is needed.</p> <p>FOR VEHICLES NOT TOTALLY EXCLUDABLE, AND ALSO NOT EXCLUDABLE FROM THE EQUITY TEST:</p> <p>A final determination must be made comparing the Equity Value of the Vehicle to its Excess Fair Market Value. The higher of the two amounts will be the countable amount to use towards the property limit.</p> <ol style="list-style-type: none"> 1. Determine the Equity Value of
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	<p>the vehicles. This is the Fair Market Value minus any encumbrances (or amount owed) on the vehicle.</p> <ol style="list-style-type: none">2. Determine the vehicles Excess Fair Market Value. This is the Fair Market Value minus \$ 9,500.-3. Take the larger of the two amounts. <p>Once you have determined the value of the vehicle narrate in case comments, and no further valuation is needed.</p>
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V. Examples

Example 1:

AU of 4. Mom, Dad, and two children ages 16 and 17 years old. 16 and 17 year old both use family vehicles to go to and from school and to their part time jobs. The family has four licensed vehicles.

Vehicle 1: KBB Value \$10,500

Vehicle 2: KBB Value \$ 10,500.-, Family Owes \$3,000

Vehicle 3: KBB Value \$11,000

Vehicle 4: KBB Value \$4,000

Vehicle # 1:

Step 1: Not totally excludable.

Step 2: Is the vehicle excluded from the EQUITY VALUE test? **YES;** This vehicle can be excluded from the EQUITY VALUE determination for One Adult AU member.

Step 3: Determine the Fair Market Value of the vehicle. FMV provided by client or KBB Value Minus \$ 9,500.-.

Total Countable Property = \$ 10,500- 9,500 = \$1,000

Vehicle # 2:

Step 1: Not totally excludable.

Step 2: Is the vehicle excluded from the EQUITY VALUE test? **YES**; This vehicle can be excluded from the EQUITY VALUE determination for the second Adult AU member.

Step 3: Determine the Fair Market Value of the Vehicle. FMV provided by client or KBB Value Minus \$ 9,500.-.

Total Countable Property = \$10,500 - 9,500.- = 1,000

Vehicle # 3 (used by 16 year old):

Step 1: Not totally excludable.

Step 2: Is the vehicle excluded from the EQUITY VALUE test? **NO**; This vehicle cannot be excluded from the EQUITY VALUE determination for the vehicle being used by a family member under the age of 18 to go to work, and or school.

Step 3: Determine the Fair Market Value of the Vehicle. Client provided FMV or KBB Value Minus \$ 9,500.-.

Total Countable Property = \$11,000-9500 = \$1500

VEHICLE # 4 (used by 17 year old):

Step 1: Not totally excludable.

Step 2: Is the vehicle excluded from the EQUITY VALUE test? **NO**; This vehicle cannot be excluded from the EQUITY VALUE determination for the vehicle being used by a second family member under the age of 18 to go to work, and or school.

Step 3: Determine the Fair Market Value of the Vehicle. FMV provided by client or KBB Value Minus \$9500.

Total Countable Property = \$4000-9500 = \$0 (No Excess Value)

§ Total vehicle resource value is \$2,000, each vehicle will have separate CalWIN entries and CalWIN will combine the total resource value.

Example 2:

AU of 3. Mom, Dad and physically disabled SSI son. They have three vehicles.

Vehicle 1: Client provided FMV: \$5,650; Licensed

Vehicle 2: KBB Value: \$20,000, Family Owes \$5,000; Licensed, Used to transport Son

Vehicle 3: KBB Value: \$2,000, Family Owes \$1,000; unlicensed; vehicle has been transferred to client by a family member

VEHICLE # 1:

Step 1: Not totally excludable.

Step 2: Is the vehicle excluded from the EQUITY VALUE test? **YES**; This vehicle can be excluded from the EQUITY VALUE determination for One Adult AU member.

Step 3: Determine the Fair Market Value of the Vehicle. Client provided FMV or KBB Value Minus \$ 9,500.-.

Total Countable Property = \$5650- 9500.- = \$ 0

VEHICLE # 2:

Exempt entirely for use to transport a disabled member of the family.

Total Countable Property = EXEMPT

VEHICLE # 3:

Step 1: Not totally excludable.

Step 2: Exempt entirely due to vehicle falling under new exemption by having been transferred from another family member to client.

Total Countable Property = EXEMPT

§ Total vehicle resource value is \$0, each vehicle will have separate CalWIN entries and CalWIN will combine the total resource value.

Example 3:

AU of three, Mom, Dad and one child under 16. They have four licensed vehicles.

Vehicle 1: KBB Value \$ 9,500

Vehicle 2: KBB Value \$9,800, Family Owes \$3,000

Vehicle 3: KBB Value \$6,000, Family Owes \$,5000

Vehicle 4: KBB Value \$5,000, Family Owes \$3,400

VEHICLE # 1:

Step 1: Not totally excludable,

Step 2: Is the vehicle excluded from the EQUITY VALUE test? **YES**; This vehicle can be excluded from the EQUITY VALUE determination for One Adult AU member.

Step 3: Determine the Fair Market Value of the Vehicle. KBB Value Minus \$ 9,500

Total Countable Property = \$ 9500 - 9500= \$0

VEHICLE # 2:

Step 1: Not totally excludable.

Step 2: Is the vehicle excluded from the EQUITY VALUE test? **YES**; This vehicle can be excluded from the EQUITY VALUE determination for the second Adult AU member.

Step 3: Determine the Fair Market Value of the Vehicle. KBB Value Minus \$ 9500.

Total Countable Property = \$9,800- 9500 = \$ 300

VEHICLE # 3:

Step 1: Not totally excludable.

Step 2: FMV – 9,500

Total Countable Property = 0

VEHICLE # 4:

Step 1: Not totally excludable.

Step 2: Is the vehicle excluded from the EQUITY VALUE test? **NO**;

Step 3: Determine the EQUITY VALUE: This is the fair Market Value (KBB) minus any Encumbrances

Step 4: Determine the Excess Fair market Value: This is the KBB Value Minus \$ 9500:

Compare the Two Values and use the *Greater* of the two amounts:

EQUITY VALUE:

\$5000-\$3400= \$1600

Fair Market Value:

\$5000- \$9500 = \$ 0

Total Countable Property = Greater of the Two \$1600

§ Total vehicle resource value is \$ 1900, each vehicle will have separate CalWIN entries and CalWIN will combine the total resource value.

VI. Entries

In order for CalWIN to make the correct vehicle resource determination, the data entry into CalWIN must be correct. Please follow these next steps when making your entries into CalWIN.

Adding a New Vehicle:

1. Click **Intake & Case Maintenance** on the **Navigate CalWIN** window.
 - Double-click the **Data Collection** heading in the "Action" group box.
 - Select the **Display Vehicle Summary** window from the expanded tree view in the "Action" group box.
 - Enter the case number
 - Click **[Open]**. The **Display Vehicle Summary** window appears with the Case Number and the Name pre-filled.
2. Click **Add [+]** on the toolbar. The **Collect Vehicle Detail** response window appears with the **Vehicle Resource Detail** tab displayed.
 - The **Resource Name** field is pre-filled with <New>.

3. Select the **Individual** from the drop down field.
4. Enter the **Effective Begin Date**.

NOTE: The **Effective Begin Date** is the date that the information on the window started or became relevant to the case.

5. Enter a Y or N in the **Leased [Y/N]** field.
6. Enter a **Resource Name** for the vehicle. Example : 1992 Honda, Family Car 1

Note: The name you enter for the vehicle will fill the **Resource Name** field at the top of the window once you save the information.

7. Select the vehicle **Type** and **Make** from the drop down fields. Enter the **Model**.
 - If the vehicle is licensed, enter the **Licence #**.

Note: It is important that the license number of the vehicle be entered in CalWIN so that the system appropriately applies the 1931B vehicle evaluation rules.

- Select the appropriate **Verification** and **Source** from the drop down fields.
8. Complete the remaining applicable fields on the **Vehicle Resource Detail** tab.
 - Enter the KBB value of the vehicle in the **FMV** field.

NOTE: The value in the **FMV** field is the amount EDBC will use when calculating the resource amount.

9. Click **Save** on the toolbar.
 - The **Vehicle Ownership Detail** tab will display with the message " Tabpage Vehicle Ownership Detail is Mandatory".
 - Click **[OK]**.

10. Enter the **Effective Begin Date**.
11. Enter Y or N in the **Legal Owner [Y/N]** and **Legal User [Y/N]** fields.
12. If the resource is held jointly by multiple individuals, enter the **Percent Owned** or the **Amount Owned** (by the individual you selected in Step 3) in the "Held Jointly" group box.
 - Enter a Y or N in the **Joint Registration [Y/N]** field.
 - Select the appropriate **Verification** and **Source** from the drop down fields.

13. Complete the remaining applicable fields on the **Vehicle Ownership Detail** Tab.
14. Click **Save** on the toolbar.

15. If the vehicle valuation method is based on a source other than the FMV, click the **Vehicle Resource Detail** tab.
 - Click **[Method]** next to the **FMV** field in the "Value Calculation" group box. The **Collect Value Calculation Method Detail** response window appears.
 - Enter the **Effective Begin Date**.
 - Select the **Type** from the drop down field.
 - Enter the **Value** and the **Date**.
 - Select the appropriate **Verification** and **Source** from the drop down fields.
 - Click **Save** on the toolbar.

16. If the vehicle is held in trust, click the **Vehicle Resource Detail** tab.
 - Click **[Trust]**. The **Select Individual Trust Fund Summary** response window appears.
 - Select the trust fund of which this vehicle is a part and click **[Select]**. You return to the **Collect Vehicle Detail** response window.

17. If the resource is encumbered, click **[Encumbrances]**. The **Collect Encumbrance Detail** response window appears.
 - Enter the **Effective Begin Date**
 - Select the **Type of Encumbrance** from the drop down field.
 - Complete the remaining applicable fields.
 - Click **Save** on the toolbar.
 - Close the Collect Encumbrance Detail response window. You will return to the Collect Vehicle Detail response window.

18. If there is a lien holder on the resource, click **[Lien Holder]**. The **Collect Lien Holder Detail** response window appears.
 - Enter the **Effective Begin Date**.
 - If the lien holder is attached to the case, select the **Individual** radio button and select the individual from the **Name** drop down field.
 - If the lien holder is not in the case, select the **Other** radio button and enter the name.
 - Select the **Lien Type** from the drop down field.
 - Complete the remaining applicable fields.
 - Click **Save** on the toolbar.
 - Close the **Collect Lien Holder Detail** response window. You return to the **Collect Vehicle Detail** response window.

19. Click **Save** on the toolbar and close the window. You return to the **Display Vehicle Detail** window.

20. If the vehicle is jointly held with someone in the case, click **[Assign Individual]**. The **Collect Vehicle Detail** response window appears with the **Vehicle Ownership Detail** tab displayed and the **Resource Name** pre-filled.

- Select the **Individual** who is the joint owner of the vehicle from the drop down field.
- Complete the fields on the **Vehicle Ownership Detail** tab as appropriate.
- Click **Save** on the toolbar.

21. Close the **Collect Vehicle Detail** window. You return to the **Display Vehicle Summary** window.

This concludes how to add a new vehicle.

How to Update an Existing Vehicle:

1. Click **Intake and Case Maintenance** on the **Navigate CalWIN** window.
 - Double-click the **Data Collection** heading in the "Action" group box.
 - Select the **Display Vehicle Summary** window from the expanded tree view in the "Action" group box.
 - Enter the case number.
 - Click **[Open]**. The **Display Vehicle Summary** window appears with the **Case Number** and **Name** pre-filled.
2. Select the vehicle you wish to update. Click the **Detail** button on the toolbar. The **Collect Vehicle Detail** response window appears with the **Vehicle Resource Detail** tab displayed.
 - The **Resource Name** field is pre-filled with the name of the vehicle selected.
3. If you are making changes to any of the fields on the **Vehicle Resource Detail** tab, enter the **NEW Effective Begin Date**.
 - Update the fields on the **Vehicle Resource Detail** tab as necessary.
 - Click **Save** on the toolbar.

NOTE: The **Effective Begin Date** is the date the new or updated information on the window started or became relevant to the case.

4. If the change is to trust information, click **[Trust]**. The **Select Individual Trust Fund Summary** response window appears with the current trust selected.
 - If you are changing the trust of which this vehicle is a part, elect it from the list and click **[Select]**.
 - If you are making changes to the trust information, click the **Detail** button on the toolbar. The **Collect Individual Trust Fund Detail** response window appears.
 - Complete Steps 4-7 of the Update Existing Trust Fund procedure.
 - Click **Save** on the toolbar and close the window. You return to the **Select Individual Trust Fund Summary** response window.

- Close the **Select Individual Trust Fund Summary** response window. You return to the **Collect Vehicle Detail** response window.
5. Click the **Vehicle Ownership Detail** tab.
 6. If you are making changes to any of the fields on the **Vehicle Ownership Detail** tab, enter the new **Effective Begin Date**.
 - Update the fields on the **Vehicle Ownership Detail** tab as necessary.
 - Click **Save** on the toolbar.
 7. If the change is to encumbrance information, click **[Encumbrances]**. The **Collect Encumbrance Detail** response window appears.
 - Enter the new **Effective Begin Date**
 - Update fields on the **Collect Encumbrance Detail** response window as necessary.
 - Click **Save** on the toolbar.
 - Close the **Collect Encumbrance Detail** response window. You return to the **Collect Vehicle Detail** response window.
 8. If the change is to the lien holder information, click **[Lien Holder]**. The **Collect Lien Holder Detail** response window appears.
 - Enter the new **Effective Begin Date**.
 - Update fields on the **Collect Lien Holder Detail** response window as necessary.
 - Click **Save** on the toolbar.
 - Close the **Collect Lien Holder Detail** response window. You will return to the **Collect Vehicle Detail** response window.
 9. If you are disposing of the vehicle, complete Steps 3-9 of the Update Resource Disposition procedure.
 10. Click **Save** on the toolbar and close the window. You return to the **Display Vehicle Summary** window.

The Update Existing Vehicle procedure is complete.

VIII. Key Things to Remember:

1. A vehicle must be evaluated at initial application and at reinvestigation.
2. Once a vehicle has been evaluated, it does not need to be re-evaluated again until the next RRR.
3. For **unlicensed vehicles**, the **equity value**, is the *countable value of the vehicle*, unless it is an excludable resource.

4. For licensed vehicles, **the total value of the vehicle may be excluded.** Worker needs to review vehicle for one of the exclusion reasons.

CalWORKs Eligibility Handbook	Restricted Accounts 51-33
	Effective: 6-27-17

51-33 Restricted Accounts

Recipients are allowed to save any amount of money in one or more accounts to spend only on four specific purposes. Withdrawals for other purposes, even for emergencies of a life-threatening nature will not be allowed. These accounts will be in addition to, or, in other words, exempted from, the recipient property limit.

I. Account Withdrawals are Only Allowed for 4 Specific Purposes

A. Purchase of a home that will be the principal residence of the AU.

- Allowable expenses include: deposits, fees, down payment, principal payment, repairs, fixtures, and closing costs. Furniture and household goods are not allowed.

B. Education or vocational training for anyone in the AU.

- Allowable expenses include: fees, tuition, books, school supplies, equipment, special clothing, housing, meals, transportation, and child care. The person must have been a member of the AU on or after the date a restricted account agreement was signed.

C. Direct costs related to starting up a new business by a member of the AU.

- Allowable expenses include: purchase and maintenance of capital equipment, required clothing, tools, inventory, loan payments for capital assets or durable goods, rent and utilities, shipping and delivery costs, salaries, fees, taxes, insurance, and bookkeeping or other professional services. Personal expenses such as entertainment are not allowed.

D. Qualified Disability Expenses (QDEs)

- CalABLE accounts are tax-advantaged savings accounts for individuals with disabilities to save, invest and use monies from the account, up to \$100,000.00, for “qualified disability expenses” (aka QDEs) without losing eligibility for CalWORKs or CalFresh benefits.
- Eligibility criteria for CalABLE accounts require that the individual(s) be eligible for, or currently receiving, SSI or SSDI benefits as a result of their disability AND the disability occurred before age 26; or able to provide a “disability certification” of the individual’s disability, which occurred before age 26, by the individual or his/her parent/guardian, along with a copy of a physician’s diagnosis when opening a CalABLE Account.
- Allowable expenses are not just limited to medical expenses, but may also include costs such as: health, education, housing, transportation, employment training and support, legal services, assistive technology and personal support services, funeral and burial services, and other expenses.

For more information on CalABLE accounts, refer to CW Handbook Section 51-30.1 Resource Limits - Specific, and [All County Letter 17-61, dated 6-27-17, Achieving a Better Life Experience \(ABLE\) Accounts for Individuals with Disabilities in California.](#)

II. Establishing an Account

A. First, several requirements must be met.

1. The account must be for one or more of the above four purposes, although the client is not required to declare what the purpose is at the time the account is established (see Part III below on Account Withdrawals).
2. The account must be with a financial institution (bank, credit union, savings and loan) and any interest must be deposited directly into it.
3. Whether it is a new account or an existing one which is designated as the restricted account, it must be maintained separately from any other accounts.

4. The Caretaker Relative (CR) must sign a written agreement before designating or establishing an account.

B. Form CW-86 is the required written agreement.

The Coversheet and Section A of the agreement notifies the client of all the restrictions and penalties, advises the client to have cash reserves under the regular property limit before establishing the restricted account, and warns the client that if there is a break-in-aid, the applicant property limits will be used (if there is a difference). These things should be verbally emphasized to the client before the form is signed. Give the client a copy of the Coversheet.

The CR must initial each point in Section A of the agreement before signing the form. If there is another adult in the AU and it will be a joint account, the other adult must also sign the form.

The client must provide the following information and verification:

- Account name(s)
- Name and address of financial institution
- Account number
- Account balance
- Account activity for the last 30 days

If the client can provide this information at the time of signing, have the client complete Section B of the form and make one copy, retaining the original for the case record and giving the copy to the client.

If the client cannot provide this information yet, make two copies of the agreement, retain a copy for the case record, and give the client the original and one copy.

The client will have 30 calendar days from the date of the signature in Section A to provide the required information and verification and to return the original agreement, completed and signed. This requirement is stated in Section B of the agreement.

If the client does not comply with the above requirement within 30 days, the agreement will not go into effect. Also, the client may request to stop the whole process at any time before signing the agreement (Section A or B). If this occurs, notate it in the county-use section on the bottom of the form.

III. Account Withdrawals

A. Receipt of Interest Payments

Interest which is received by the AU and not deposited directly into the account is considered a Non-qualifying Withdrawal.

If the receipt of interest was due to an error by the financial institution, the client is allowed 30 calendar days in which to deposit it into the account. Failure to do this will result in treating it as a Non-qualifying Withdrawal, unless the client has good cause for exceeding the 30-day period.

Earnings (including interest, if any) accumulated on CalABLE accounts are not subject to federal income tax and are not counted as income when used for QDEs.

B. Qualifying Withdrawals

1. Within 30 calendar days of any withdrawal, the client must:

- Expend the funds for one of the expenses described in Item I above, or
- Redeposit funds back into the account, if an anticipated expense does not occur or it is less than anticipated, and/or does not meet the QDEs criteria.

2. Within 30 calendar days of the expenditure, the client must provide:

- Verification of the balance prior to withdrawal and the date and amount of the withdrawal.
- Receipts, cancelled checks, or signed statements from the providers of goods and services verifying the types of expenses and amounts paid.

C. Non-qualifying Withdrawals

The following will be considered Non-qualifying Withdrawals:

1. Failure to deposit erroneously issued interest payments within 30 days, without Good Cause for exceeding the time limit.
2. Expending the funds on non-allowable expenses.

3. Failure to expend funds within 30 days, without Good Cause for exceeding the time limit.
4. Failure to redeposit unexpended funds within 30 days, without Good Cause for exceeding the time limit.
5. Failure to provide verification of the withdrawal and expenditures within 30 days, without Good Cause for exceeding the time limit.

D. Good Cause

1. Good Cause Determinations are only done for the issue regarding the time limit being exceeded and not for the issue of expending funds for non-allowable expenses.
2. Good Cause exists if the client complies with the requirements before the effective date of the negative action (see Part IV below for the Period of Ineligibility). Once the effective date is past, the action can only be rescinded if the Good Cause condition described in #3 below is met.
3. Good Cause exists when there are circumstances beyond the AU's control, such as, an illness or other medical emergency, lack of transportation, failed or delayed completion of a home purchase, or other extenuating circumstances.
4. If Good Cause is found, the client will be given a reasonable amount of time to comply with the requirements, based on the circumstances which caused the delay.
5. If Good Cause is found after negative action has been taken, the action will be rescinded.
6. Round down the result to the nearest whole number. This will be the number of months for the POI. If the difference from #2 is less than MBSAC (plus special needs), there will be no POI.

Note that the remaining amount from the computation in #3 and #4 is not applied as income in the first month after the POI.

B. Effective Date

The POI must begin on the first of the month following the Non-qualifying Withdrawal. If negative action cannot be taken until the second month due to the 10-day notice requirement, then that first month of the POI will be considered an overpayment.

C. NOAs

1. Discontinuances

For POIs of more than one month, discontinue the case. The NOA will be returned so that it can be completed. In the first paragraph, enter the last day of the month before the POI (effective date of discontinuance) and then the last day of the last month of the POI, and place a check mark next to the applicable paragraphs below it. Below the main text of the NOA, enter the figures for the POI computation.

2. One-month Suspension

Cases with POIs of only one month are suspended, not discontinued. When the NOA is returned, complete it as described above, but also place a check mark next to the paragraph at the very bottom. Since, the client remains a recipient during the suspension, the recipient property limits should still be used.

IV. Additional Information

A. Termination of the Agreement

The Restricted Account agreement terminates when the case is discontinued, when the restricted account is closed (a Non-qualifying Withdrawal does not automatically terminate the agreement), or when the regulation is changed.

B. Persons in a POI

A person who was a member of an AU when a POI was imposed would be considered a "person excluded by law" and cannot be added to another AU, until the POI has ended.

C. Additional Person during a POI

If an eligible person enters the home during the POI, the AU has a choice to make. They may either request to have their POI shortened (as in Item D above) or they may apply for aid for that person only. The others would remain excluded from the AU until the end of the POI.

D. Absent Parent Returns to Home

If an absent parent returns to the home, the 100-hour rule for applicants would be applied in order to determine eligibility. Then, if the family is found to be still eligible, the recipient property rules would continue to apply for the whole family, including the father.

E. Overpayments

If it is discovered that a client made a non-qualifying withdrawal several months in the past and, had it been reported at the time, the Period Of Ineligibility (POI) would have been only one month (i.e., a one-month suspension), then the overpayment would simply be the amount of aid issued during that one month, as long as the client remained eligible for aid as a recipient.

However, if the POI would have been more than one month, then the overpayment period may not be the same as the POI. Had the non-qualifying withdrawal been reported timely, the case would have been discontinued and the client would have lost status as a "recipient." That means the client would lose the recipient property limit AND the ability to have a Restricted Account (RA). Therefore, if there was a balance remaining in the RA and/or there was another (non-restricted) account which resulted in the total property being over the applicant limit, then the overpayment period would extend beyond the original POI until the "applicant limits" were met. In addition, if it was a U-parent case, then another applicant-only requirement would need to be considered: the 100-hour rule.

F. Food Stamps

The Restricted Accounts will be excluded as a resource for Food Stamps. Remember that even in mixed FS households, resources of recipients that are excluded under cash aid regulations are excluded for Food Stamps, too. However, if the cash aid case is discontinued, those exclusions will cease to apply.

CalWORKs Eligibility Handbook	Income Eligibility 51-55
	Effective: 5-15-19

51-55 Income Eligibility

(EAS 44-100)

Income eligibility is determined at the time of application and every month thereafter, based on actual income or a reasonable estimate of income expected to be received in the future month, according to all available information, but not including the anticipated receipt of a regular and periodic "extra" paycheck.

There are two tests of income eligibility, one for applicants only and one for recipients. The recipient test is also used for applicants who have passed the applicant income test. Note: the applicant test is used whenever a case has "applicant status" including any breaks-in-aid).

I. Two Important Concepts About Income

A. "Disability-based unearned income"

Certain types of unearned income which are issued because of a person's disability are in a category separate from other unearned income. Income in this category get a special disregard in the recipient income test and the grant computation. Not all types of "disability-based" unearned income are included in this category, only those that are listed below. Any disability income which is not listed below does not get the disregard:

1. State Disability Insurance (SDI)
2. Temporary Workers' Compensation (TWC)
3. Temporary Disability Indemnity (TDI) benefits
4. Private Disability Insurance benefits
5. Social Security Disability Insurance (SSDI) benefits

Note: The person receiving the income does not have to be disabled, does not have to be in the AU, and does not have to be in the home. This means that the disability-based income of children who themselves are not disabled, but are receiving the income based on the disability of a parent not in the home, will get the special disregard.

B. "Family Members"

This concept refers to the AU and certain family members who live with the AU whose needs and/or income are considered when determining income eligibility and the grant amount.

The following is a list of the types of persons included in the "Family" whose income and needs we consider. Note that "considering the needs of a person" means counting them in the family size:

Step-Parents and step-siblings of aided children

Senior Parents and minor siblings of the minor parent

Ineligible Alien Parent

Ineligible Alien Children

Other Persons Excluded or Ineligible, such as

Father of Unborn (in a Pregnant Woman Only case)

Spouse of Aided Child

Sponsored Aliens

Drug Felons

Fleeing Felons

The following is a list of the types of persons whose income we consider but whose "needs" we do not, i.e, they are NOT counted in the family size.

Persons sanctioned for non-cooperation relating to:

Child Support (refusal to assign support rights)

Social Security Numbers

Potential Income

Fraud/Intentional Program Violations (IPV)

Work Requirements

School Attendance

Immunization

Also note that when the State refers to "Non-AU family members" in any of their ACLs, ACINs, forms, or regulations, they are referring specifically to the persons listed in Item I.B.1 above.

II. The Income Tests

Neither of the two income eligibility tests are completely based on gross income. Both are based on "net" income amounts.

Note: Both income tests below do not consider any "special needs." Special needs are not considered until the grant computation.

A. Applicant Financial Eligibility Test

If there are no other persons living in the home with the AU, the applicant test is quite simple. If the AU has earned income, a \$90 disregard is allowed for each employed person, then the total net income is compared to MBSAC for the family. If the income exceeds MBSAC, the AU is not eligible. If the income is equal to or less than MBSAC, then the recipient net income test is applied.

If there are other persons in the home with the AU, the applicant test is a little more complicated. If the other persons in the home fall into the categories of persons in I.B.1 or I.B.2 above (page 2), their income is treated the same way as the AU's. Again, the \$90 disregard is given for each employed person. The part of the computation where the net income is compared to MBSAC is different, however, for persons in I.B.1 and I.B.2. Whereas persons in I.B.1 are included in the family size when determining the amount of MBSAC, persons in I.B.2 are NOT included.

To see MBSAC Tables, click on <https://www.cdss.ca.gov/Portals/9/ACL/2019/19-47.pdf?ver=2019-05-15-133708-453> (link updated 5/15/19)

B. Recipient Financial Eligibility Test

Once an applicant family passes the applicant net income test, they are subject to the recipient net income test. For continuing eligibility (no break-in-aid), recipients do not have to pass the applicant test, only the recipient test. Also, only the recipient test is used when adding a new person to the AU. The recipient test may also be referred to as the "financial eligibility test."

1. The following is a list of the income disregards:

a. \$225 Disregard

For any Disability-based Unearned Income FIRST. THEN for any Earned Income (if any unused disregard)

Changes to Income Disregards:

Effective July 1, 2011, the \$225 disregard will remain the same for disability based income.

The disregard will be limited for the earned income, to any remaining disregard of the \$225 used to calculate the disability based income, or \$112, whichever is less.

If the disability based income does not exceed \$225, all of the disability based income (DBI), plus any amount of the non-exempt earned income is disregarded not to exceed the lesser of \$112 or the difference between the DBI and \$225, plus 50 percent of any remaining earned income.

If the DBI exceeds \$225, only the first \$225 of the DBI and 50 percent of any earned income is disregarded. Any remaining DBI and remaining earned income is treated as part of the family's net countable income.

What do I do?

Step 1:

Is there any disability based income? If yes, then apply the \$225 income disregard.

If No, Go to Step 4.

Step 2:

Was the disability based income less than the \$225 income disregard? If so, there will be a negative number left over.

Step 3:

Is there non-exempt earned income? If so, the remainder (the negative amount) or \$112, whichever is less will be the disregard that the AU is eligible to plus 50 percent of the remaining earned income.

Step 4:

If there is no disability based income, then the entire \$112 earned income disregard applies, plus 50 percent of the remaining earned income.

Intake will begin calculating eligibility and grant amounts effective July 1, 2011.

For carrying units, the new EID will begin with any income reported on a recipient June QR7 for the upcoming July/August/September payment quarter.

If an AU's quarter is June/July/August, the grant amount is not due to be recalculated until the receipt of the July QR7, in August.

In these cases, the new EID will not be used until August, for the September/October/November payment quarter. The AU still must report if their income is over IRT and their case may be discontinued at that time.

Scenario 1 – Disability Based Income (DBI) less than \$225:

A nonexempt Assistance Unit (AU) of three (an adult and two children) has gross earned income of \$800 per month. The children each receive \$100 per month in unearned income from the absent parent's disability claim. The family lives in Region 1.

\$200 DBI
-225 DBI disregard
(-\$25) Remainder - Earned Income Disregard (EID)
\$800 Earned Income
-25 Remaining EID
\$775
-387 50 percent EID
\$387 Net Non-Exempt Income (NNI)
\$638 MAP for AU three (Region 1)
-387 NNI
\$251 Grant Amount

Scenario 2 – DBI greater than \$225:

A nonexempt AU of three (an adult and two children) has gross earned income of \$600 per month. The children each receive \$200 per month in DBI from the absent parent's disability claim. The family lives in Region 1.

\$400 DBI
-225 DBI Disregard
\$175 Nonexempt Disability Income
\$600 Earned Income
-300 50 percent EID
\$300 Subtotal
+175 Nonexempt Disability Income
\$475 NNI
\$638 MAP for (AU) three (Region 1)
- 475 NNI

\$163 Grant Amount

Scenario 3 – No Disability based Income – A nonexempt AU of three (an adult and two children) has gross income of \$800 per month. The family lives in Region 1.

\$800 Earned Income
-\$112 EID
 \$668
- 334 50 percent EID
 \$334 NN1
 \$638 MAP for (AU) three (Region 1)
-\$334
 \$304 Grant Amount

b. 50% Disregard

For any Earned Income (including any remaining amount after the \$225 disregard is applied)

2. As with the \$90 disregard in the applicant test, the disregards above are applied to the income of not only the members of the AU, but to others in the home who fall into the categories in I.B.1 and I.B.2. Unlike the \$90 disregard in the applicant test, however, these disregards are given once for the whole family, not for each employed person.

After the disregards are applied, the total Net Non- exempt Income (NNI) is compared to the MAP for the family size, which is determined the same way as the MBSAC for the applicant test. That is, persons in I.B.1 are included in the family size when determining MAP, and persons in I.B.2 are not. If the NNI is less than MAP, the family is eligible. If it is equal to or Greater than MAP, the family is not eligible. Note that an informal term to describe this MAP is "Big MAP."

III. Grant Computation and Budgeting Methods

See Section 53 for explanations about the grant computation and budgeting methods

IV. Denial/Discontinuances

- A. Aid shall be denied or discontinued when the family fails to meet the appropriate income eligibility tests.
- B. A family which receives aid based on a reasonable estimate of total income shall not later be considered ineligible if the actual total income exceeds the estimate; however, the family is considered ineligible in the following month and timely notice must be given.
- C. Aid that was issued in error because a client failed to disclose all available information in a timely manner would be considered a collectible overpayment. Note that the client's change reporting requirements include notifying the county about significant changes within 5 days of occurrence.
- D. If aid is discontinued or denied because the estimated total income is expected to result in ineligibility and this amount of income is not actually received, the discontinuance or denial must be rescinded and the correct grant issued.

CalWORKs Eligibility Handbook	Residence -General 51-60
	Effective: 06-02-10

51-60 Residence - General

Residence in the state, but not in the county is required. There is no durational residence requirement. It is necessary to determine the county in which the client is residing in order to establish county responsibility for payment of aid. If an applicant moves from one county to another to make his home after the application has been signed or restoration requested, the county receiving the application must complete the determination of eligibility or ineligibility. An intercounty transfer would then be initiated. (See Section 57-5, Intercounty Transfer.)

Residence is established by physical presence in the state. A person, including a child, establishes residence by physical presence for purposes not temporary in nature. A child cannot be denied aid solely on the grounds that the parent having custody is not lawfully present in the United States.

A husband or wife may each have separate residence, a fact which is established by the actions and intent of each. An applicant for or recipient of aid does not lose residence for aid because of marriage, but moving out of state with the spouse implies intent to establish residence elsewhere.

The place of residence for persons who are deprived by court action of freedom of movement remains the same as at the time of the court action.

The place of residence for one for whom there is a court-appointed guardian or conservator of the person may be changed by decision of the guardian or conservator accompanied by removal of the ward or conservatee to another place.

Persons on parole from correctional institutions may, by intent, establish residence.

Homeless: All homeless CalWORKs participants must choose a mailing address where they can be sure to get their mail. This must be a San Francisco address, and may be:

- In care of a friend, relative, or community organization
- General Delivery
- A post office box (P.O. Box)

Homeless participants must sign Form 4412 (CalWORKs Homeless Mail Address). All homeless participants must be given a verbal explanation of the 10-day Notice of Action rule, and be told the importance of Notices of Action, required reports, and other CalWORKs correspondence.

I. Applicant or Recipient Responsibilities

An applicant or recipient, including the parent or person responsible for the child receiving cash aid, shall:

- A. Immediately inform the worker if he goes to another county, state, or country for either a temporary or an indefinite stay.
- B. Inform the county monthly, in writing, of the following:
 1. The circumstances and reasons for remaining out of state.
 2. His intent to retain residence in California
 3. Changes in his living plan, his income, and his need.

If the client fails to promptly submit such written statement, it will be presumed that he has changed his place of residence or that need no longer exists. The case will be immediately discontinued.

II. Worker Responsibility

When a client reports that he is planning to leave California or reports that he is currently out of state, the worker must explain the client's reporting responsibilities so that there will be no inappropriate discontinuance of aid. Inquiry must be made with the next aid payment from all clients who have been continuously absent from the state for 30 days or longer in order to determine their intent to maintain California residency. Aid shall be discontinued immediately if inquiry establishes that the person is no longer a California resident. (See Section 51-62, How To Establish Residence Intent When Client Visiting or Moving Out of State.)

III. Evidence Required

The written statement of the applicant or recipient is acceptable to establish intention and action on establishing residence unless the statement is inconsistent with other statements on the Statement of Facts or with the conduct of the person or with other information known to the worker.

IV. Persons on Parole

Persons on parole from correctional institutions may by intent establish residence.

CalWORKs Eligibility Handbook	Homeless Mailing Address 51-60.1
	Effective: 5-24-16

51-60.1 Homeless Mailing Address

Homeless - Mailing Address

Homeless CalWORKs participants must choose a mailing address where they can be sure to get their mail. This address should be a San Francisco address, and may be:

- In care of a friend, relative, or community organization
- General Delivery, 391 Ellis Street, San Francisco, CA 94109

- A Post Office box. (P.O. Box)

Some homeless clients have a mailing address outside of San Francisco. In order for their Medi-Cal Eligibility to be available in San Francisco and for MEDS to show active in SF, the home address will be 391 Ellis Street. SF, CA 94109.

All homeless participants must be given a verbal explanation of the 10-day NOA rule, and the importance of Notices of Action, Semi-Annual Reports, and other CalWORKs correspondence.

All homeless participants must sign Form 4412, CalWORKs Homeless Mail Address Form. By signing the 4412, participants state that they understand their responsibilities to make sure they get their mail, stay in touch with the County and file their required reports, including the SAR7

General Delivery is usually the best solution for participants who don't have a friend or relative that they trust to hold their mail.

It is located at 391 Ellis Street, S.F. CA 94109 between Jones and Taylor Streets. Anyone picking up mail from General Delivery must present a photo ID to retrieve their mail. Mail is held for seven days.

Sub-Section 51-60.2

Housing Support Mailing Address for Clients placed out of County

Housing Support Program is placing clients outside the county of San Francisco. They remain San Francisco CalWORKs cases. The mailing address will be their actual address outside San Francisco, however, their home address will be 170 Otis St, SF, CA 94103.

CalWORKs Eligibility Handbook	Loss of Contact/Whereabouts Unknown 51-60.2
	Effective: 05-01-10

51-60.2 Loss of Contact/Whereabouts Unknown

I. Roles and Responsibilities regarding Residency in CalWORKs

CalWORKs AUs are required to report any change of address to the EW within ten calendar days. This report must be made in person, verbally, or in writing. The AU is also required to inform the EW immediately if the AU plans to reside in another county, state, or country regardless of the anticipated date of return.

Residence in California, but not in San Francisco County, is a requirement for continued eligibility for aid. AUs may not be automatically discontinued for “whereabouts unknown” because they may still be eligible for CalWORKs if they are still residing in California. However, it is necessary to determine the county in which the AU is living in order to establish county responsibility for continued payment of aid.

The EW’s loss of contact with the AU can result in the EW being unable to request information necessary to determine continued eligibility for aid, which may result in aid being discontinued.

When questions regarding an AU’s place of residence arise, the EW is responsible for reviewing the circumstances of the case and contacting the AU to provide them with an opportunity to clarify the discrepancies. Contact with the AU must be attempted and should occur before making any FRED referral or taking any action against the grant.

II. Mail returned as “Undeliverable” or “Addressee Unknown”

The AU has a responsibility to report a Change of Address with ten calendar days. If, however, the AU does not report this change verbally, in writing, or via the QR 7, and mail sent to the only known address returns as undeliverable or without any forwarding address, the EW must attempt to reach the AU to resolve conflicting information, and send a notice of incomplete QR 7. After this notice, and the documented Balderas attempt at personal contact, the EW will discontinue cash aid at the end of the quarter.

The EW can take mid-quarter action to terminate cash aid when mail has been determined as “undeliverable” or “addressee unknown” if it is determined after notice and the documented Balderas attempt at personal contact that the client has moved out of California.

III. EBT Tracking

EWs may learn through review of EBT transaction reports that the AU is making purchases in a county other than the one in which they reside. If an EW learns of a purchase made outside of the AU’s county of residence, the EW should first review the case circumstances to determine if the AU might have reasons for making out-of-county purchases. The AU may be visiting friends or relatives or making routine trips outside the county of residence. If the EW determines that the out-of-county purchases are reasonable, no further action is required.

If, however, an EW suspects a problem with a specific case of finds discrepant information, the EW must follow up with the AU to gather more information before making any FRED referral. The EW should contact the AU to provide them with an opportunity to confirm, refute, or clarify any identified discrepancies before making a FRED referral.

Examples of discrepant information might include the following situations:

- The AU lives in one county but all AU purchases are made in another county, when not consistent with case information
- Mail delivered to the current county address returns with a forwarding address in another county
- Telephone calls made to the current AU residence are always answered by an unidentified person who must always take a message and have the AU return the call, when the case does not indicate that the number provided is a message number.

IV. FRED referrals

If the AU refuses to provide additional necessary information or provides conflicting information to the EW after an attempt is made to clarify residency, the EW has reasonable grounds to do a FRED referral. Additionally, the EW may make a FRED referral if the EW has reason to suspect that potential fraud exists. In that case, the EW may forego contacting the AU before the FRED referral to avoid interfering with the follow-up investigation.

Reasonably grounds for a FRED referral may exist when:

- A questionable situation exists and the AU refuses to cooperate in providing additional necessary information; and/or
- The EW finds conflicting information or facts regarding the case that could affect eligibility or benefit amount, and any further action on the EW's part could jeopardize the investigator's ability to investigate.

CalWORKs Eligibility Handbook	Clients Visiting from Out of State 51-62
	Effective: 03-01-98

51-62 Clients Visiting from Out of State

By regulation, absence from the state for a period of 60 days or longer is evidence of intent to establish residence outside the State of California. If the recipient is prevented from returning to California by verified illness or other good cause, aid may be continued until the good cause no longer exists, provided other conditions of eligibility are met. In all other cases, aid must be discontinued no later than the end of the month in which 60 days of absence expires, unless the recipient supports his intent to return to California.

I. How To Establish Intent

A. Unless the client's absence from the state for more than 60 days is due to good cause, his intent to return to California must be supported by one or a combination of the following:

1. Family members with whom the client lived prior to leaving California, currently live in California.
2. The client has continued maintenance of his California housing arrangement (owned, leased, or rented).
3. The client has employment or business interests in California.
4. Any other acts or combinations of acts by the client which establish intent to reside in California.

B. Even if the client's intent to reside in California is supported by 1 through 4 above, it may still be established that he does not have the intent to reside in the state if any of the following situations occur and are significant enough to negate the evidence that supports California residence.

1. The client has purchased or leased a house outside of the state since leaving California
2. The client has been employed out of state since leaving California
3. The client has obtained an out-of-state driver's license since leaving California
4. The client has taken other action which indicates his intent to establish residence outside of California.

Continuous absence of 60 days or longer shall not be prima facie evidence of the client's intent to have changed his place of residence to a place outside of California

where he clearly shows he has not, by act or intent, established residence outside of California, and his return to California was prevented by illness or emergency.

II. Client's Responsibility

The client has the responsibility of informing the county if he goes to another state or county, regardless of the anticipated date of return. He is responsible for informing the county of changes in his living plans, his income, and his need. The client shall cooperate with the county and provide it with a monthly written statement explaining his reasons for absence from California and his anticipated date of return. Failure to promptly provide such statement will result in immediate discontinuance of aid payments.

III. Worker Responsibility

When a recipient reports that he is planning to leave California temporarily or that he is currently out of state temporarily, the following actions should be taken:

- A. Explain verbally to the client, if possible, the above residence requirements and inform him that if he plans to remain in the other state he may apply for aid there if he believes he is eligible for aid.
- B. Determine the date the client is leaving or left the state.
- C. Obtain new address and enter it into CalWIN.
- D. Recompute budget if there is a change in need or income.
- E. Do a Tickler to remind you that 30 days' notice must be sent. (Compute 30 days starting with the first full day of absence from the state.)
- F. If the client has not returned to the state within 30 days of departure, send a letter, asking when he is going to return.
- G. Do a case alert indicating when 60 days' absence will occur, in order to take appropriate action on the aid payment.
- H. Based on information received, the following actions will be taken:
 - 1. If the inquiry establishes that the client is no longer a California resident, aid shall be discontinued immediately.

2. If the client does not respond to the inquiry within 30 days, it shall be presumed that the client does not intend to return to California and aid shall be discontinued immediately.
3. If the client notifies the worker that the application is being made in the other state, the worker must write to the appropriate state or local welfare department in the other state to coordinate discontinuance of aid from California and the granting of aid in the other state.
 - a. Aid shall not be continued by California beyond the end of the month following that in which the recipient applies for aid in the other state. No 10-day notice is required.
 - b. If the client is not eligible for aid in the other state, aid shall be discontinued immediately upon notification of this by the client or the other state. No 10-day notice is required.

If notice is received indicating that the client is unable to return within 60 days and there is verified illness or other emergency accounting for his inability to return or support for his intent to retain California residence, aid may continue as long as there is an emergency preventing the client from returning to the state and other eligibility conditions are met. Residence intent and illness or other emergency must be verified each month. Failure to provide the county with required information will result in immediate discontinuance of aid.

Also see Section 53-6, Income-in-Kind - Temporary Absence from the Home.

CalWORKs Eligibility Handbook	Refugee Cash Assistance 51-63
	Effective: 11-1-19

51-63 Refugee Cash Assistance

EAS 69-200, 70-100

I. Introduction

Refugee Cash Assistance (RCA) provides federal funding to cover the cost of time limited financial assistance to refugees. RCA is limited to up to eight months. (The start date depends on the immigration status – see Eligibility section III below.

RCA connects refugees to appropriate activities such as job search, job training, adult education, skill training, community work, English language training, and other employment related activities. By using appropriate available resources to follow through on an individualized employment plan, including providing supporting services such as financial assistance on a short term basis, a refugee will move toward their maximum achievable self-supporting level as quickly as possible. RCA is cash aid for those not eligible for other programs, specifically single adults who do not have children, and married couples who do not have children.

II. Definitions

A **refugee** is a non-citizen given permission to come to the United States because he or she was persecuted, or has a well-founded fear of being persecuted on account of race, nationality, religion, political opinion, or membership in a particular social group in his or her own country.

Refugees are given this status before coming to the US, usually when they are temporarily located in a third country. A refugee is granted the right to live and work in the US and, after a one-year period, may apply to become a legal permanent resident (LPR).

Asylum status and refugee status are closely related. They differ in the place where a person asks for the status; asylum is asked for in the United States and refugee status is asked for outside of the United States.

T-visa for trafficking victims: Federal law defines severe forms of trafficking in persons to mean:

- Sex trafficking in which a commercial sex act is conducted by force, fraud, or coercion, or in which a person induced to perform such acts is under 18, or
- The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

U-visa: The U visa, for victims of criminal activity, allows certain individuals to remain in the United States after applying for a U visa and who are willing to cooperate with law enforcement officials and who need support and services. U visa clients are served under the state TCVAP program only. The eligibility period is eight months. There is no federal eligibility.

In California, applicants who are in the process of applying for a T visa may receive state-funded benefits equivalent to federal RCA benefits under the state TCVAP program.

T and U visa clients and the procedures for these persons are discussed in Eligibility Handbook section 51-65.2

Cuban and Haitian Entrants receive parole or other special status allowing them to stay in the US.

Amerasians are Refugees born in Vietnam during 12/31/1960 to 10/22/1982 and fathered by a US Citizen.

Special Immigrant Visa (SIV) are Iraqis and Afghans who were employed by or assisted the U.S. Armed Forces with translation and interpreter services.

III. Eligibility

Intake eligibility for RCA has to be determined within 30 days from application. Signed RS-3 form or other written verification of registration has to be received prior to approving cash aid. (EAS 69-207) RCA is consistent with CalWORKs in determining initial and ongoing eligibility. The time limit for eligibility is up to eight months.

The following individuals are eligible to apply for RCA based on the following:

- Refugees, Special Immigrant Visa (SIV) and Amerasians with a start date at time client is entering the US (as of 9/7/15 the date).
- Asylees: from date asylum is granted. An asylee will generally have a written decision from Immigration or a letter from an immigration judge stating that asylum has been granted ("Applying" or "Recommended" for asylum is not the same as having been granted asylum. To be eligible to RCA benefits, asylum must be granted.)
- T visa for human trafficking: from date certified by ORR or date of application if not ORR certified
- U visa for victims of serious crime: In determining eligibility for these applicants, workers must verify that a request for U Visa Interim Relief of applications for a U visa has been filed. the date of application is the date to use for the beginning of RC
- Eligibility of each RCA applicant shall be determined as promptly as possible within no more than 30 days from the date of application
- Cuban and Haitian Entrants starts at date parole or other status is granted.

IV. Documentation

Applicants must present at least one of the following documents:

- I-94 Arrival/Departure Record (needs to be requested online by the client at www.cbp.gov/I94)
- Letter granting Asylum
- ORR Certification Letter

The I-94 contains the individual's Alien, or "A", number. This number is connected to an individual's entire immigration history, and is used by the Department of Homeland Security to track individuals' status, applications for immigration benefits, etc. Enter the A number in CalWIN

- On the I-94, the "A" number may be found on the front or, the back of the card. It is a nine-digit number (if only 8 digits, add a zero to the front).
- Eligibility workers MUST photocopy the front and back of the I-94 for their records, as both sides of the card may contain important information, such as the A#.
- The electronic version of form I-94 is available at www.cbp.gov/I94 and can be obtained after a refugee enters his or her name, date of birth, and alien number into the proper fields. The electronic record will be available within hours of the refugee's arrival at the POE. Note: The refugee's alien number must be entered into the passport number field regardless of whether the refugee has a passport number. The alien number should be entered as numbers only without the preceding "A".

Social Security Cards

- Workers may request a Social Security number from an RCA applicant
- The reason for this request must be explained to the applicant and documented in case comments
- The Social Security number may be recorded however, **copies of the Social Security cards are not to be kept in the case file.** Workers should note that they viewed the Social Security number, and document the number in CalWIN.

V. General Requirements

As an applicant for RCA, a refugee shall not, without good cause, within 30 consecutive calendar days immediately prior to the application for assistance:

- Voluntarily quit employment
- Refuse to accept an offer of employment or employment-directed education or training
- Refuse to participate in a county welfare agency-approved or referred employment-directed education or training program
- Be a full time student in a college program in an institution of higher education

VI. Cash Supplement

San Francisco issues a cash supplement to RCA clients that makes the RCA cash grant equal to the PAES grant under aid code A4. The issuance is done via NSDI by an assigned Eligibility supervisor.

NOTE: Effective November 2019, all RCA supplements are being issued on EBT.

VII. Notices

Timely and adequate notices of action must be issued to RCA recipients when the eight months of federal eligibility ends. During the eight months of federal eligibility, timely and adequate notices are required if the recipients fails to adhere to RCA program regulations, such as not submitting a SAR 7 when due, and being sanctioned for not participating in WtW activities. NOAs must be mailed or provided to clients at least 10 days prior to the date refugee cash aid is reduced, suspended, or terminated. (EAS 69-210.1). Case comment on all actions reducing, suspending, or terminating RCA cash aid.

VIII. Medi-Cal in RCA Cases

Medi-Cal is cash-linked as long as client is receiving RCA cash benefits. At the time RCA cash benefits will end, client will need to be evaluated for MAGI Medi-Cal. Clerks will transfer Medi-Cal program to Medi-Cal for MAGI Medi-Cal eligibility determination.

All new RCA applicants should be offered a referral to the Newcomers Health Program for a comprehensive Health Assessment at the San Francisco General Hospital's Refugee Medical Clinic.

- Referrals should be made using the ["Newcomers Health Program/Refugee Health Clinic Referral Form"](#) and faxed over to: 415 206-5513
- EW shall make case comment that referral was offered and faxed over to clinic, or client declined referral.

IX. Unaccompanied Refugee Minors Program (All County Letter 16-03)

The URM Program provides culturally and linguistically appropriate child welfare, foster care, and independent living services to minors, who do not have parents in the United States (U.S.), or who enter the U.S. unaccompanied by a parent, an immediate adult relative, or an adult having documentable legal evidence of custody of the minor. For more information about this program and guidelines addressing foster care and medical assistance for minors that are participating, please click on the link below.

<http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2016/16-03.pdf>

X. National Volunteer Settlement Agencies (VOLAG)

Most of the refugees who reach a community will have been resettled by one of the national voluntary agencies (VOLAG) or Resettlement Agency (RA) working with the Federal Government and will have a local sponsor.

As part of the process of determining refugee's eligibility for cash assistance the Intake EW shall:

- Inquire what assistance, if any, the VOLAG is providing for the refugee and;
- Inquire whether the refugee has refused an offer of employment or has voluntarily quit a job.
- A written statement by the sponsor or VOLAG form 4102 is required.
- Information received by the VOLAG shall be documented in CalWIN case comments and shall include the name of the VOLAG.
- When a VOLAG or sponsor requests the address and telephone number for a refugee, the Intake EW shall provide this information to the VOLAG or sponsor.
- If the refugee refuses to provide information regarding his/her sponsor or VOLAG, the EW shall deny or discontinue aid.

XI. Welfare to Work activities

RCA eligibility must be determined within 30 days. The Intake EW must immediately notify the ES of the date of approval of RCA benefits. RCA recipients must begin an appropriate Welfare to Work activity within 30 days of receipt of application. The 30 day period begins with the notice of approval of RCA benefits.

- RCA applicants must sign a work participation agreement before being eligible for cash aid, unless exempt.

- RS 3 – Service Provider Referral/ Notification Form (sections 1 – 14 should be completed by Intake Worker). RCA ES signs and dates #15
- If Refugee is exempt a CW 61 must be in the case file to grant a medical exemption.
- A copy of the CW61 must be in both the EW & the ES case folders. When granted exemption document in case notes that refugee was informed of exemption and he/she is not mandated to participate in WtW activities, unless he/she volunteers to participate. EW and/or ES will document in case notes if client is exempt, but volunteers to participate in WtW activities.
- Sensitive and medical information should not be included in a client's case file, unless required by law for eligibility determination purposes. Files must not contain personal medical information for clients. Only a physician's letter stating that the client has a medical condition preventing them from participating in employment services is required for good cause determination. Approved RCA client must begin participating in county- approved employment-related training program within 30 days
- Medical exemption must be followed up (CW61)
- Approval Notice of Action (NOA) must be issued accordingly as required by MPP Sections 69-210.00 and 69-210.12.
- NOAs (NA 991) must be issued accordingly in a timely manner and (SAR7 vs. ending 8 months of RCA aid)
- Timely (10 days) NOA
- Unrelated case information must be remove from the folder (e.g. address, school identification, health cards, birth certificate, bank statements or California Identification cars)
- Cause determination must be initiated within 10 working days
- Two-person case, both clients must registered and participate in a County Welfare Department (CWD)-approved employment-directed education/training program as required for all non-exempt clients under the Manual of Policies and Procedures (MPP) Section 69-207.11.
- Client is entitled to DOCUMENTED translation services

- Clients must be advised of their right to free interpretive services at each client contact.
- An interpreter may be provided using a variety of methods which include the following:
 - > Use of Bilingual Staff
 - > County Interpreters
 - > Contracted Interpreters
 - > Language Line
- All Family Self Sufficiency Plans must be complete and up to date.
- RS 36 – Employment and Training Requirements (RCA). This form must be signed by the participant and the EW. The RCA ES reviews this document with the participant.
 - The RS 36 Rights and Responsibilities form must state the preferred language and have the participant’s signature.
 - County may document an appropriate verbal translation has been provided in regards to a specific form by:
 1. Checking appropriate box on the form attesting it was translated to, and understood by, the participant. The form needs to be signed and dated by the participant and the translator; and/or
 2. Making an entry in the case comments attesting the form (name of form must be specified) was translated to, and understood by, the participant.

The EW must communicate to the ES whether the client is eligible to work in the US. For TCVAP clients without work authorization, the ES must schedule appropriate activities. For RCA and certified T visa clients, there must be proof in the case file that the client is engaged in federally approved WtW activities.

If non-cooperation with WtW activities occurs, the EW will receive a copy of RCA 43 (Notice of Participation Problem). The ES has ten days from learning about the non-participation to determine good cause. If there is no good cause, the EW will receive a copy of RCA 44 (Notice of No Good Cause Determination and Compliance Plan Appointment). The EW will receive an email from the ES to impose a sanction with timely and adequate notice.

For further details, see WtW Handbook section 74-7.

XII. CalWIN Entries and Case Comments

Below is a chart that indicates immigration status entries in CalWIN, Special Indicator data, and whether the RCA applicant/recipient receives federal or state-funded food stamps.

All T and U visa applicants must be coded with the appropriate special indicator. In family cases, if the parent(s) has or has applied for a T or U visa, the appropriate special indicator must be used.

Category (Single Adult)	Immigration entry in CalWIN	Special Indicator	Cal Fresh
T visa (has visa)	RCA	T visa	Federal
T visa (applied for)	RCA	T visa-pending	CFAP
U visa	RCA	U visa	CFAP
Other RCA (single)	RCA	None	Federal
RCA Family	Regular CalWORKs	If adult in family is T or U visa, or T visa pending, use appropriate special indicator. No indicator is used for refugees or asylees	Can be federal, CFAP or mixed

Non-English speaking clients must be provided with translations of forms and interpreters as needed. County staff must document that an appropriate verbal translation has been provided in regard to a specific form by writing a statement on the form attesting that the form was translated for and understood by the client, and having the statement signed and dated by both the translator and client; and/or making an entry in Case Comments attesting that the form was translated for and understood by the client. The name of each form must be specified in the Case Comments.

CalWORKs Eligibility Handbook	Citizenship and Immigrants 51-65
	Effective: 05-01-10

51-65 Citizenship and Immigrants

Only citizens of the United States and certain categories of noncitizens are eligible for CalWORKs benefits. Citizens must prove their citizenship and noncitizens must prove their eligible alien status. Aid shall not be authorized until eligible alien status is verified.

All individuals applying for assistance who state that they are U.S. citizens may receive aid pending verification of their citizenship. The applicant's sworn statement under penalty of perjury will be considered sufficient for a period of 90 days. Documentation must be obtained as soon as possible.

If the individuals are not U.S. citizens, aid cannot be authorized until eligible alien status is verified. If a noncitizen is sponsored, refer to Sec 52-6, Non Citizens Sponsored by Individuals.

I. Eligibility Requirements (EAS 42-431)

To be eligible for CalWORKs, an applicant or recipient must be a resident of California who is either:

A. A citizen of the United States, (defined for eligibility determination purposes to include persons who, though not U.S. citizens, are nationals of the United States by reason of their birth in certain unincorporated U.S. territories such as American Samoa or the U.S. Virgin Islands), or

B. An noncitizen who is:

1. Lawfully admitted for permanent residence, or

2. Permanently residing in the United States under color of law, including:

a. Noncitizens lawfully present in the U.S. as a result of the application of the following provisions of the Immigration and Nationality Act:

i. Section 207(c), after March 31, 1980 - Aliens Admitted as Refugees.

ii. Section 208 - Aliens Granted Political Asylum by the Attorney General.

iii. Section 212(d)(5) - Aliens Granted Temporary Parole Status by the Attorney General.

3. Aliens granted status as Conditional Entrant Refugees pursuant to Section 203(a)(7) of the Immigration and Nationality Act in effect prior to April 1, 1980.
4. Aliens granted indefinite voluntary departure in lieu of deportation.
5. Aliens granted an indefinite stay of deportation.

II. Proof of Citizenship or Eligible Alien Status (EAS 42-433)

A citizen must prove his or her citizenship to be eligible. A noncitizen must prove that he or she is one of the eligible categories described above, by presenting the appropriate documentation as described below.

A. Cooperation

Every applicant and recipient shall provide all information necessary to determine his or her citizenship or alien status.

An applicant or recipient whose citizenship or alien status is proven by a document issued by U.S. Citizenship and Immigration must cooperate with U.S. Citizenship and Immigration when it is necessary for the documentation to be verified. Any applicant or recipient who refuses to cooperate in the verification of his or her status is not eligible for assistance.

1. Verification of alien status may be necessary for a naturalized citizen or person whose American citizenship is derived from the citizenship of another person, or when the documentation is believed to be of doubtful authenticity.

B. Documentation - U.S. Citizens

1. U.S. citizenship as defined above shall be documented by one or more of the following:
 - a. A birth certificate, or similar proof of birth in the United States or United States Territory.
 - b. U.S. Passport.
 - c. Certificate of Citizenship or Naturalization provided by the U.S. Government

- d. An identification card for use of a resident citizen in the United States (INS Form I-179 or I-197).
2. If such evidence is not available, the applicant shall state the reason and submit other evidence which proves his or her birth in the United States or United States Territory, or his or her citizenship.
 - a. Examples of "other evidence" documents which show the date and place of the applicant's birth are:
 - i. Confirmation papers or church records of confirmation,
 - ii. School records.
 - iii. Indian agency records (if applicable)
 - iv. Adoption decree (if birth in the U.S. or U.S. Territory is shown)
 - v. Copy of discharge from military service
 - vi. Marriage certificate
 - vii. Affidavits or declarations made under penalty of perjury by persons with direct knowledge of:
 - a. the date and place of the applicant's birth in the U.S. or
 - b. the U.S. citizenship of the applicant's parents, or
 - c. facts concerning the applicant which would not exist if he or she were not a citizen.
3. An otherwise eligible person who states that he or she is a U.S. citizen, but who cannot provide the documentation or other proof as specified above, shall be eligible for aid pending verification of citizenship for period of up to 90 days after the date of application, restoration, or reapplication. Efforts to obtain satisfactory documentation must be made by the applicant or recipient during the period.

At the end of 90 days, aid to the recipient will be terminated unless the county determines that an extension of time is necessary to obtain the required documentation. The extension will not extend beyond the next annual redetermination date. At that time, if no satisfactory proof of citizenship can be obtained, the recipient will be terminated from aid.

4. Aid to a person receiving aid pending verification of citizenship will be terminated if during the period of documentation gathering:
 - a. He or she refuses to cooperate with the ES/EW and or U.S. Immigration in determining his or her citizenship
 - b. The ES/EW verifies that he or she is not a citizen of the United States.

C. Documentation - Noncitizens

NOTE: US Customs and Immigration Service has a "fee waiver" process for certain low income persons. For more information click on the following link: <https://www.uscis.gov/feewaiver> (This link will direct you to open the site in a separate frame for security reasons, please click on the link when provided.)

1. Every noncitizen claiming eligible alien status as defined above will be required to present documentation of that status, as follows:
 - a. Aliens lawfully admitted for permanent residence: INS Form I-551, or earlier I-141, AR-3 and AR 3a, if specifically endorsed to show legal right to reside permanently.

NOTE: Do not end date "green cards" in CalWIN.

- b. Aliens granted asylum or refugee status: INS Form I-94, annotated with the term asylum or asylee, refugee or conditional entry or entrant.
 - c. Parolees: INS Form I-94 (Arrival-Departure Record - Parole Edition) endorsed to show bearer has been paroled in the U.S. pursuant to Section 212(d)(5) of the Immigration and Nationality Act.
 - d. Persons granted indefinite voluntary departure or an indefinite stay of deportation: A court order of correspondence from U.S. Immigration stating that the individual has been granted this status.
2. An noncitizen who declares or presents documentation that he or she is lawfully present for temporary residence is not eligible except as noted in I.B.2.a.iii above.
3. Documentation submitted by an noncitizen applicant which the county believes to be of doubtful authenticity shall be accepted as evidence only

if the applicant cooperates with the county and U.S. Immigration in verifying his or her status.

4. When documentation is questionable, a G845 shall be completed by the applicant which shall be referred immediately to U.S. Immigration. If Immigration returns the G845 to the EW/ES, and indicates that Immigration is unable to complete the verification process due to noncooperation by the noncitizen, the county will delete the noncitizen from the Assistance Unit.
5. A noncitizen who has been deleted from the AU for this reason may complete another G845 but will not be reinstated to the AU until confirmation of eligible alien status is received from U.S. Immigration.

NOTE: Effective March 1, 2010, the mailing address for G845 and G845S forms is

US Citizenship and Immigration Services
300 N. Los Angeles St. B120
Los Angeles CA 90012
Attn: Immigration Status Verification Unit

D. Lack of Documentation

If the noncitizen or naturalized /derivative citizen has no documentation of eligible status, the EW/ES shall inform the individual that:

1. He or she may contact U.S. Immigration or otherwise obtain an Immigration document or other conclusive evidence verifying citizenship or eligible alien status or
2. If the noncitizen know his or her 13-digit Alien number, that number may be entered into the SAVE system for verification of legal status.

If a noncitizen or naturalized/derivative citizen authorizes the ES/EW to contact Immigration to obtain verification of the applicant's status, the EW/ES must forward two copies of the G845 to Immigration and retain a copy in the case file. When verification from Immigration is returned, the EW/ES will notify the applicant.

If the applicant does not wish to contact Immigration or give permission for the EW/ES to contact Immigration, the applicant may withdraw his or her application or the application will be denied for noncooperation.

E. Receipt of G845 from Immigration

When a noncitizen's eligibility has been determined by Immigration and the completed G845 has been received by the EW/ES, the EW/ES will resume processing the application and the beginning date of aid rules will apply.

CalWORKs Eligibility Handbook	Citizenship and Identification Documentation for Medi-Cal 51-65.1
	Effective: 4-14-09

51-65.1 Citizenship and Identification Documentation for Medi-Cal

At all Intakes the Intake worker will need to complete Form DHCS 0011 for each US citizen applicant. This form is used to verify documentation of citizenship and identification, as required by the California Department of Health Services for Medi-Cal eligibility.

Only US citizens must complete this requirement. It is not required for non-citizen legal permanent residents.

The form must also be completed at Renewal, unless the client has already satisfied the requirement at Intake.

After each person has satisfied the requirement, he or she will not need to submit documentation again.

On the form are two boxes. The box on the left requires the worker to enter the type of citizenship document viewed, and whether it was approved or denied. The box on the right serves the same purpose for identification documents.

All documents must be original. Photocopies are not acceptable.

The worker will indicate on the lower part of the form whether the person has satisfied both the citizenship and identity requirements. Completing only one requirement is not sufficient.

File the original form in the case file and give a copy to the client.

A companion form to the DCHS 0011 is the DCHS 0007. This form lists the acceptable forms of documentation for both citizenship and identity.

Both these forms are available in English, Spanish, Chinese, Vietnamese, and Russian. They are posted on the CalWORKs Intranet home page, under "Forms".

CalWORKs Eligibility Handbook	T and U Visas - 51-65.2
	Effective: 05-14-16

51-65.2 Trafficking and Crime Victims Assistance Program (TCVAP)

(EAS 70-100)

The State of California established the Trafficking and Crime Victims Assistance Program (TCVAP) program in order to provide public social services and health care services to non-citizen victims of a severe form of human trafficking who are not eligible under EAS 69-205.15 and .16 and to non-citizens who are victims of domestic violence and other serious crimes.

Applicants qualified under the provisions of this section will be eligible for benefits and services to the same extent as individuals who are admitted to the US as refugees under Sections 69-201 and following sections.

Prior to 2000, no federal law existed to protect victims of human trafficking, domestic violence, or other serious crimes. In October 2000, the federal government created the **T visa**, for victims of a severe form of trafficking in persons, and the **U visa**, for victims of criminal activity to allow these individuals to remain in the U.S.

I. T Visa for Trafficking Victims

Federal law defines "severe forms of trafficking in persons" to mean:

- Sex trafficking in which a commercial sex act is conducted by force, fraud, or coercion, or in which the person induced to perform such acts is under 18, or
- The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purposes of subjection to involuntary servitude, peonage, debt bondage, or slavery.

The US Department of Health and Human Services, Office of Refugee Resettlement (ORR), may certify a victim of a severe

form of trafficking who is willing to assist with the investigation and prosecution of human traffickers.

Trafficking victims have one year to apply to Immigration for a T visa by submitting a Form I-914, Application for T Non-immigrant Status. When "continued presence" is granted, it confers temporary status on the individual that delays/prevents deportation.

Once the adult trafficking victim has been certified by ORR, he or she is eligible for federal benefits and services to the same extent as refugees. For minor trafficking victims, the ORR issues an eligibility letter, which makes the minors eligible for federal benefits and services.

A certification letter and similar letter for children or the T visa itself are required to verify that the individual has been certified by ORR. No other documentation is required from Immigration for these individuals.

A. Eligibility for Federal benefits

1. Non-citizens who hold T-1, T-2, T-3, T-4, or T-5 visas (T visas and derivative T visas) are eligible for Refugee Cash Assistance, CalWORKs, Medi-Cal, and Food Stamps. They must meet all other program requirements such as income level and age.

2. Derivative T visas are available to family members of holders of T-1 visas under the following rules:

- a) For an individual holding a T visa who was under 21 years of age on the date the T visa application was filed, derivative T visas are available to the spouse, children, parents, and unmarried siblings who are under 18 on the date the visa application was filed.
- b) For an individual holding a T visa who was 21 or older on the date the T visa application was filed, derivative T visas are available to the spouse and children only.

3. Application for benefits.

- a) When the holder of a derivative T visa applies for benefits or services, the EW/ES will accept the non-immigrant T-2, T-3, T-4, or T-5 visas as documentation of eligibility. Staff will follow the same eligibility determination procedures and issue benefits to the same extent as refugees including Refugee Cash Assistance. Applicants must meet all other program eligibility requirements.
- b) Date of Entry: A non-citizen who was already in the US on the date the derivative T visa was issued will have as a **date of entry** for eligibility purposes the Notice Date on form I-797 (Notice of Action of Approval of the visa). For an individual who enters the country on the basis of a derivative T visa, the **date of entry** stamped in the person's passport or I-94 documents is the date of entry for eligibility purposes.

- c) Verification of status: The SAVE system does not contain information on victims of trafficking or their non-immigrant family members. Do not access SAVE for information on these individuals. Staff needing assistance with verification will refer the case to the unit supervisor. Supervisors, if necessary, may call a toll-free verification number for these visa holders. The number is (866) 401-5510.

B. Eligibility for State-Funded benefits

1. If there is no federal eligibility for federally funded benefits, staff must evaluate for state funded benefits.

2. The applicant meets the criteria for state funded benefits if:

- a) The applicant self-declares that he/she is a victim of human trafficking **AND**
- b) The applicant provides at least one item of additional evidence, including, but not limited to:
 - Police, government agency, or court records or files
 - News articles
 - Documentation from a social service, trafficking, or domestic violence program, or a legal, clinical, medical, or other professional from whom the applicant or recipient has sought assistance in dealing with crime
 - Physical evidence
 - A copy of a completed T visa application
 - Written notice from Immigration of receipt of a T visa application

NOTE: If the applicant cannot provide additional evidence, the sworn statement shall be sufficient if the county makes a determination documented in the case file that the applicant is credible.

A signed Form 7047, "Declaration Under the Penalty of Perjury" would be sufficient to determine that the applicant is a victim of human trafficking if the EW determines the applicant is credible.

Once it has been determined that the applicant meets the definition of a trafficking victim, the county must then determine if the applicant:

- Has filed for an application for a T visa with Immigration
- Is preparing to file an application for a T visa, or
- Is otherwise taking steps to meet the eligibility conditions for federal benefits

The following documentation can be used in determining whether an applicant has filed, or is preparing to file for a T visa:

- A confirmation receipt or letter from Immigration verifying an application for a T visa has been filed, or
- A copy of the application for a T visa (I-914), or
- Statements from persons in official capacities who have assisted or are assisting the victim with a T visa application, or
- If no documentation is available, the applicant's sworn statement that he or she has filed or intends to file for a T visa, or is taking steps to become federally eligible (such as working with a community based agency to prepare to qualify for federal benefits) will be acceptable.

3. Eligibility for individuals under state-funded benefits is limited to:

- Food Stamps - one year
- CalWORKs - eight months for a non-immigrant victim with no children, and up to 60 months for a non-immigrant victim with children.

- For single individuals, after all eight months of TCVAP have been used, they are eligible for four months of cash assistance funded through the CalWORKs program.

These funds are issued in the same manner as the cash supplement for RCA clients. enter into CalWIN using aid code U9 and issue vvia NSDI. Single T visa recipients are eligible to the same cash supplement as RCA recipients.

4. Eligibility for state-funded benefits will be terminated if:

- The recipient's application for a visa has been finally, administratively denied; or
- The recipient has not applied for a T visa within one year of applying for state-funded benefits; or
- A request by law enforcement officers on behalf of the recipient for federal continued presence status has not been made within one year; or

5. Conversion to RCA

When a TCVAP trafficking recipient obtains ORR certification, a determination shall be made of RCA eligibility (see MPP 69-205). If all eligibility factors for RCA are met, the TCVAP case shall be discontinued and a new eligibility period for RCA shall be granted for the maximum period allowed.

When client is being discontinued from RCA after the eight months of eligibility, refer client to CAAP.

II. U Visa for Victims of Serious Crime

The U visa, for victims of criminal activity, allows certain individuals to remain in the US. State law recognizes that applicants for the U visa who are willing to cooperate with law enforcement officials need support and services.

Federal law defines non-citizen victims of serious crimes as those who:

- Have suffered substantial physical or mental abuse as a result of having been victims of the following criminal activity: rape, torture, trafficking, incest, domestic violence, sexual assault, abusive sexual contact, prostitution, sexual exploitation, female genital mutilation, being held hostage, peonage, involuntary servitude, slave trade, kidnapping, abduction, unlawful criminal restraint, false imprisonment, blackmail, extortion, perjury or attempted perjury, or conspiracy or solicitation to commit any of the above mentioned crimes; and
- Possess information concerning criminal activity; and
- Having been helpful, are being helpful, or are likely to be helpful to a federal, state, or local law enforcement official, prosecutor, or judge, or other federal, state, or local authorities investigating or prosecuting criminal activities described above.

Acceptable documentation for verifying that an applicant for a U visa has been filed includes, but is not limited to:

A confirmation receipt or letter from Immigration verifying that a request has been filed; or

- The Notice of Action, Form I-797, approving a U visa; or
- A Form I-797 which serves as a fee receipt for an employment authorization request based on a U visa application; or
- a copy of the Petition for U Nonimmigrant status (Form I-918)
- An employment Authorization Document (EAD) issued under Category "A19" or "A20" for an approved U visa petitioner.

In determining eligibility for TCVAP, staff must verify that the U visa applicant has filed a formal application for a U visa (Form I-918 and required supplements) with Immigration.

Eligibility for TCVAP services for victims or serious crimes will be terminated when the recipients's application for a U visa has been finally administratively denied, or after the eight month period for a single person or 48 months for families, whichever comes first.

Refer these individuals to CAAP after **all** TCVAP benefits have expired. Single U visa recipients are eligible for the same cash supplement as RCA clients.

III. Eligibility for Other Programs

Individuals determined eligible for state-funded benefits are entitled to benefits and services to the same extent as refugees, and are subject to the same reporting requirements as RCA recipients with the following exceptions that include, but are not limited to:

- Noncitizen victims of a severe form of human trafficking and noncitizen victims of domestic violence or other serious crimes applying for benefits shall not be required to apply for SSI/SSP since they do not have eligibility to these programs.
- Noncitizen victims of a severe form of trafficking and noncitizen victims of domestic violence or other serious crimes who qualify for assistance under CAPI shall be aided under CAPI.
- Noncitizen victims of trafficking or serious crimes who qualify for assistance under the state CalWORKs program shall be aided under that program.

IV. Welfare-to-Work Requirements for T and U Visa Recipients

T and U visa applicants/recipients are subject to the same program requirements and exemptions, including welfare-to-work participation, reporting, and time limits.

An exemption from work requirements shall be available to those recipients if physical or psychological trauma related to or arising from the victimization impedes their ability to comply.

A recipient of state-funded RCA (TCVAP) or state-only CalWORKs with no Social Security number or no authorization to work should not be referred to employment interviews, be required to search for a job, or be required to engage in any other activity that would be essentially futile due to his/her inability to secure legal employment.

In these cases, activities should be identified that help prepare the recipient for future employment, such as English language training, job skills development and preparation, job specific training, etc. For programs that utilize EDD referrals, if a recipient is unable to work or participate in a county-approved employment directed program due to lack of work authorization, a referral to EDD would not be appropriate until those circumstances change.

Applicants and recipients of **federally-funded** TANF and Food Stamps benefits are **required** to disclose their Social Security numbers as a condition of eligibility. Those applicants/recipients who do not have a Social Security number are required to obtain one as a condition of eligibility.

Individuals claiming the status of a victim of human trafficking or other serious crimes, or individuals claiming the status of non-citizen victims of domestic violence are **not required** to provide or apply for a Social Security number as a condition of eligibility for **state-funded** CalWORKs or Food Stamps benefits

V. TCVAP Aid Codes

- TCVAP-Applied U Visa- RCA Aid Code 1V with a MEDS Alien Eligibility Code of X
- TCVAP-Approved U Visa- RCA Aid Code 1V with a MEDS Alien Eligibility Code of Y
- TCVAP-CW Family- CalWORKs Aid Code R1 with a MEDS Alien Eligibility Code of W

NOTE: R1 aid code is case based. R1 does not allow managed care access and only allows for state only CF (CFAP). TCVAP clients are eligible for MC with managed care. Other AU members on the case may be eligible for MC managed care as well and the status has to be changed manually in MEDS to give the correct managed care access to clients. Other AU members may be eligible for federal CF benefits, but will only get CFAP due to the aid code issue. Consult with your unit supervisor on how to address eligibility for correct benefits.

- TCVAP-Single T Visa- RCA Aid Code 1V with a MEDS Alien Eligibility Code of W NOTE: either applied for or approved

For supplements to match the PAES grant use aid code A4. Currently aid code A4 has limited CalWIN functionality and has to be redone for current and past months whenever an action on the case is taken.

VI. Eligibility to CAAP for Individuals under VAWA

CAAP may grant aid to individuals under the Violence Against Women Act who are granted permanent residency status.

These persons are no longer considered refugees at this point and are not eligible to RCA. The CAAP eligibility factors are:

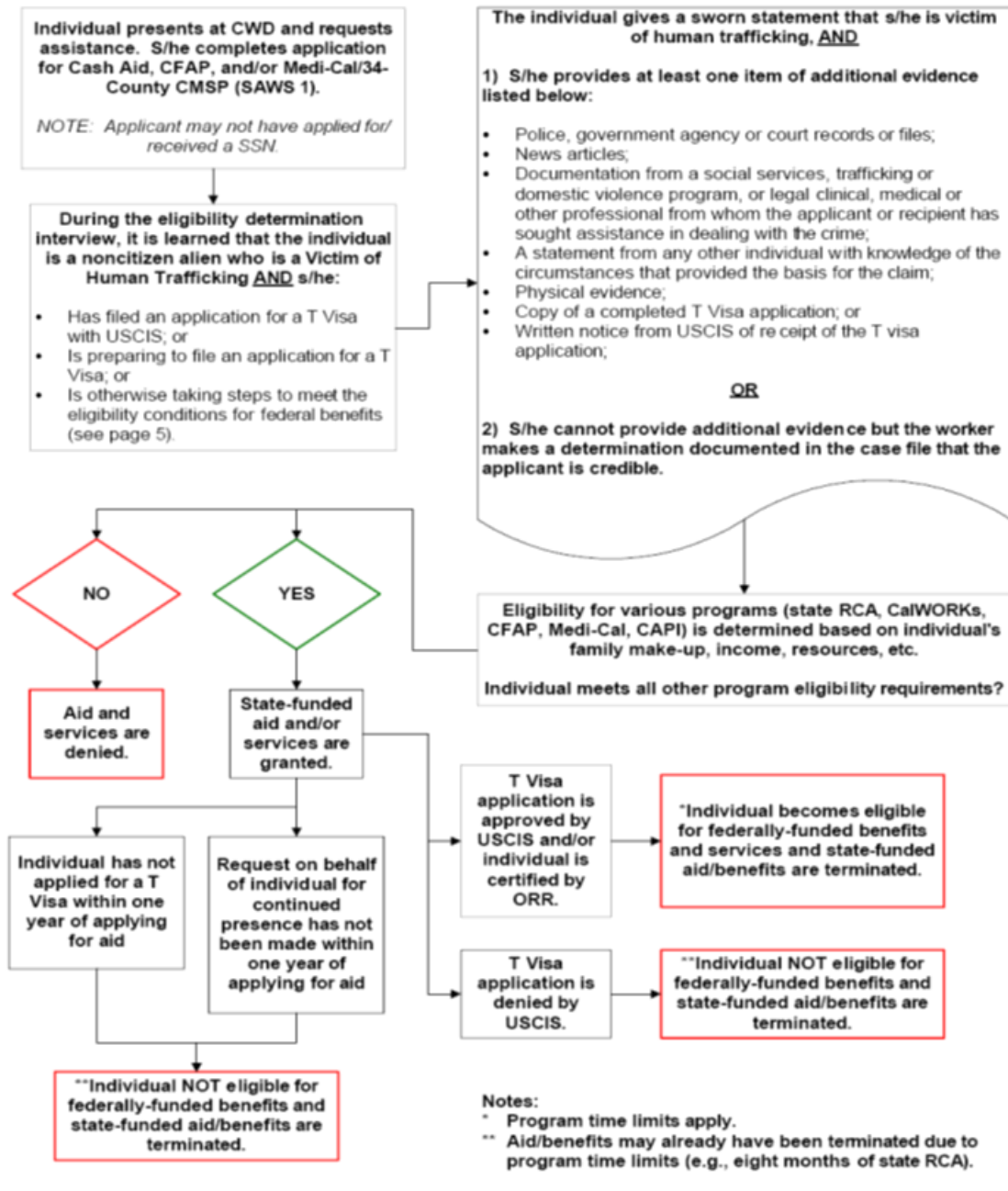
- Abused spouses or children, parents of abused children, or children of abused spouses (I-797, I-797C) [this form must indicate either 1) approval of either an I-360 or I-130 petition, or 2) an EOIR form that sets forth that the applicant has established a prima facie case], or a final order or notice from an Immigration Judge, the BIA, or federal court granting suspension of deportation or cancellation of removal.)
- Non-citizens with current written verification that they have applied for permanent residency status under the VAWA of 1994, are eligible to CAAP.

State vs. Federal Eligibility Matrix

Documentation	State Eligible	Federally Eligible
PREPARING TO APPLY FOR T VISA	YES	NO
APPLIED FOR T VISA	YES	NO
T VISA GRANTED	YES	NO*
RECEIVED CERTIFICATION LETTER (TRAFFICKING VICTIMS ONLY)	NO	YES
PREPARING TO APPLY FOR U VISA	NO	YES
APPLIED FOR U VISA	YES	NO
U VISA GRANTED	YES	NO

* It is the trafficking certification letter, not the T Visa, which confers eligibility for federal benefits

Flow Chart for Determining Eligibility



VII. Case Records

TCVAP case records must include the following, when applicable:

- Documentation to verify trafficking status

- Documentation that the applicant has filed an application or intends to file an application for a T Visa;
- The trafficking victim’s sworn statement that they are a victim of human trafficking, in the absence of any other documentation; and
- Documentation verifying that the applicant has filed for or been granted a U Visa.

References:

Welfare and Institutions (W&I) Code Section 13283; W&I Code Section 14005.2; W&I Code Section 18945; Manual of Policies and Procedures (MPP) Chapter 70-100; All County Letter (ACL) No. 06-60, dated December 21, 2006; ACL No. 08-15, dated April 4, 2008, ACL No. 09-49, dated September 30, 2009; ACL No.13-25, dated April 18, 2013, ACIN No. I-41-07, dated August 8, 2007, ACIN No. I-27-09, dated April 16, 2009; ACIN No. I-26-12, dated May 8, 2012, County Fiscal Letter (CFL) 11/12-38, dated January 20, 2012, and CFL 13/14-07, dated September 5, 2013. ACIN No. 1-07-15, dated January 29, 2015

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CalWORKs Eligibility Handbook	Indigent Sponsored Non-Citizens 51-65.4
	Effective: 12-07-09

51-65.4 Indigent Sponsored Non-Citizens

(Reference EAS 43-119)

State regulations allow 12 months of state-funded cash aid for sponsored non-citizens who declare that their sponsor is not meeting their needs. These sponsored non-citizens are considered “indigent”. This 12 month period is in fact a one-year suspension of the sponsor deeming rules.

These 12 months of cash aid are a once-in-a-lifetime benefit. Once aid is granted for an “indigent” sponsored non-citizen, the 12-month clock starts and continues without interruption until the 12 months have passed. **The clock continues even if the sponsored non-citizen goes of cash aid.**

Once the 12 months have passed, the sponsored non-citizen is no longer eligible for cash aid unless there are other circumstances such as abuse or domestic violence, or if the sponsor is deceased, receiving SSI or other forms of public assistance as the sole source of income. (For specific details, see 43-119).

Staff must carefully narrate indigent non-citizen status when granting cash aid. Supporting documents (G845 and G845S) must be in the case file with the sponsor's information provided by Immigration.

At the end of the 12 month period, the sponsored non-citizen is no longer exempt from the deeming rules and is again required to submit a QR 22 form. If, after the 12 month deeming exemption, they are still unable to give the county information on their sponsor's income, they are no longer eligible for CalWORKs unless other circumstances described above apply.

Review eligibility of all indigent sponsored non-citizens upon reaching the end of the 12 months of cash aid. Supply them with the QR 22 Sponsor's Statement of Facts. Determine continued eligibility for continued cash aid upon receipt of the QR 22 **and all other eligibility factors**. If the QR 22 is not received, meet with the appropriate manager for a second level review before discontinuing the case at the end of the 12 months of cash aid. Arrange for the second level review in time for a timely discontinuance notice. (Remember to have a second level review by a manager before discontinuing any client based on immigration status).

Allow at least a month for the return of the QR 22. It must be reviewed early enough to allow for a ten-day notice of cash aid is discontinued at the end of the 12th month.

In preparation for the RRR, review the "Collect Non-Citizen Detail" screen in CalWIN to identify "indigent" sponsored non-citizens, They may be coded as "indigent" and/or showing that the person is sponsored but the person's needs are not being met by the sponsor.

All sponsors of non-citizens must submit a QR 22 at each RRR, and a QR72 along with each QR 7.

Many times these AUs are composed of a sponsored adult non-citizen and minor children. A G845 and G845S are submitted for each non-citizen in the AU. When these documents are returned, sometimes the children are listed as sponsored and sometimes not. Children who are sponsored sometimes have a different sponsor from the parent.

If the adult does not submit a QR 22 for his/her sponsor, but a QR 22 is submitted by the children's sponsor, the adult may be discontinued from aid while the children still remain eligible.

However, in cases where information on the child's sponsor is not submitted on the QR 22, if that child is the only eligible child, the entire family would be discontinued. A second level review by the manager is needed also with sponsored children before discontinuing them.

As in all cases involving immigration or citizenship issues, any discontinuance must go through a second level of review by the unit supervisor and the Eligibility Manager. Refer anyone being discontinued due to immigration status to Bay Legal.

CalWORKs Eligibility Handbook	Iraqi/Afghan Special Immigrants 51-65.5
	Effective: 06-09-10

51-65.5 Iraqi/Afghan Special Immigrants

REFERENCE ACL 08-35, 10-28

Displaced persons from Iraq and Afghanistan are being admitted to the US with Special Immigrant Visas (SIV). These Iraqis and Afghans were employed by or assisted the US Armed Forces with translation and other services.

Refugee Program Eligibility

Iraqis and Afghans who have been admitted to the US with a SIV are eligible for refugee cash assistance and employment services to the same extent as refugees. The time period is eight months from the date of entry to the US for cash aid, and 60 months for services. These services include Refugee Social Services and Targeted Assistance.

The extended time-eligibility for services applies to Iraqis and Afghans who entered the US with Special Immigrant visas or who received an adjustment to Special Immigrant status prior to December 19, 2009.

Both Iraqi and Afghan Refugee Cash Assistance recipients are eligible for the \$77 county funded cash supplement for each month they are on RCA.

For Iraqi and Afghan immigrants who acquire this special immigrant status while already in the US, the date of eligibility for refugee services begins on the date of the granting of the special immigrant status.

Spouses and unmarried children under 21 are also eligible for assistance if they meet all other eligibility criteria.

In no case can eligibility begin on a date prior to December 26, 2007.

CalWORKs Program Eligibility

Iraqis and Afghans who have been admitted to the US with a SIV who meet eligibility requirements are eligible to receive CalWORKs benefits for up to 60 months. These families will be required to meet all other eligibility criteria including welfare to work requirements and reporting requirements.

These Iraqis and Afghans are eligible for CalWORKs effective upon their date of entry into the US with proper documentation from Immigration (USCIS), and are treated as qualified non-citizens.

Documentation/Visas

There are two types of proper documentation for the principal SIV applicant (Iraqi or Afghan). These types of documentation also apply to the principal SIV applicant's spouse and their unmarried children under 21 years of age:

1. Iraqi or Afghan passport with an Immigrant Visa (IV) stamp noting that the individual has been admitted under any one of the following categories:

- IV Category SI1 or SQ1 (for the principal SIV applicant)
- IV Category SI2 or SQ2 (for the spouse of the principal SIV applicant)
- IV Category SI3 or SQ3 (for the unmarried child under 21 of the principal SIV applicant)
- IV Category SI6 or SQ6 (for the principal applicant adjusting status in the US)
- IV Category SI7 or SQ7 (for the spouse of the principal SIV applicant adjusting status in the US)]
- IV Category SI9 or SQ9 (for the unmarried child under 21 of the principal applicant adjusting status in the US)
- A Department of Homeland Security (DHS) stamp or notation on passport or I94 showing date of entry.

2. DHS Form I-551 (green card) with an IV code of SI6 or SQ6, SI7 or SQ7, or SI9 or SQ9 which confirms both the status and day of entry into the US for principal SIV applicant.

California state law allows non-citizens who meet the definitions of permanently residing in the US under color of law (PRUCOL) to be eligible for state-funded

CalWORKs benefits even when they are no longer eligible for federal benefits. As Iraqi and Afghan special immigrants are considered PRUCOL, they are eligible for state-only benefits after their federal eligibility periods elapse, if they continue to meet all other eligibility criteria.

All documentation must be verified through SAVE system.

Food Stamps Eligibility

Afghan and Iraqi individuals admitted to the US with SIVs are eligible for federal food stamps benefits for eight months.

- Iraqi and Afghan SIV individuals are eligible for federal food stamps benefits for a period not to exceed eight months beginning with the date of entry with an SIV or the date of adjustment to special immigrant status, but no earlier than December 26, 2007

Eligibility to CFAP

At the end of the eight months of eligibility for federal food stamps benefits, Iraqi and Afghan SIV individuals may claim eligibility for CFAP.

Iraqi and Afghan SIV individuals and other newly arriving Iraqi refugees should be given a 12-month food stamps certification period. Do not shorten the certification date to coincide with the end of federal eligibility for CalWORKs/RCA benefits.

Note on CalWIN procedures: code these cases at Intake with a special indicator "SIV-Iraqi" or "SIV-Afghan" so these recipients can be tracked.

CalWORKs Eligibility Handbook	Drug Felons, Fleeing Felons, and Intentional Program Violators 51-75
	Effective: 02-05-15

51-75 Fleeing Felons and Intentional Program Violators

New Law Changes Eligibility for Drug Felons

Under previous law, an individual is ineligible for CalWORKs aid (TANF/SNAP) if the individual has been convicted in state or federal court *after December 31, 1997*, of any

offense classified as a felony and which has as an element, the possession, use, or distribution of a controlled substance.

New state regulations (Assembly Bill 1468, Chap. 26, Statutes of 2014) authorizes CalWORKs benefits to be paid to an individual who is convicted as an adult in state or federal court (after December 31, 1997), of any offense classified as a felony which has as an element, the possession, use, or distribution of a controlled substance, as defined; *and as long as the individual is in compliance with parole and/or probation terms.*

I. Categories of Persons Ineligible to Receive Benefits

Because of changes in state regulations, there are now two specific categories of persons who are not eligible for benefits or aid:

1) Fleeing Felons

Any person fleeing to avoid felony prosecution, custody or confinement after conviction, or violating a condition of probation or parole will also be permanently ineligible for cash aid. Fleeing to avoid prosecution or custody or confinement after conviction means that a warrant for arrest has been issued. Violating a condition of probation or parole means a warrant has been issued for a crime that violates a condition of probation or parole, or an order has been issued revoking parole or probation.

2) Intentional Program Violators

Persons convicted of Intentional Program Violations (IPVs) are subject to sanctions for specific periods of time or permanently. See Section 51-75.2 for an explanation of all IPV sanction periods.

II. How These Persons Are Identified

A. By Self-declaration on the Statement of Facts (SAWS 2 Plus)

1. Question #35 on the SAWS 2 Plus asks the applicant if anyone in the family is a fleeing felon.
2. Question #36 on the SAWS 2 Plus asks the applicant if anyone in the family is in violation of parole or probation.

B. By Computer Data Match

In addition to the voluntary declaration on the SAWS 2 Plus, a fleeing felon may also be discovered as a result of a computer data match. A routine matching system is being developed with the California Department of Justice to assist in the identification of fleeing felons and people convicted of drug related felonies. Computer print-outs of this data will be periodically distributed so that appropriate case actions can be taken. IPV's are tracked on IEVS. If a worker receives an IEVS printout or there is coding on an IEVS screen indicating that a recipient has been convicted of an IPV, the worker should contact the HSA SIU for verification. See procedure below.

III. What to do when these Persons are identified

A. Fleeing Felons

Eligibility staff will take the following actions upon receipt of a Fleeing Felon notice from HSA SIU:

1. Contact the client and inform him/her of the Fleeing Felon notice. Inform the client that a Fleeing Felon notice, if valid, will result in the discontinuance of aid.
2. Refer the client to Bay Legal for assistance.
3. If the client states that the Fleeing Felon warrant has been cleared he or she must provide proof from the court or law enforcement agency that shows the clearance. If the client does not have that paperwork, discontinue the case with ten day notice. If the worker has an earlier Fleeing Felon notice from Investigations, when faxing include the warrant number, the law enforcement jurisdiction, and the date of the warrant.
4. Any discontinuance due to Fleeing Felon status must be reviewed by the unit supervisor and the Intake/Carrying Eligibility Manager before the Notice of Action is mailed.

B. Procedure for verification of criminal record history information

Staff must contact the HSA SIU when requesting criminal history information. Requests for criminal history information may only be made for the purpose of establishing eligibility.

All requests for criminal history information must be made using the *SIU Criminal Records Request* and FAXed to HSA SIU at 415-503-4827. The HSA SIU will no longer accept telephone requests for criminal history information.

This form is available on the HSA Intranet at [HSA/Investigations/Forms/SIU Criminal Request Form](#). Make sure to read the instructions on how to fill out the form.

(NOTE: If the link above does not take you to the intranet page for this form, please go directly to the HSA Investigation Unit webpage for instructions on how to complete this form.)

Upon receipt by HSA SIU, an investigator assigned to the SIU will review the request and return the results of the criminal records check to the EW within three hours from the time the inquiry was received. A response to the inquiry will be returned to the EW via encrypted email. (Requests for criminal history checks received after 3:30 p.m. may not be processed until the next business day).

If it is found that the recipient is a fleeing felon possesses a drug conviction history, the SIU investigator will send the EW an updated hard copy of the Fleeing Felon notice for inclusion in the case file.

This procedure may also be used to establish whether a person's parole/probation status allows him to reside in San Francisco.

C. IPVs

The Collections Unit sends instructions to staff on how to implement an IPV sanction, including the applicable sanction period. The case record of an applicant applying for a restoration must be reviewed carefully for evidence of an IPV sanction. If there is any evidence of an IPV sanction on file, the intake worker must call Collections to determine whether the sanction needs to be imposed.

When implementing an IPV sanction, the EW must notify the client and refer him/her to Bay Legal.

IPV information may also be accessed in CalWIN via the "Search IEVS Applicant Report" function. There is a How-To [here](#).

IV. Budgeting Income

Any income of these persons are included when determining eligibility and the grant amount for the AU. Please refer to Sections 51-55 and 53-26 for instructions on budgeting the income of ineligible family members.

CalWORKs Eligibility Handbook	Eligibility for Drug Felons with Convictions after 12/31/1997 51-75.1
	Effective: 01-05-16

51-75.1 Eligibility for Drug Felons with Convictions after 12/31/97

Overview

Under previous law, an individual is ineligible for CalWORKs aid (TANF/SNAP) if the individual has been convicted in state or federal court *after December 31, 1997*, of any offense classified as a felony and which has as an element, the possession, use, or distribution of a controlled substance.

New state regulations (Assembly Bill 1468, Chap. 26, Statutes of 2014) authorizes CalWORKs benefits to be paid to an individual who is convicted as an adult in state or federal court (after December 31, 1997), of any offense classified as a felony which has as an element, the possession, use, or distribution of a controlled substance, as defined; and as long as the individual is in compliance with parole and/or probation terms. Persons who have been previously ineligible or excluded must be added to the Assistance Unit (AU) or household (HH) effective April 1, 2015, if denied benefits or aid when convicted for:

- Felony use or possession for personal use of a controlled substance.

- Unlawfully transporting, importing into the state, selling, furnishing, administering, giving away, possessing for sale, purchasing for purposes of sale, manufacturing a controlled substance, possessing precursors with the intent to manufacture a controlled substance, or cultivating, harvesting, or processing marijuana

Conditions of Eligibility

Individuals who have been convicted of a felony drug offense must meet the terms of their parole and/or probation, and as a condition of eligibility, provide proof of one of the following conditions:

1. Completion, participation, or enrollment in a government-recognized drug treatment program.
2. Placement on a waiting list for government-recognized drug treatment program.
3. Other evidence that the illegal use of controlled substances has ceased.

A government-recognized drug treatment program is a program licensed, certified, or funded by a government entity, or a program in which a government or court has ordered the applicant to be a participant.

Participation in a Sober Living Environment group living facility, which does not need to be government recognized, will be considered proof that drug use has stopped.

As stated above, applicants must be asked to provide proof that they meet the conditions noted in 1 and/or 2 above. For condition 3, the applicant must state what the other evidence is and provide documented or other relevant information to provide proof. If proof is unavailable, staff will accept a sworn statement as proof.

If the person is on probation or parole and is ineligible for aid due to violating a condition of probation or parole or fleeing to avoid prosecution or custody and confinement, **he or she would still be ineligible for CalWORKs benefits until he or she is no longer in violation of probation or parole or a fleeing felon.**

Informing and Adding Ineligible or Excluded Individuals

CalWORKs

If there is current case file information on the AU that exist where a parent, caretaker, relative or member of the AU were excluded or ineligible, that AU must be provided the TEMP 3005 informing them of the state law change and that they are eligible to receive benefits. The notice shall be provided no later than February 18, 2015.

If it is determined that additional eligibility documentation is required, the EW will notify the AU of the documentation needed as soon as possible, but no later than February 28, 2015.

EWs must assist the client and new recipients in collecting required eligibility documentation and verification. EWs must provide Form CW 2200 "Request for Verification" to obtain relevant information and sources of proof. It should be noted that EWs should not request additional eligibility verification or documents already possessed or obtained.

Once required eligibility documentation is obtained and on file, clients must be provided the Notice of Action (NOA) TM82-832. This NOA informs that the person(s) with prior felony drug conviction has been added to the AU due to the change in state law. The notice also informs them that the newly added adult may be required to participate in Welfare-to-Work.

Optional adults or individuals not included in the AU due to the person's felony drug conviction will not be automatically added to the AU effective April 1, 2015. If an AU requests inclusion of an optional person or if a new person joins the AU mid-period, then follow existing rules regarding adding a person to the AU mid-period for SAR cases and AR/CO cases.

CalFresh

Under current CalFresh rules, the income and resources of household members previously ineligible for CalFresh benefits due to felony drug convictions are already counted in the AU. Therefore, any previously excluded household members are now eligible and will be an included household member. Newly qualified individuals with a prior felony drug conviction shall be added to the CalFresh household effective April 1, 2015. This may result in additional CalFresh benefits for the AU.

EWs must identify those individuals who were previously excluded due to their previous ineligible felony drug conviction. Use CF 1468 TEMP to inform the CalFresh household of the added household member.

For CalFresh households that apply in March 2015 with a member who is eligible due to a prior felony drug conviction, special instructions apply:

- Mixed households which contain members with prior felony drug conviction after meeting all other eligibility requirements, shall be approved benefits *minus the member with a previous felony drug conviction*, that person will be added April 1, 2015. The household will not be required to request that person be added.
- Households comprised entirely of individuals with a previous felony drug conviction shall be approved effective April 1, 2015.

Applicants and recipients of CalFresh benefits with prior felony drug convictions must be in compliance with parole and probation terms in order to be eligible. EWs must obtain information and/or documentation that these individuals are in compliance.

If needed, information can be obtained from the **Fleeing Felon Match (FFM)** report from CDSS on current recipients who may be in violation of their probation or parole terms. Recipients found in violation of their parole or probation terms are ineligible and must be removed in accordance with reporting system rules as they apply.

New Applicants for CalWORKs Benefits

New applicants for CalWORKs benefits must indicate on the SAWS 2 Plus application by answering Question # 37, if anyone in the household has been convicted of felony possession, use, manufacturing, or distribution of a controlled substance (illegal drugs or certain drugs for which a doctor's prescription is required) after August 22, 1996.

Applicants who indicate that a/or person(s) in the household has been convicted of a drug felony are required to submit details of that offense, including the date of conviction and details of the conviction.

Contact SIU at 551-9538 to verify the nature of the offense/conviction. Provide SIU with the following information:

- Client name, date of birth, social security number, and case number.
- Worker's department, program, worker number, and worker's phone number.

New felony drug convictions

Any future convictions for drug felonies could result in termination of benefits. These individuals may re-apply, but must be eligible under the new regulations.

Amended CalWORK Regulations

Changes to CalWORK regulations resulting from AB 1468 include the following:

- Removes all references to individuals with prior drug felony convictions as excluded members of the CalWORKs AU
- Removes all incidence of drug felony convictions from mandatory mid-period reports
- Removes references to AUs that include an individual with a prior drug felony conviction as a reason to mandate that aid payments are given in the form of vendor vouchers.

REFERENCES: AB 1468, ACL-14-100, ACIN I-02-16

CalWORKs Eligibility Handbook	IPV Penalty Periods 51-75.2
	Effective: 03-01-98

51-75.2 IPV Penalty Periods

Below is a list of the entire array of penalty periods that can be imposed on persons convicted of Intentional Program Violations. The resources and income of these persons are used when evaluating eligibility for the AU. These persons "needs" are not taken into account (i.e., not counted when determining "Big MAP").

A. A Permanent penalty for:

- 1) Individuals found in state or federal court or pursuant to an administrative hearing decision, who have committed any of the following acts:
 - a) Made fraudulent statements or representations regarding their place of residence, in order to receive assistance simultaneously, from two or more states or counties.
 - b) Submitted false documents for nonexistent or ineligible children.
 - c) Received cash benefits in excess of \$10,000 through fraudulent means.

- 2) Individuals convicted of a felony fraud, in a state or federal court, for theft of \$5000 or more.
- 3) Individuals with a third conviction of fraud in a state or federal court, or pursuant to an administrative hearing decision.
- 4) Individuals found in a state or federal court, or pursuant to an administrative hearing decision, who have committed upon the third occasion any of the following acts:
 - a) Making false or misleading statements or misrepresenting, concealing, or withholding facts.
 - b) Committing any act intended to mislead, misrepresent, conceal, or withhold facts or propound a falsity;
- 5) Individuals found in state or federal court, or pursuant to an administrative hearing decision, who have committed upon the third occasion any of the following acts: having submitted more than one application for the same type of aid for the same period of time, for the purpose of receiving more than one grant of aid, or increasing, or preventing a reduction in the amount of aid.

B. A Five-year penalty for:

Individuals convicted of a felony fraud in a state or federal court, not meeting permanent penalty criteria and the theft is more than \$2,000, but less than \$5,000.

C. A Four-year penalty for:

Individuals found in state or federal court, or pursuant to an administrative hearing decision, who have committed upon the second occasion any of the following acts: having submitted more than one application for the same type of aid for the same period of time, for the purpose of receiving more than one grant of aid in order to establish or maintain the families eligibility for aid, or increasing, or preventing a reduction in the amount of aid.

D. Two-year penalty for:

- 1) Individuals convicted of a felony fraud in a state or federal court, not meeting permanent penalty criteria and the theft is less than \$2,000.
- 2) Individuals found in state or federal court, or pursuant to an administrative hearing decision, who have committed upon the first occasion any of the following

acts: having more than one application for the same type of aid, for the same period of time, for the purpose of receiving more than one grant of aid in order to establish or maintain the family's eligibility for aid, or increasing, or preventing a reduction in the amount of aid.

E. Twelve-month penalty for:

Individuals found in state or federal court, or pursuant to an administrative hearing decision, who have committed upon the second occasion any of the following acts:

- 1) Making false or misleading statement or misrepresenting, concealing, or withholding facts.
- 2) Committing any act intended to mislead, misrepresent, conceal, or withhold facts or propound a falsity.

F. A six-month penalty for:

Individuals found in state or federal court, or pursuant to an administrative hearing decision, who have committed upon the first occasion any of the following acts:

- 1) Making a false or misleading statement or misrepresenting, concealing, or withholding facts.
- 2) Committing any act intended to mislead, misrepresent, conceal, or withhold facts or propound a falsity.

52 - Responsible Relatives and Child Support

CalWORKs Eligibility Handbook	Legally Responsible Relatives 52-1
	Effective: 03-01-98

52-1 Legally Responsible Relatives

I. Legally Responsible Relative - Defined (EAS 43-103)

A responsible relative is one who is responsible for the support of another person because of blood tie or as the result of marriage, adoption, or relationship to one or more family members. In cash aid eligibility, responsible relatives are spouses and

parents. It is important to assist the mother in establishing paternity of the child. It not only makes it possible for the child to receive absent parent contributions, but the child will have the right to be a beneficiary of other benefits, e.g., Social Security, Veteran's benefits, etc., in the event of the father's disability or death.

II. Definitions and Responsibilities

A. Parents

"Parent" means either the father or the mother, natural or adoptive, whether married or unmarried. Deprivation is based on the person presumed to be the legal parent, unless rebutted by a statement of the mother or a court order. A court decree will establish paternity.

Assistance of the District Attorney (DA) should be requested if there is a problem in determining the person presumed to be the legal parent. Cases involving a child born out of wedlock without a signed Declaration of Paternity shall be referred to the DA.

The law presumes that a man who was married to the mother is the father when the child was born during the marriage. In addition, the man is presumed to be the father if he signs a Declaration of Paternity and/or consents to be named as the father on the birth certificate or receives the child into his home and openly holds out the child as his natural child. These presumptions can be refuted by clear and convincing evidence.

All parents, regardless of their age or their marital status, are responsible to the extent of their ability for the support and care of their children, including a child who is in foster care. This responsibility continues even though the parent is not living with his child, the marriage of the parents has been legally dissolved, the parents were never married or there has been a court order removing the child(ren) from the parent's custody. Responsibility ceases only when a relinquishment for adoption is in effect.

B. Stepparent

A stepparent is a man or woman who is married to a parent of a child of whom he/she is not the natural parent.

The stepparent is responsible for the support of his/her children from another union living outside the home; his/her children, natural and adopted, living in the home; and his/her spouse.

A stepparent may remain the caretaker relative even after the dissolution of marriage to the biological parent. See EAS 82-808.113.

For more information about Stepparents, see Section 52-5.

C. Unmarried Parent

An unmarried parent is a man or woman in the home who is not married to the natural mother or father of one or more of their children even though he/she may be married to another man or woman.

1. The unmarried parent is responsible for the support of his/her child, including an unborn child.

The unmarried parent is not legally responsible for the support of his/her child's other parent or of children not his/her own. If the unmarried parent and his/her legal dependent (not a child common with the client) living in the home are eligible for cash aid but refuse to apply, determination of possible misuse of funds must be made. The cash aid which is issued is intended for the support of only those in the AU.

2. For more information about Unmarried Parents, see Sec. 52-10.

D. Unwed Minor Parent

The parents of an unwed minor are required to support their child, but are not responsible for their grandchildren. Aid shall be denied or discontinued to the minor parent if he/she refuses to provide necessary information which can be verified regarding his/her parents' ability to support, or in lieu of such information, refuses to consent to having his/her parents contacted for the purpose of determining their ability to provide support of their child.

E. Senior Parent (EAS 44-133.7)

The income of a senior parent(s) living in the home with a minor parent or pregnant woman (under 18 years of age) is considered available to the AU. Failure of the minor parent to report and verify this income monthly will result in denial or discontinuance of aid. (See Section 53-13.)

CalWORKs Eligibility Handbook	Common Law Marriages 52-3
	Effective 03-01-98

52-3 Common Law Marriages

Common Law Marriages (EAS 43-103.5)

Common-law marriage was abolished in California in 1895. However, California law recognizes any out-of-state marriage as valid as long as it is valid where contracted or performed. In cases in which there was no formal marriage, it may be that a common-law marriage was established in another state. If the parents state they are married to each other, it is assumed that they are lawfully married unless this is refuted by other evidence.

States which accept common-law marriage have certain laws which must be followed in order for such a marriage to be legal. In most states that recognize common-law marriages, two basic requirements must be met:

I. Agreement Must Exist To Become Husband and Wife

The agreement may consist of a written contract, but usually is just a simple, oral statement such as "I take you for my wife" or "You are now my wife." The words used must be in the present tense, and must express an intent to assume the relationship of husband and wife at the time involved and not at some time in the future. The parties involved must have the capacity to enter the agreement. This means that:

- A. They must be of sound mind; and
- B. They must be of the minimum age. At common-law and in most states which recognize common-law marriage, the ages are 14 for the male and 12 for the female; and

They must have been free to marry, i.e., not married to anyone else.

II. Cohabitation Must Follow the Verbal or Written Statement

Cohabitation is described as living together as husband and wife, each assuming the marital duties implicit in the relationship, usually including, but not necessarily predicated on, sexual relations.

Requirements do vary from state to state so that verification that a marriage is legal must be accomplished by contacting the state in which the marriage occurred. If the state in which the marriage took place recognizes common-law marriages and verification of such legality is secured, then such marriage is valid for all purposes in California and can only be dissolved by formal divorce even in the state in which it was created. There is no such thing as informal divorce in the United States.

Refer to the EAS section 43-103.5 for a state-by-state chart of the legal status of common law marriage in the various states.

CalWORKs Eligibility Handbook	Stepparents 52-5
	Effective 04-01-07

52-5 Stepparents

I. Responsibility for Support (EAS 43-105.5)

A. A stepparent (STP) is responsible for the support of:

1. His/her children from another union living outside the home.
2. His/her children, natural and adopted, living in the home,
3. His/her spouse.

B. However, for cash aid eligibility, the income of a STP living in the home is considered available to the entire AU, not just his/her spouse. See Sections 51-55 and 53-26 regarding income eligibility and the grant computation.

C. If an aided parent and STP separate, a referral to the Family Support Bureau is only made when the parent and STP have a child in common, when there would be both spousal support and child support components.

II. Income Reporting Requirements (EAS 43-105.54)

If the STP who lives in the home (either in or out of the AU) has income, the earnings or other income information must be recorded on the Statement of Facts as well as on the QR-7 on a monthly basis. Cooperation of parent and STP is mandatory.

A. If the parent fails to cooperate in presenting the required statement regarding a STP's income (Statement of Facts and/or QR-7), the AU's eligibility cannot be determined and aid is discontinued or denied for non-cooperation, or for an incomplete Statement of Facts or Monthly Report. The only exception is when the parent is unable to comprehend the procedure for establishing eligibility.

If a STP fails to provide information essential to the determination of eligibility of the AU, aid is denied or discontinued.

III. Counting STP Income

The income of a STP in the home is always counted (except for SSI), but the STP may or may not be counted the family size. There are three possible situations:

1. STP and all the STP's children, if any (including any child in common) are in the AU. The STP's income is treated as that of an AU member (STP and his/her children counted in "Big MAP" and in "Little MAP.")
2. STP and all the STP's children, if any (including any child in common) are not in the AU. The STP's income is treated as that of a Non-AU family member (STP and his/her children counted in "Big MAP" but not in "Little MAP.")
3. STP is not in the AU, but one or more of the STP's children is in the AU. The STP may not be in the AU for either of two main reasons:
 - a. Is ineligible (due to alien status, being a drug felon or fleeing felon). The STP's income is treated as that of a Non-AU family member (STP and his/her children counted in "Big MAP" but STP not in "Little MAP").
 - b. Is sanctioned (due to SSN, IPV, work requirements). The STP's income is treated as that of a sanctioned person (STP not in "Big MAP" or "Little MAP", but his/her children in "Big MAP" and "Little MAP").

IV. Should/Can the STP and His/her Children be in the AU?

For a general explanation about establishing Assistance Units, refer to Section 54-2. The following only discusses STP situations.

STPs and/or his/her children may be required to be in the AU or may have the option of being in the AU. This is contingent on whether the STP has his/her own child and/or has a child in common with the client and whether the children are eligible.

A. If STP has no child

If the STP has NO child living in the home (neither the STP's own child from another union nor a child in common with the client), the client has the option of including the STP in the AU (sometimes referred to as an "essential person"). If the STP claims to have no income and the client chooses not to include him/her, a determination of possible misuse of funds should be made. The cash aid which is issued is intended for the support of only those in the AU.

B. If STP has child of his/her own (no child in common)

1. If there is a child in the home who is the STP's own child from another union and that child is not eligible (e.g., the STP has sufficient income), the client still has the option of including the STP in the AU (as in Item A above), but not the STP's child.
2. If there is child in the home who is the STP's own child from another union and that child is eligible (e.g., the STP has no income), the STP and his/her child must in the AU. If the STP has had his/her own case, the two AU's must be combined.

C. If STP has child in common with aided parent

1. If there is a child in common with the client and that child is not eligible (e.g., the STP is the PWE and is employed full time), the client still has the option of including the STP, but not the child.
2. If there is a child in common with the client and that child is eligible (e.g., the STP is the PWE and is unemployed), the STP and the child must be in the AU.

CalWORKs Eligibility Handbook	Citizenship and Non-Citizen Status 52-6
	Effective: 6-20-19

52-6 Citizenship and Non-citizen Status

Citizens of the U.S. and certain categories of non-citizens are eligible for CalWORKs. Citizens must prove their citizenship and non-citizens must prove their eligible non-citizen status. Aid shall not be authorized until citizen/non-citizen status is verified.

1. Eligibility Requirements

To be eligible for aid an applicant or recipient must be a California resident who is either a:

- U.S. citizen, or
- U.S. Nationals born in U.S. territories such as American Samoa or the American Virgin Islands, or
- A non-citizen who is a “qualified alien/qualified non-citizen”:
- Lawfully admitted for permanent residence, or
- Permanently residing in the U.S. under color of law (PRUCOL), including persons granted status as a:
 - a. Refugee,
 - b. Asylees, and
 - c. Parolees,
 - d. Conditional Entrants,
 - e. Persons granted an indefinite stay of deportation, and
 - f. Persons granted indefinite voluntary departure in lieu of deportation.
- A victim of trafficking, domestic violence or other serious crime victim.

2. Citizenship Verification

For CalWORKs, acceptable verification of citizenship status must be provided and imaged to the case record. Acceptable verification includes the following:

- U.S. birth certificate
- Baptismal certificate
- U.S. Passport
- "Certificate of Citizenship" (N-560 or N-561) from USCIS
- "Certificate of Naturalization" (N-550 or N-570)
- "United States Citizen Identification Card" (I-179 or I-197)
- USCIS Identification form, or similar proof which shows the date and place of birth.

If this evidence is NOT available, the EW must document in the **Maintain Case Comments** window of CalWIN, the client's explanation for lack of such evidence.

The client must provide other evidence which proves the date and place of birth in the U.S. or U.S. territory or citizenship within ninety days. Failure to do so will result in ineligibility. The EW must create a **Case Maintenance Alert** in CalWIN for the case with a due date of 60 days from the beginning month of aid.

Note: The EW must document citizenship verification for all citizen applicants or recipients on the SAWS 2 Plus or other appropriate Statement of Facts.

3. Non-Citizens

Non-citizens are any persons who are not U.S. citizens. This includes the following persons:

- Persons who have immigrated to the U.S. with USCIS documentation
- Tourist
- Students
- Foreign government officials, Persons here on business, and
- Undocumented persons.

4. Ineligible Non-Citizens

The following persons are NOT eligible to the CalWORKs program:

- Visitors
- Persons in the U.S. on business, or for religious purposes
- Tourists
- Students, and
- Undocumented persons.

Note: Non-citizens who have applied for political asylum are *not* eligible until political asylum has been granted by the State Department.

5. Qualified Non-Citizens

Only certain categories of non-citizens are eligible for CalWORKs. For the purposes of the CalWORKs program, “qualified non-citizens” are one of the following:

- Lawfully Admitted for Permanent Residence (LPR)
- A non-citizen who is lawfully admitted for permanent residence under the Immigration and Nationality Act (INA), known as the “Act.”
- Asylee
- Asylum has been granted under Section 208 of the Act.
- Refugee
- Admitted as a refugee under Section 207 of the Act.
- Parolee
- Individuals who are paroled as refugees under Section 212(d)(9)(B) of the INA.
- Deportee
- Conditional Entrant

Federally Funded CalWORKs

To be eligible to federal CalWORKs, a non-citizen must be:

1. A California resident, and
2. A “qualified non-citizen” who arrived:
 - a. Prior to 8/22/96, or
 - b. On or after 8/22/96 and meets the “exception criteria,” or
 - c. has resided in the U.S. for a period of 5 years beginning on the non-citizens date of entry.

“Exception Criteria”

Qualified non-citizens who entered the U.S. on or after 8/22/96 are not eligible for Federal CalWORKs for five years from the date of entry unless they:

1. Become a U.S. citizen or
2. Meet the "Exception Criteria."

Qualified non-citizens who enter the U.S. at anytime can be eligible for Federal CalWORKs immediately if they meet the following "exception criteria" and are otherwise eligible:

- **Cuban-Haitian Entrant**- A non-citizen who is a Cuban/Haitian entrant as defined in Section 501(e) of the Refugee Education Assistance Act of 1980.
- **Battered Non-Citizen** - Certain battered non-citizens as defined in "Personal Responsibility and Work Opportunity Reconciliation Act" (PRWORA), Title IV, Section.
- **Victims of Trafficking, Domestic Violence, and other Serious Crimes** - Non-citizens who meet the criteria in U.S. Code Title 22 and Title 8.
- **Refugee** - Admitted as a refugee under Section 207 of the Act. Also included under Refugee status are Trafficking Victims.
- **Asylee** - Asylum has been granted under Section 208 of the Act.
- **Deportee** - Deportation is being withheld under Section 243(h) of the Act (as in effect immediately before the effective date of Section 307 of Division C of P.L. 104-208) OR 241(b)(3) of the Act (as amended by Section 305(a) of Division C of P.L. 104-208).
- **Non-citizen with Veteran Status** - Veteran status is defined as:
 - (a) A veteran (as defined in Section 101 of the Title 38, U.S.C) with a discharge characterized as an honorable discharge and not an account of Alienage, and who fulfills the minimum active-duty service requirements of Section 5303A(d) of Title 38 U.S.C., OR
 - (b) A veteran on active-duty (other than active duty for training) in the Armed Forces of the United States, OR
 - (c) The spouse or unmarried dependent child of an individual described in 1 or 2, OR

(d) The surviving spouse of an individual (who has not remarried) described in 1 or 2 who is deceased if the marriage fulfills the requirements of 38 U.S.C., Section 1304

- **LPR with Work Quarters** - An LPR admitted to the U.S. under the Act and having 40 qualifying quarters of coverage as defined under Title II of the Social Security Act or can be credited with such qualifying quarters as provided under Section 435, and (ii) in the case of any such qualifying quarter creditable for any period beginning after December 31, 1996, did not receive any Federal means-tested public benefits (as provided under PRWORA section 403) during any such period.
- **Amerasian** - A non-citizen admitted to the U.S. as an Amerasian as described in PROWORA, Section 402(a)(2)(A)(i)(V).

State-Only CalWORKs Program

A qualified non-citizen who has entered the U.S. on or after 8/22/96, and is within their first five years of their Date Of Entry (DOE), may be eligible to State-Only CalWORKs.

To meet the requirements for the State-Only program, a non-citizen must be:

- A California resident, and is
- A "qualified non-citizen" who arrived on or after 8/22/96 and does not meet the "exception criteria." These persons receive State-Only CalWORKs during their first five years from their DOE in the U.S.; or

Persons who do not meet the "qualified non-citizen" status but are eligible under the previous AFDC program.

Those include:

Persons permanently residing in the U.S. under color of law, including:

- (1) Non-citizens granted temporary parole status by the Attorney General under Section 212(d)(5)
- (2) Non-citizens granted indefinite voluntary departure in lieu of deportation, and
- (3) Non-citizens granted an indefinite stay of deportation.

Persons who do not meet the "qualified non-citizen" status but are eligible under the CalWORKs Trafficking and Crime Victims Assistance Program (TCVAP).

Verification

The following chart provides a list of acceptable documentation to determine if a non-citizen meets the “qualified” status. Eligibility Workers should use the chart as a guide to aid in determining if the “qualified non-citizen” is presenting acceptable verification of immigration status.

Non-Citizen Status	Acceptable Verification
Lawfully admitted for permanent residence	USCIS Form I-551, or earlier Forms I-151, AR 3, AR-3A, if noted to show legal right to reside permanently.
Granted Asylee status	I-94 showing asylum granted under Section 208; or I-94 stating paroled as an Asylee under Section 208 along with a letter from USCIS granting asylum.
Granted Refugee status	INS Form I-94 endorsed paroled as a refugee under Section 207.
Granted parole status (for indefinite period)	I-94 endorsed to show paroled to U.S. for at least one year under Section 212(d) 5.
Deportation is being withheld	Correspondence from USCIS stating that deportation is withheld under Section 243(h) of the Act (as in effect immediately before the effective date of Section 307 of division C of P.L. 104-208) or Section 241(b)(3) of the Act (as amended by Section 305(a) of division C of P.L. 104-208).
Granted Conditional Entry	Correspondence from USCIS showing conditional entry pursuant to Section 203(a)(7) of the Act as in effect prior to April 1, 1980.
Cuban/Haitian Entrants	Documentation showing Cuban/Haitian Entrant as defined in Section 501(e) of the Refugee Education Assistance Act of 1980.
Battered	Documentation from USCIS showing approval under PRWORA Title IV, Section 431.
Granted indefinite voluntary departure	Correspondence from USCIS confirming indefinite voluntary departure.
Granted indefinite stay of deportation	Correspondence from USCIS confirming indefinite stay of deportation.
Trafficking Victim	Clients sworn statement under penalty of perjury (SCD 101)
Victims of Domestic Violence and Other Serious Crimes	Receipt or letter from USCIS, I-797 based on an application for a U Visa, I-918, or an Employment Authorization Card (EAC) issued under category “A19” or “A20.”

Note: Possession of Form I-94 itself is not proof of permanent residence. Form I-94 is also used for temporary residence.

Qualifying Quarters

Lawfully admitted permanent residents who enter the country on or after August 22, 1996 must have 40 qualifying work quarters to be eligible to federally-funded benefits. In addition to the applicant/recipients own work quarters, the quarters can be credited from:

- Natural parents, stepparents, or adoptive parents while the individual was under the age of 18 and the relationship existed;
- Current spouse, and
- A former spouse if the marriage ended by death.

Effective January 1, 1997, any quarter in which the non-citizen received any Federal means-tested public benefit (such as CalWORKs, RCA, etc) is not counted as a qualifying quarter.

IEVS Applicant Report

The Social Security Administration (SSA) has an automated process for accessing earnings' records for qualified non-citizens, their spouses, and their parents. This process has been incorporated into the Income Eligibility Verification System (IEVS) applicant match.

Data is included on the IEVS Applicant Report. The data match will reflect the total number of qualifying quarters for an individual as well as the specific years for which those quarters were credited.

Note: IEVS reports do not reflect if the individual received any Federal means tested public benefits. EWs must review CalWIN and MEDs to determine if the individual received any public benefits.

Lag Period Verification

Data for the current year and in some cases the prior year are not available on the match. The earnings for this period must be verified if these quarters are needed to establish eligibility.

The following types of verification are acceptable for lag period quarters:

- W-2 or W2C forms
- Pay stubs
- Employer statements of wages indicating that taxes were withheld.

Quarters Confirmed

Approve the qualified non-citizen for federally-funded CalWORKs assistance if otherwise eligible.

Quarters Not Confirmed

If the 40 work quarters are not able to be confirmed then:

- Determine if any additional work history claimed during the lag period has not been included on the IEVS report,
- Review verification received for income claimed during the lag period, and
- If sufficient quarters are documented, then approve Federally funded CalWORKs if all other eligibility is met, or
- If less than 40 quarters are documented, then approve State funded CalWORKs if all other eligibility criteria is met, then:

- Approve State-Funded CalWORKs if the individual has resided in the U.S. less than 5 years from the DOE, or
- Approve Federal-Funded CalWORKs if the individual has resided in the U.S. for 5 years or more provided the individual meets the criteria for federal eligibility.

Non-Citizen Categories

The following sub-categories are the various types of non-citizens who may be eligible for CalWORKs.

Non-citizens Permanently Residing In The U.S. Under Color Of Law (PRUCOL)

Permanently Residing Under Color of Law (PRUCOL) refers to non-citizens living in the U.S. with the knowledge and permission of the Department of Homeland Security (DHS) and who DHS does not plan to deport.

In some cases the PRUCOL non-citizen may have filed an application for permanent residency. In other cases, the non-citizen may have been granted permission to remain in the U.S. under another immigration classification.

PRUCOL is not a separate USCIS immigration classification (such as refugee, lawful permanent resident, parolees, etc.) but rather is a term defined by regulations and court decisions to describe categories of non-citizens who are potentially eligible for certain public benefits. The public benefits covered by PRUCOL are CalWORKs, Foster Care, and Medi-Cal. PRUCOL non-citizens may be eligible to Federal or State funded benefits depending on:

- The qualified non-citizen status
- The five-year ban exemption and
- The date of entry.

Non-immigrant non-citizens, lawfully admitted for a temporary purpose or temporary residence, and undocumented non-citizens are not eligible for State or Federally funded CalWORKs benefits

Battered Non-citizen Status

Battered non-citizens may be considered “qualified” immigrants for purposes of receiving public assistance (i.e. CalWORKs, Medi-Cal, CalFresh, etc.) before they obtain lawful permanent resident (LPR) status, if they have filed a petition under Violence Against Women Act (VAWA) showing they are apparently eligible for LPR status. Battered non-citizen status applies only to VAWA applicants.

Other immigrants who are not yet citizens are not covered by the battered non-citizen status. Verification of the petition being filed must be provided prior to approval of public assistance.

Documentation

The non-citizen applying for VAWA may receive benefits if USCIS grants them “Battered Non-citizen” status. Only USCIS can make the determination of “Battered Non-citizen” status. These individuals typically have not received their permanent immigration status and have been issued a prima facie document from USCIS.

Note: Battered non-citizen status is different from victims of domestic abuse with sponsored non-citizen or lawful permanent resident (LPR) immigration status. These individuals are exempt from sponsor deeming rules. Documentation of domestic abuse does not meet the requirement for Battered Non-citizen status.

Central American Minor Program

The Central American Minor (CAM) Program is an in-country family reunification program that permits qualifying parents, who are lawfully present in the U.S., to request access to the U.S. Refugee Admissions Program for their children who are still in El Salvador, Guatemala, or Honduras.

To bring a child to the U.S., a qualifying parent must be at least 18 years of age and lawfully present in the U.S. in one of the following seven categories at the time of filing an application with a Resettlement Agency (RA):

- Permanent Resident Status;
- Temporary Protected Status;
- Parolee;
- Deferred Action for Childhood Arrivals (DACA);
- Deferred Action (non-DACA);
- Deferred Enforced Departure; or
- Withholding of Removal.

Other categories of non-citizens, who are lawfully present in the U.S., outside of the CAM Program, such as asylees, victims of trafficking or other serious crime with a T or U Visa, and special immigrant visa holders, may have other programs to bring eligible derivatives to the U.S. Minors who enter the U.S. through the CAM Program are eligible for benefits and services to the same extent as any other child with refugee/parolee status.

Individuals Paroled as Refugees

Individuals who are paroled as refugees under Section 212(d)(5) of the INA, may receive benefits and services to the same extent as persons who are admitted to the U.S. as refugees (i.e. RCA, CalWORKs, etc.). These individuals are exempt from sponsor deeming rules and CalWORKs eligibility begins one year after the non-citizen has been paroled in the U.S.

Note: The provisions for RCA differ and provide program linkage on the date of entry into the U.S.

Special Immigrant Visa (SIV) for Iraqi and Afghan Individuals

Iraqi and Afghan individuals who were employed by or assisted the U.S. Armed Forces with translations and interpreter services are admitted to the U.S. with Special Immigration Visas (SIVs).

These Iraqis/Afghans and their family members are eligible for to receives CalWORKs benefits effective upon their DOE to the U.S. with proper documentation from USCIS and are treated as qualified non-citizens.

These families are required to meet all eligibility criteria including welfare to work and reporting requirements.

Verification

There are two types of proper documentation to verify that the Iraqi or Afghan principal SIV applicants and their families (spouses and their unmarried children) are in receipt of a SIV are:

1. An Iraqi or Afghan passport with an Immigrant Visa (IV) stamp noting that the individual has been admitted under any one of the following categories:

- SI1 or SQ1 (Principal Applicant);
- SI2 or SQ2 (Spouse of SI1 or SQ1);
- SI3 or SQ3 (Unmarried child, under the age of 21, of SI1 or SQ1);
- SI6 or SQ6 (Principal Adjusting Status in the U.S.);
- SI7 or SQ7 (Spouse of SI6 or SQ6);
- SI9 or SQ9 (Unmarried child, under the age of 21, of SI6 or SQ6); and
- A Department of Homeland Security (DHS) stamp or notation on passport or I-94 showing date of entry.

2. DHS Form I-551 with a code of SI6 or SQ6, SI7 or SQ7, or SI9 or SQ9 which confirms both the status and the date of entry into the U.S. for the principal SIV applicant.

For Iraqi or Afghan Special Immigrants who acquire SIV status while in the U.S., the date of eligibility begins on the date the SIV status is granted.

Senate Bill 1569 - State-Only CalWORKs Trafficking and Crime Victims Assistance Program (TCVAP)

Senate Bill 1569 was enacted January 1, 2007, to provide state-funded assistance for non-citizen victims of human trafficking, domestic violence or other serious crimes prior to Office of Refugee Resettlement (ORR) certification.

In most cases, non-citizen trafficking and serious crime victims must apply to the United States Citizenship and Immigration Services (USCIS) for a "T" Visa or "U" Visa, respectively, which allows them to remain in the country and to assist law enforcement with the investigation and prosecution of the crimes against them.

CalWORKs TCVAP victims are eligible for state-funded cash assistance if they meet the income, resource, and other CalWORKs program requirements.

Eligibility for state-funded benefits and services under TCVAP will be terminated if the recipient no longer meets CalWORKs eligibility criteria; for example, the income and/or resource limit has been exceeded or there is no longer a qualifying child in the AU.

Sponsored Non-Citizen Definition

A sponsored non-citizen is a non-citizen whose entry into the United States (U.S.) was sponsored by a person or group which, as part of the sponsorship, executed an affidavit of support or similar agreement on behalf of the non-citizen as a condition of the non-citizen's entry into the country. The affidavit of support (I-864 or I-864A) attests that the sponsor (and/or the sponsor's spouse) has sufficient income and resources to meet the non-citizen's needs.

A portion of the sponsor's income and resources are considered available to the sponsored non-citizen. The process used to determine the portion of income and resources available to the sponsored non-citizen is called **deeming**.

The following policy provides instructions in accordance to regulations that are applicable to all sponsored non-citizens regardless of age (i.e. adults and sponsored children under the age of 18).

Guidelines

Sponsorship status must be explored in the same way all other aspects of eligibility are explored for all Legal Permanent Residents (LPR) with a date of entry on or after December 1, 1997. The circumstances under which a non-citizen entered into the U.S. must carefully be explored to determine whether the client is sponsored.

When the reported information and verifications are consistent, then the client's statement regarding sponsorship on the Statement of Facts is sufficient. Applications can not be approved until sponsorship status has been determined.

Sponsored Non-Citizen

Sponsored provisions do not apply if the non-citizen:

- Is paroled into the U.S. as a refugee, or
- Is granted political asylum, or
- Is of Cuban or Haitian nationality, or
- Entered the country with an I-134 Affidavit of Support (used for entries prior to 12/19/97), or
- Is sponsored by a public organization or private agency.
- Sponsored rules apply until the non-citizen:
 - Achieves United States citizenship through naturalization, or
 - Leaves the country permanently, or
 - Dies or the sponsor dies, or
 - Has worked or can be credited with 40 qualifying work quarters under Title II of the Social Security Act, and has not received federal means-tested public benefits during that period.

Exceptions

Sponsorship provisions will not be applied when the non-citizen has been determined to be indigent or battered.

Indigent

The sponsorship provisions will not apply for a period of 12 months beginning on the date of the indigence determination when it has been determined that a sponsored non-citizen will go hungry and homeless without aid and the sponsored non-citizen is:

- a. Unable to provide the necessary information regarding their sponsor, or
- b. The county has not been able to contact the sponsor.

- c. This exception is not renewable and it is granted only once in a lifetime.

A Case Maintenance Alert must be created to review the indigent determination at the end of the 12 month period.

Example:

Mr. X and family are sponsored non-citizens with a date of entry of 2/17/15. They apply for CWs on 8/1/15. They are determined to be indigent and are approved for CWs effective 8/1/15. Mr. X and family received CalWORKs from 8/15 through 5/16 when they are discontinued for income over IRT.

In 9/16 Mr. X is back to apply for CalWORKs because he lost his job. All sponsored non-citizens in the assistance unit (AU) are no longer eligible to the "indigent" exception because the 12 month exception period has ended effective 7/16. After the indigent period has expired they are no longer eligible to this exception. They now must comply with the sponsorship requirements.

Battered Non-citizen

Battered non-citizens are exempt from the sponsorship rules for a period of 12 months if:

- The non-citizen has been battered or subjected to extreme cruelty in the United States by a spouse or a parent; or by a member of the spouse or parent's family who is residing in the same home as the non-citizen; OR
- The non-citizen child has been battered or subjected to extreme cruelty in the U.S. by the spouse, or parent(s), or family members of the non-citizen.

After a 12-month period, the exception to the rules regarding the batterers income and resources continue only if the non-citizen demonstrates that such battery or cruelty has been recognized by a:

- Order of a judge, or
- Administrative law judge, or
- A prior determination from USCIS.

Note: The Battered Non-Citizen exemption should be explored in all cases where the 12-month indigent exemption was granted.

Affidavit of Support

Sponsors submit an "Affidavit of Support" (I-864) promising to financially assist the non-citizen as a condition of the non-citizen's entry into the United States. When a non-citizen is sponsored they will have an I-864.

Obtaining the I-864

When the client does not have their copy of the "Affidavit of Support" (I-864), a secondary SAVE verification request must be completed. Eligibility to benefits can not be determined until the "Document Verification Request" (G-845) and the "INS Document Verification Request Supplement" (G-845 Supplement) has been returned affirming non-citizen status.

Conditions of Eligibility

A sponsored non-citizen must provide information and documentation of the sponsor's income and resources. As a condition of eligibility for CalWORKs, a sponsored non-citizen who is sponsored by an individual must complete all of the following steps:

1. Client	Obtain the necessary cooperation from the sponsor by providing the "Affidavit of Support" (I-864) and completing the "Sponsor's Statement Of Facts Income And Resources" (SAR 22) with the income and resource verifications to make eligibility determination.
2. EW	Determine eligibility by using information and verification provided on I-864 and SAR 22.
3. Client	Comply with reporting responsibilities (i.e. SAR 72, IRT reporting, etc.).

Until the conditions of eligibility are met, the sponsored non-citizen is not apparently eligible and cannot receive Diversion, Homeless Assistance or an Immediate Need. Aid shall be denied only to the sponsored non-citizen(s), in the assistance unit, if the non-citizen is unwilling or fails to provide the information.

Sponsored Non-Citizens Applying for or Receiving Cash and/or CaIFRESH (SAR 22)

The SAR 22 is a mandatory supplement to the SAWS 2 PLUS and is used to gather the sponsor's income and resource information. As a part of the application for aid (SAWS 2 PLUS), the sponsored non-citizen and sponsor must provide a completed and signed SAR 22.

The sponsored non-citizen is responsible for ensuring that the SAR 22 is complete and all required income and resource verifications are provided. Failure to provide a completed SAR 22 with the appropriate verifications shall result in the denial of aid to the sponsored non-citizen(s).

Application Processing

CalWORKs regulations require that an application be approved or denied no later than 45 days following the date of application. This time period applies to the SAVE process and does not change the CalWORKs payment requirements.

If an applicant/recipient identifies him/her-self as a “lawful non-citizen”, the EW must determine the non-citizen status by questioning the applicant/recipient and reviewing the immigration documents.

If the requested non-citizen documentation is not provided by the 45th day following the date of application, deny the non-citizen member(s) of the AU. Do not delay granting aid to the remaining member(s) of the AU, pending documentation of non-citizen status if the AU is otherwise eligible.

Deeming

All income and resources of the non-citizen’s sponsor, and the sponsor’s spouse, who is not receiving CalWORKs, SSI, or other public cash assistance (such as General Assistance) shall be considered, or deemed, to be available to the sponsored non-citizen. Deeming occurs indefinitely until the sponsored non-citizen:

- Achieves U.S. citizenship, or
- Leaves the country permanently, or
- The sponsor dies (verification required if information is questionable), or
- Sponsor or sponsor’s spouse starts receiving public assistance benefits, or
- Has worked 40 qualifying work quarters of coverage under Title II of the Social Security Act or can be credited with such qualifying quarters.

Determination of Income

The income of the sponsor and the sponsor’s spouse who lives with the sponsor, and who is not receiving cash aid, SSI, or other public cash assistance is deemed to be the sponsored non-citizen’s income. The income is determined as follow:

Step	Action
1.	Determine the total amount of unearned income of the sponsor and sponsor’s spouse.
2.	Determine the total amount of earned income of the sponsor and spouse (i.e. wages, salary, or net earnings from
3.	If the sponsor is the sponsor of more than one non-citizen, divide the total gross income (from Step 1 and 2) by the total number of sponsored non-citizens who are applying for or receiving cash aid including those in separate assistance units. This amount is deemed to be the income of each sponsored non-citizen applicant or recipient.
4.	When the sponsored non-citizen is not included in the assistance unit (AU), the portion of the sponsored non-citizens income, which has been deemed from the sponsor, is not to be used in determining the contribution to the AU unless the income is actually available.

5.	When the sponsored non-citizen is a member of the AU, the deemed income from the sponsor and the sponsor's
6.	If the sponsored non-citizen is either an excluded parent or stepparent, the income shall be treated in

Determination of Resources

- The resources of the non-citizen's sponsor and the sponsor's spouse living with the sponsor are deemed to be the sponsored non-citizen's resources.
- The total value of non-exempt real and personal property of the sponsor and the sponsor's spouse is determined as if they were applying for aid.
- If the person is the sponsor for more than one non-citizen, the resources shall be divided by the total number of sponsored non-citizens receiving CalWORKs including those non-citizens in separate assistance units.
- This amount is deemed to be the resources of each sponsored non-citizen.
- If the deemed resources alone, or in combination with other property of the assistance unit, exceed the property limits, only the sponsored non-citizen(s) are ineligible.
- These resources are not considered available to other applicants or recipients in the family who are not sponsored non-citizens, unless the resources are actually available to the assistance unit.

Example 1.

The sponsor and the sponsor's spouse have \$4,500 in real and personal property. They have sponsored 3 persons into the United States; 2 are applying for CalWORKs.

$\$4,500 \div 2 = \$2,250$ (amount to be deemed per person applying for CW.) The non-citizens are not eligible; the total deemed property from the sponsor to the sponsored non-citizens ($\$2,250 \times 2 = \$4,500$) exceeds the property limit.

Example 2.

Family applying for CalWORKs - father is a sponsored non-citizen, 3 children are refugees, mother is deceased. Sponsor and spouse have \$3,000 in real and personal property. The father is the only non-citizen they have sponsored and he is not eligible.

$\$3,000/1 = \$3,000$ is available to the non-citizen Father. Father would not be eligible due to the \$3,000 deemed to him from sponsor's resources. However, the 3 children could be eligible. There would be no deeming of the sponsor's income or resources to the children unless it was actually made available to them.

Non-citizens Sponsored by Agencies or Organizations

(EAS 43-119.3)

Non-citizens sponsored by agencies or organizations are considered ineligible for aid for three years from the date established by the Immigration and Naturalization Service as the date of entry for permanent residence in the United States unless the agency or organization either

- (1) No longer exists or
- (2) Is unable to provide for the needs of the alien.

When the Organization No Longer Exists

At the time of application, the non-citizen may state that the sponsoring agency or organization no longer exists, if so:

- Request written verification from the applicant
- Have the applicant complete consent Form 8014 and attempt to document the existence/nonexistence of the organization.
- If neither the applicant nor the worker can obtain conclusive evidence regarding the existence of the sponsoring organization, the non-citizen's sworn statement must be accepted, and they shall be aided, if otherwise eligible.

When the Organization Cannot Meet the Needs of the Non-Citizen

At the time of application, the sponsored non-citizen must submit a complete Form CA-24.

Failure to provide a complete CA-24, signed by the director or other authorized agency personnel, shall result in the denial of aid to the non-citizen.

- If the CA-24 reveals that the sole sponsor is able to contribute the MBSAC amount plus the value of any special need(s) for the non-citizen's assistance unit (whether or not the organization actually provides this amount, the non-citizen family is ineligible for assistance.
- If the CA-24 reveals that the sole sponsor is no longer able to contribute the MBSAC amount plus the value of any special need(s) for the non-citizen's assistance unit, the non-citizen family is eligible for assistance.
- If an assistance unit has more than one sponsor, or if fewer than all members of the assistance unit are sponsored by the agency and at least one sponsoring

agency is unable to contribute its prorated portion of the total MBSAC plus the value of any special need(s), the non-citizen family is eligible for assistance.

- If the sponsoring agency states that it is able to meet only part of the non-citizen's needs (less than the applicable MBSAC amount plus the value of any special needs), the non-citizen, if otherwise eligible, must be aided.

(a) The actual amount provided by the sponsor is treated as net nonexempt income available to the AU.

(b) Any in-kind income received by the alien shall be so budgeted.

If the sponsoring agency fails or refuses to provide the alien(s) with a signed statement of its inability to meet all or part of the alien's needs:

- The client must complete consent Form 8014.
- The worker must attempt to obtain a statement from the organization.
- If neither the client nor the worker can obtain such statement from the organization, the alien is ineligible.

Sponsors Semi-Annual Income and Resources Report (SAR 72)

The sponsored non-citizen recipient is responsible for submitting a "Semi-Annual Eligibility/Status Report" (SAR 7) and a "Sponsors Semi-Annual Income and Resources Report" (SAR 72) by the fifth calendar day of the submit month.

Workers must provide the SAR 7 and SAR 72 at redetermination, explain requirements to complete and return in a timely manner with all necessary and important information.

The SAR 72 is considered complete if ALL of the following requirements are met:

1. It is dated no earlier than the first day of the submit month.
2. The boxes for the address and county where signed are completed.
3. It is signed by the sponsor and the recipient.
4. All questions and items pertaining to the income and resources of the sponsor are fully answered.
5. The information together with the submitted evidence must provide the necessary information to correctly determine the amount of income and resources to be deemed to the recipient.

Evidence is submitted with the SAR 72 to establish the gross amount of income received by the sponsor or sponsor's spouse (if living together) and the date of receipt.

Note: The SAR 72 is not required when the sponsored non-citizen(s) qualifies for one of the two deeming exceptions listed above.

Failure to provide a completed SAR 72 on or before the 1st calendar day of the next SAR payment period shall result in a discontinuance for the sponsored non-citizen members of the AU.

Systematic Alien Verification for Entitlements (SAVE)

The Immigration Reform and Control Act of 1986 (IRCA-86) mandates that the immigration status of each non-citizen applicant/recipient must be verified with USCIS as a condition of eligibility for CalWORKs, CalFresh, or Medi-Cal. USCIS has designated Systematic Alien Verification for Entitlements (SAVE) as the system used to verify each non-citizen's immigration status.

References: Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), as amended, title IV, sections 421, 422, 423 (8 USC 1631, 1632, and 1183a respectively); Title IV-A, Section 408(f) of the Social Security Act (42 USC 608(f)); and section 213A of the Immigration and Nationality Act (INA, or the Act) (also found at 8 USC 1183a). Eligibility and Assistance Standards (EAS) 42-205.5, EAS 43-119.221, 42-430, 43-119, 44-133.7, 82-832.1.

CalWORKs Eligibility Handbook	Aliens Sponsored by Agencies or Organizations 52-7
	Effective 03-01-98

52-7 Aliens Sponsored by Agencies or Organizations

Aliens Sponsored by Agencies or Organizations (EAS 43-119.3)

Aliens sponsored by agencies or organizations are considered ineligible for aid for three years from the date established by the Immigration and Naturalization Service as the date of entry for permanent residence in the United States unless the agency or organization either (1) no longer exists or (2) is unable to provide for the needs of the alien.

I. When the Organization No Longer Exists

A. At the time of application, the alien may state that the sponsoring agency or organization no longer exists.

1. Request written verification from the applicant
2. Have the applicant complete consent Form 8014 and attempt to document the existence/nonexistence of the organization.

B. If neither the applicant nor the worker can obtain conclusive evidence regarding the existence of the sponsoring organization, the alien's sworn statement must be accepted, and the alien shall be aided, if otherwise eligible.

II. When the Organization Cannot Meet the Needs of the Alien

A. At the time of application, the sponsored alien must submit a complete Form CA-24, Sponsoring Agency or Organization's Statement of Facts Regarding Ability to Meet the Alien's Needs. Failure to provide a complete CA-24, signed by the director or other authorized agency personnel, shall result in the denial of aid to the alien.

1. If the CA-24 reveals that the sole sponsor is able to contribute the MBSAC amount plus the value of any special need(s) for the all-alien assistance unit (whether or not the organization actually provides this amount, the alien family is ineligible for assistance.
2. If the CA-24 reveals that the sole sponsor is no longer able to contribute the MBSAC amount plus the value of any special need(s) for the all-alien assistance unit, the alien family is eligible for assistance.
3. If an assistance unit has more than one sponsor, or if fewer than all members of the assistance unit are sponsored by the agency and at least one sponsoring agency is unable to contribute its prorated portion of the total MBSAC plus the value of any special need(s), the alien family is eligible for assistance.
4. If the sponsoring agency states that it is able to meet only part of the alien's needs (less than the applicable MBSAC amount plus the value of any special needs), the alien, if otherwise eligible, must be aided.
 - a. The actual amount provided by the sponsor is treated as net nonexempt income available to the AU.

b. Any in-kind income received by the alien shall be so budgeted.

B. If the sponsoring agency fails or refuses to provide the alien(s) with a signed statement of its inability to meet all or part of the alien's needs:

1. The client must complete consent Form 8014.
2. The worker must attempt to obtain a statement from the organization.
3. If neither the client nor the worker can obtain such statement from the organization, the alien is ineligible.

CalWORKs Eligibility Handbook	Family Reunification (AB 429) 52-8
	Effective 08-13-09

52-8 Family Reunification (AB 429)

I. Introduction

Assembly Bill 429 allows continuation of CalWORKs services for the parent or parents of children who have been separated from their home by Family and Children's Services (FCS), if the county determines that the services are necessary for Family Reunification (FR).

AB 429 allows the parents to receive WtW supportive services, stay on track in their WtW plan, and the continuation of CalWORKs benefits after reunification. It supports the achievement of outcomes on safety and permanency for children and the well-being of the family by aiding family reunification and reducing the number of children re-entering Foster Care.

AB 429 permits parents in these cases to continue to receive CalWORKs WtW and support services, such as substance abuse and mental health services if it is determined that such services are necessary for family reunification.

During the family reunification period, the parent or parents in the case may be issued cash aid through the CAAP program. The CalWORKs WtW employment specialist will issue the necessary supportive services to the parent(s). Parents are eligible for

Transitional Food Stamps, as the family is receiving CalWORKs services. Cash linked eligibility to Medi-Cal during the FR period **stops**.

II. Definitions

A. Linkages Case Coordination Meetings

Workers in FCS and CalWORKs are required to establish a collaborative case management process that includes:

1. Determination of the family's need to CalWORKs services to support Family Reunification plans, and;
2. The coordination of CalWORKs services with other child welfare services needed for Family Reunification.

The FCS Protective Service Worker (PSW) and CalWORKs staff must work together in a collaborative manner for the best interest of the families and the programs within a framework of team building and communication. This team building and communication is realized through **Linkages Case Coordination** meetings addressing Family Reunification and WtW.

Multi-disciplinary Team meetings (MDT) are being phased out and gradually replaced by the Linkages Case Coordination Meetings.

Linkages Case Coordination meetings bring together the family, Protective Service Worker, CalWORKs staff, an other community providers and family support for case planning and coordination.

These meetings are scheduled by the designated Linkages staff who sets the date and time for the Linkages Case Coordination meetings and disseminates all relevant information on each Linkages Case Coordination Meeting.

Every Linkages Case Coordination meeting is preceded by a pre-staffing meeting which is convened by the Linkages Coordinator. This pre-staffing meeting is held to clarify logistics on date, time, and participants involved and roles and responsibilities of PSWs and CalWORKs staff at the meeting.

B. CalWORKs Eligibility

1. Definition of a CalWORKs Reunification case:
 - a. The child(ren) has been separated from the parent(s) and placed in out-of-home care.

- b. The parent(s) and child(ren) remaining in the home are ineligible for cash aid.
- c. The PSW has determined CalWORKs services are necessary for Family Reunification
- d. The PSW has initiated a request for continuation of FR services.

2. CalWORKs eligibility for reunification services

Eligibility for CalWORKs reunification services exists when:

- a. All children are separated from the home and placed in out-of-home care or;
- b. Some children are removed from the home but the case becomes ineligible for cash aid due to excess income that resulted from the CalWORKs Assistance Unit reduction.

Examples of support services include:

- Transportation
- Work/Training related costs
- Mental health and substance abuse services
- Domestic violence services
- Goodwill vouchers for work clothes
- Transitional Food Stamps
- CalWORKs Social Work services
- Childcare for children remaining in the home

Clients who had their aid suspended due to sanctions or who have been exempt from WtW activities and services are also eligible to receive CalWORKs services as defined in FR cases. Clients under sanction may be reinstated to CalWORKs services immediately.

Children need to be discontinued in CalWIN the day before Foster Care payments begin.

3. Food Stamp Eligibility

CalWORKs Family Reunification cases are eligible for five months of TFS after the case has been discontinued. In the fifth month, the parent/caretaker needs to apply for NAFS. The ES assigned to a CalWORKs Family Reunification case should remind the client to apply for NAFS before the end of the five month TFS period.

4. Medi-Cal Eligibility

After the CalWORKs case has been discontinued, cash linked Medi-Cal eligibility ends. Medi-Cal will have to be re-determined at the end of the Family Reunification period.

C. CalWORKs AB 429 Family Reunification cases and other Linkages Cases

All Linkages cases are open in both programs and AB 429 cases are a subset of Linkages cases. If after separation one or more children remain in the home and cash eligibility continues for the remaining family members, the case is considered a Linkages case and not a CalWORKs Family Reunification case.

Family Reunification AB 429 case	Linkages case
All children are separated from the home and placed in out-of-home care and CalWORKs case becomes ineligible for a cash grant	Regular Linkages case when the case is open in both CalWORKs and Family & Children's Services. See Linkages Policies and Procedures Handbook
Some children are separated from the home, but CalWORKs case becomes ineligible due to excess income that resulted from the AU reduction	Some children separated from the home, but eligibility to CalWORKs cash grant continues.

III. Roles and Steps

A. Identification of CalWORKs Reunification Families by Foster Care Unit

Whenever a FCS-PSW in the Emergency Response Unit (ERU), Court Dependency Unit (CDU), or Family Service Unit (FSU) separates a child or children from the home of any biological or adoptive parent for placement out of the home, the PSW completes Form 1501 and forwards it to the Foster Care Eligibility Unit for determination of Foster Care eligibility.

B. Identification of CalWORKs Reunification Families by designated Linkages staff

The Linkages Coordinator or designated staff identifies CalWORKs Family Reunification cases from a monthly report and email alerts are sent by the CalWORKs Social Work Unit to the FCS-PSWs and Supervisors alerting them on potential cases identified.

The Linkages Coordinator also identifies AB 429 cases and sends email alerts to all staff involved.

C. Responsibilities of the Foster Care Application Coordinator/Supervisor

1. Forward one copy of Form 1501 along with Form 8102 (PSW requesting CW services) to the assigned FCS-PSW and a copy of Form 1501 to the CalWORKs EW/ES within two working days. **Send a CalWIN case alert to the CalWORKs worker and supervisor and CalWORKs Social Work Unit clerk to inform them that Form 1501 has been sent.**
2. Forward one copy of Form 1501 to the CalWORKs Social Work Supervisor if the case is active in CalWORKs.
3. Forward one copy of Form 1501 to the Linkages Coordinator if the case is active in CalWORKs.
4. For potential CalWORKs Family Reunification cases, the Foster Care Application Coordinator will fill out section 2 of Form 1501 and will distribute as above.
5. Upon receipt of the Foster Care Change Notice, Form 1502, complete a case search of CalWORKs and CAAP status and forward copies of Form 1502 to the CalWORKs and CAAP worker, if applicable.

D. Coordinated Service Delivery for CalWORKs Reunification Cases

The following actions must be completed to request and coordinate continuing CalWORKs services for Family Reunification families. The responsibilities involved are described for CalWORKs workers.

CalWORKs reunification cases, in general though not always, may be on discontinued or inactive status in CalWIN. Even though cash aid has been discontinued, CalWORKs supportive services will continue for CalWORKs Family Reunification cases.

Prior to the initial Linkages Case Coordination meeting, upon receipt of Forms 1501 and 8201 from the Foster Care Coordinator:

CalWORK EW staff shall:

1. Discontinue the cash aid with appropriate notice if no eligible children are left in the home and maintain WtW program.
2. Convert PAFS to TFS case and issue all other services requested.

3. Notify CalWORKs client about the case status, the possible continuance of CalWORKs services, and refer client to CAAP to apply for cash aid.
4. Give copies of Forms 1501 and 8102 to the assigned ES. If there is no assigned ES ask the clerk to assign an ES and to provide the new ES with copies of Forms 1501 and 8102.

CalWORKs ES staff shall:

1. Notify the parent(s) that supportive services will be issued through CalWORKs if an eligible child or children are left in the home but there is a zero cash grant due to income
2. Request from Record Management the client's case file to be used at all ongoing case planning and coordination.
3. Keep the case as long as it is in Family Reunification status, including any extensions.
4. Continue all CalWORKs services requested by the FCS-PSW on the CalWORKs Reunification Services Request for a period of up to 180 days from the separation date. A CalWORKs Reunification case will be 180 days from the separation date and may be extended.

After initial Linkages Case Coordination meeting, the ES shall:

1. Make referrals for CalWORKs supportive services requested by the FCS-PSW that are not currently provided.
2. Monitor participation in requested CalWORKs services
3. Coordinate services for the family by working closely with the Linkages Coordinator and the FCS-PSW.
4. Participate in follow-up Linkages Case Coordination meetings or other joint case staffing as scheduled.
5. Amend WtW plan, if applicable, to include all or part of the activities of the required FR plan.
6. Initiate monthly contacts with the FCS-PSW to discuss progress of client's participation in FR services and WtW plan, if applicable.
7. Upon receipt of Form 1502 indicating reunification of children with parent or caretakers is received, refer client to Intake as soon as PSW recommends that child be placed back in the home.

The Linkages Coordinator is responsible for sending email alerts, and facilitates and monitors the processing of AB 429 cases

Linkages Coordinator's responsibilities:

1. Linkages Coordinator sends email alerts to CalWORKs and FCS staff when a copy of Form 1501 is received from Foster Care indicating separation of children from a CalWORKs case. These emails shall alert staff in both programs about potential eligibility for CalWORKs reunification services, the steps to be followed by FCS-PSW to request CalWORKs supportive services, and the procedural steps to be followed to coordinate services between CalWORKs, FCS, and CAAP. For case specific questions about AB 429, contact the Linkages Coordinator.
2. Track compliance with AB 429 procedures by all programs by preparing a monthly tracking report of all potential AB 429 cases. The report shall indicate status of each AB 429 case and compliance on the part of all assigned workers.

IV. Reporting and Re-determination Requirements

A. Quarterly Reporting

A CalWORKs reunification parent is required to submit a QR 7 if he or she is receiving TFS. If the AU reports changes resulting in loss of eligibility during the quarter, the EW/ES will follow QR regulations.

CalWORKs family reunification parent(s) are **not** required to submit a QR 7 for cash during the period when the case is in FR status.

B. Six-Month Eligibility Redetermination

An eligibility redetermination for CalWORKs reunification services should be completed at six-month intervals in coordination with court review hearing dates. If the annual eligibility redetermination was due at the time of removal, the redetermination should be postponed to coincide with court hearings. If court review intervals are extended beyond the six months or shortened, the eligibility determination should be changed to coincide with the court date.

Follow-up Linkages Case Coordination meetings shall be held prior to all court hearings, including hearings to determine the return of children.

C. Eligibility Redetermination Calculation

The following calculation shall be used to determine income eligibility, in the context of no cash aid payment, at the six month redetermination.

1. Determine the AU that includes the eligible parent or parents, any remaining children, if applicable, and each child who has been placed in out-of-home care and considered temporarily absent.
2. Determine the AU's Net Nonexempt Income (NNI) after applying all disregards.
3. Compare the NNI to the MAP for the family size.
4. If the NNI does not exceed the MAP, the AU would remain eligible for continued CalWORKs FR services.

Example:

Client works full time earning \$775 per month. She has two children who are placed in out-of-home care. There is no need to average her income since it is received monthly and is expected to remain the same throughout the QP payment quarter. No other income was reported.

\$ 775	Average Monthly Earned Income
- 225	Income Disregard
\$ 550	Earned Income
- 275	Total NNI
\$ 694	Nonexempt MAP for 3

D. Eligibility determination after family reunification occurs

CalWORKs eligibility determination shall be required to restore cash aid to the CalWORKs case when a family is reunified after the children are returned to the home. Once the children have been returned, Foster Care Eligibility Unit clerk will forward a copy of form 1502 to the assigned CalWORKs reunification worker and also to the CAAP worker if the parent(s) were receiving CAAP assistance during the reunification period.

1. For parent(s) without CAAP cash assistance: upon receipt of Form 1502, the assigned CalWORKs worker will send out a renewal packet and meet face-to-face with the family to review the SAWS 2. Once the family is found to be eligible for CalWORKs, the beginning date of aid for re-issuance of cash benefits is the first day of the month following the return of the child to the home.
2. For parent(s) with CAAP cash assistance: if the parent(s) were receiving CAAP cash assistance during the reunification period, CalWORKs cash assistance shall be reinstated after discontinuance of CAAP assistance.

CAAP assistance can be discontinued at the end of the month with a ten-day notice, or any date during the month without a ten-day notice. If the CAAP discontinuance occurs before the end of the month, the portion of CAAP cash benefits for the month is budgeted to determine the CalWORKs cash benefit. Once the likely date of return of children is known, the CalWORKs ES should inform the parent to request CAAP discontinuance so that CalWORKs cash aid can be restored after CAAP is discontinued.

V. Good Cause extensions of the 180-day period

AB 429 allows for continued CalWORKs services during a 180-day period. Good Cause extension of this period may be granted in two situations:

1. When the court ordered six-month reunification plan begins some time **after** the child's removal and the plan will then extend beyond the initial 180 days of removal.
2. A Good Cause extension may also be granted when the PSW determines that additional time is necessary to complete the court-ordered reunification plan and as long as the family reunification plan remains in effect.

VI. Welfare-to-Work sanctions, work participation requirements, and exemptions

A. Welfare-to-Work sanctions: individuals who have received a WtW sanction are not precluded from receiving CalWORKs services for purposes of FR, and ay participate immediately regardless of sanction status. Individuals who fail to participate in WtW activities or any other activities required under the FR plan are not subject to the WtW noncompliance or sanctioning process. CalWORKs services that are part of an individual's FR plan shall be provided to these individuals until the FR plan is terminated by the PSW.

B. Work participation requirements: When any client volunteers to participate in a WtW plan, the court-ordered reunification plan could be used in lieu of the WtW plan and the noncompliance/sanction process would not apply. When the court-ordered reunification plan is used in lieu of the WtW plan, the client must be noticed in writing that the FR plan will take the place of the WtW plan. If the participant has signed a WtW plan, the court-ordered reunification requirements could become part of the WtW plan, and the noncompliance/sanction process applied, but **only** to the work and training activities. Even when sanctioned, the FR case will remain an active CalWORKs case and support services must be continued.

C. Welfare-to-Work Good Cause exemption: CalWORKs services are provided in conjunction with child welfare services as part of the FR plan. If participation activities required under the FR plan interfere with an individual's ability to comply with the WtW hours of participation requirements, the parent(s) must be granted Good Cause for not participating in his or her WtW activities.

VII. Time Limits

A. CalWORKs 60 months: supportive services would not be counted toward the CalWORKs 60 month time limit as no cash assistance is being issued.

B. TANF 60 months:

1. Supportive services that are provided by TANF funds to an **unemployed** parent are considered "assistance" and counts toward the federal TANF 60 month time clock, as long as services are being provided.
2. Supportive services that are provided to an **employed** parent are not considered "assistance" and do not count toward the federal TANF 60 month time clock.
3. A service/payment that is intended to meet recurrent and ongoing needs and provides for needs that extend for more than four months is considered "assistance" whether or not the parent is employed. Therefore, any month in which that type of service/payment is provided would count toward the federal TANF 60 month time clock.
4. A service/payment that provides for the need of a period that is four months or less is not considered "assistance" and would not count toward the federal TANF 60 month clock.

VIII. Forms.

Form	Form Name	Purpose
1501	Placement Notification	Initiated by the PSW after removal of children to alert the Foster Care unit
1502	Foster Care Change Notice	Initiated by the PSW to notify the Foster Care unit about a change of placement including return of child(ren) to parent
8102	CalWORKs	Utilized by PSW to request CalWORKs

	Reunification Services Request	services
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CalWORKs Eligibility Handbook	Unmarried Parents 52-10
	Effective 03-01-98

52-10 Unmarried Parents

I. Defined

An unmarried parent is a parent of a child who is not married to the child's other natural parent. The unmarried parent is responsible for the support of his child(ren), including an unborn child. The unmarried parent is not legally responsible for the support of his child's other parent, nor of children not his own.

II. Eligibility Determination

When both unmarried natural parents of a child for whom aid is requested reside together with that child, eligibility is established the same as for a child of legally married parents.

III. Common Child Eligible

When an unmarried parent is living in the home along with a child in common with an aided parent and the common child is eligible, the unmarried parent and the common child must be in the AU.

IV. Common Child Not Eligible

When an unmarried parent is living in the home along with a child in common with an aided parent and the common child is not eligible (e.g., the unmarried parent is employed full-time), the unmarried parent's income should be evaluated as an URAM. See Section 52-15.

V. Father of Unborn

A father of an unborn child in a Pregnant Woman Only (PWO) case is excluded from the AU, but his income is considered available to the AU. The eligibility of the PWO case is based on the deprivation that would exist if the child was born. (See Section 51-26.)

CalWORKs Eligibility Handbook	Unrelated Adult Male (URAM) 52-15
	Effective 03-01-98

52-15 Unrelated Adult Male (URAM)

I. Defined

An unrelated adult male (URAM) is a male who is 18 or older and not related by blood or marriage to any member of the aided family or to the unaided unborn of an aided pregnant woman, and who is not a bona fide roomer, boarder or lodger. The unrelated male may establish himself as a bona fide boarder or lodger by signing an affidavit to that effect and producing a receipt for the rent paid. In order to be a boarder or lodger, the male must have sufficient means by which to meet his own needs, including the payment of rent. If the unrelated male has no resources, then he shall be presumed to be a URAM and not a bona fide boarder or lodger. A contribution is not required from the URAM if he receives cash public assistance such as GA or SSI.

II. Required Statement

Whenever an unrelated adult male resides with a family (in which the mother is included as the needy caretaker) applying for or receiving cash aid, he shall be required to make a minimum financial contribution and to sign the URAM statement, Form CW-71, with the aided mother. The form is signed under penalty of perjury and sets forth:

- A. The actual amount of the financial payment(s) made by the unrelated adult male for his share of cost of housing, utilities, food, household operations and special needs shared by members of the household.
- B. The actual amount of his financial contribution in cash or kind for needs in the standard established for members of the Assistance Unit.
- C. The amount of the unrelated adult male's monthly earnings and other income, if known.

If the mother refuses or fails to provide the written statement, aid shall be denied or discontinued.

Exception:

If the mother is unable to comprehend, her guardian or conservator or person acting for her may make the statement, or the worker may obtain the information or evidence.

If the unrelated adult male refuses or fails to sign the statement, the case shall be referred to the Special Investigations Unit for referral to the District Attorney.

III. Required Payment by the Unrelated Adult Male

An unrelated adult male who resides with a family applying for or receiving cash aid is required to make a financial contribution to the family which is not less than it would cost him to provide himself with an independent living arrangement. The cost of an "independent living arrangement" is the sum of the in-kind value of housing, utilities, and food. Use the current Income-in-Kind values.

If the unrelated adult male has, or probably has, sufficient income, he is required to make a financial contribution to the family, which the state regulations state it would cost him to provide himself with an independent living arrangement.

A. When the unrelated adult male has sufficient income and does contribute at least , net income to the AU is determined by adding:

1. Cash given to the AU which is available to meet the needs of the AU (refer to 3. below), and
2. The value of full items of need (for example, URAM pays all of the rent) provided in-kind to the AU.
 - a. An item is not considered to be provided in-kind to the family if the family is receiving this item in exchange for providing the URAM with a different item. For example, if a URAM and aided mother agree that he will pay the rent if she pays their food and utilities, the AU is not receiving in-kind income for housing.
 - b. The value of full items of need is determined according to income-in-kind regulations.
3. Cash given to the AU which is available to meet the needs of the AU (#1 above) does not include:
 - a. Cash which is specially designated for non-need items, such as a television, for the AU, unrelated adult, a or any other person.
 - b. Cash which the URAM states is to be used to meet his own expenses, including work-related expenses and the expenses of the URAM's child(ren) or other unaided persons in the home that the URAM is supporting.
 - c. Cash which the mother and URAM have agreed constitutes the URAM's share of the cost-of-living arrangement.
 - d. Any other amounts which the URAM designates as not available to the AU.

NOTE:

The amount that the unrelated adult male must contribute to the AU cannot be less than it would cost to provide himself with an independent living arrangement; however, when computing the net contribution, only use the cash which is given to meet the needs of the AU plus the value of full items of need provided in-kind to the AU.

CalWORKs Eligibility Handbook	Strikers 52-16
	Effective 03-01-98

52-16 Strikers

Strikers (44-206)

An AU is ineligible for the entire month when a parent who lives in the home is participating in a strike on the last day of that month. When an individual other than the parent is on strike on the last day of a month, that person is ineligible for that entire month.

I. Definition

A. A Strike

1. A strike includes any concerted work stoppage by employees and any planned slowdown or other arranged interruption of operations by employees.
2. A strike also includes a stoppage which is the result of the expiration of a collective bargaining agreement.
3. A strike does not exist when:
 - a. A lockout has occurred
 - b. The action was necessitated by an imminent health and safety hazard or abnormally dangerous working conditions.

B. A Striker

A striker is an applicant or recipient who has voluntarily stopped or slowed down work or otherwise interrupted the business activities of the employer as part of a concerted activity.

A striker is also someone who has been denied UIB because he has voluntarily left work because of a trade dispute.

II. Eligibility

A. If an individual is participating in a strike on the last day of the month, ineligibility results for the entire month.

1. If the striker is a natural or adoptive parent (or a pregnant woman one-person AU), the entire AU is ineligible.
2. If the striker is a member of the AU, other than the parent, only the striker is ineligible.

B. A person or AU remains ineligible for any subsequent month(s) in which it can be estimated that the strike will continue through the last day of the month.

C. The individual or case is discontinued as soon as possible. If an individual is on strike on the last day of the month and the worker cannot anticipate that information, action will be taken to discontinue the following month. The previous month is an overpayment.

III. Rescission of Discontinuance

If aid is discontinued or denied because the county estimated that the individual would be on strike on the last day of the month, and it is determined later that the strike ended before the last day of the month, the discontinuance or denial is rescinded. If an individual was not striking on the last day of the month, he is eligible for the whole month.

IV. Additional Information

- A. If a parent who is excluded from the AU goes on strike, the AU is ineligible.
- B. A person is considered unemployed as a result of his participation in a strike only for the period that the strike is active. If a person is fired after the strike ends, that person is not unemployed as a result of a strike.

CalWORKs Eligibility Handbook	Child Support Activities- General 52-40
	Effective 11-1-18

52-40 Child Support Activities - General

NOTE: Maximum Family Grant (MFG) ended 1/1/2017. Cases with MFG children are required to cooperate with Child Support Services (CSS) starting 1/1/2017, except for aid codes K1 and 3F.

Child Support - General

As provided by state and federal law, assignment of child and spousal support rights by a parent or caretaker relative is a condition of eligibility for cash aid, *with exception* to certain Child-Only (AR/CO) cases that are exempt from the Child Support (CS) cooperation requirements. **(Retroactive June 1, 2014).**

As of 3/1/2015, long term sanctioned cases are also transferred to aid codes K1 and 3F AND are exempt from CS cooperation requirements.

In California there is a Child Support Enforcement Program established for the purpose of identifying and locating absent parents, establishing paternity, and enforcing the child support obligation. In San Francisco, this enforcement agency is the Local Child Support Agency (LCSA).

It is the LCSA's responsibility, with the assistance from the client and the county welfare department, to identify and locate the absent parent, to establish paternity of any child whose parents are not married to each other and obtain support payments from the absent parent(s).

Under state and federal law and in accordance with the plan of cooperation agreed upon between San Francisco's Department of Human Services and the LCSA, the county welfare department has several responsibilities in the area of child support. This section provides an overview of the child support procedures that are required in the CalWORKs Program.

It will be necessary at times for the LCSA investigators to contact workers concerning questions pertinent to their investigation. It is DHS policy to cooperate in these matters. It is also the LCSA's policy to cooperate with DHS staff in similar matters.

Reporting Child Support Payments

The CalWORKs Assistance Unit (AU) will be required to report the child support payments they receive in accordance with their CalWORKs and CalFresh income reporting rules. CalFresh Semi-Annual Reporting (SAR) households will be required to report child support received on their SAR 7 report, and CalWORKs Annual Reporting/Child-Only (AR/CO) AUs will be required to report child support payments received at application and during the annual redetermination.

In addition, all AUs will be required to report receipt of direct child support income any time the family's total monthly income exceeds the Income Reporting Threshold (IRT) if the AU also has earned income.

When a CalWORKs family reports receiving their child support payment directly, the eligibility worker shall determine the amount of the child support income and whether the income is expected to continue at that level. The eligibility worker, along with the family, must also determine whether the frequency and amount of income can be "reasonably anticipated" under AR/CO reporting rules (see [ACL 12-49](#), page 8 for more information regarding "reasonably anticipating income" in AR/CO cases). If the child support income can be reasonably anticipated and will continue at a level that will render the family financially ineligible (pursuant to MPP section 44-315.311), the eligibility worker must discontinue the AU at the end of the month in which timely and adequate notice can be provided.

Child Support Payments for Stepsibling/Half-sibling

Effective November 1, 2018, Senate Bill (SB) 380 allows a CalWORKs assistance unit (AU) the option to receive full child support payments for a stepsibling or half-sibling of an eligible child in the AU in lieu of cash aid for the step/half-sibling, as specified, and exempts those child support payments from consideration in determining CalWORKs eligibility or grant amounts.

Under the new rules, CalWORKs applicants and recipients can elect to exclude the needs of stepsiblings and half-siblings from consideration in the determination of the Maximum Aid Payment (MAP) for the AU in order to keep 100 percent of child support payments made on behalf of that child.

The child's needs are considered for the family Minimum Basic Standards of Adequate Care (MBSAC) but excluded from consideration in determining the AU's MAP amount.

(Please refer to Section 52-44 Child Support Payments for more specific information)

Applying for "Potentially Available Income"

All CalWORKs applicants and recipients are required to apply for income that is potentially available to them (MPP Section 82-610).

Eligibility staff must inform applicants/recipients of income that may be available to them, so they can take advantage of additional income to which they may be eligible.

Child support income is income that the applicant/recipient may or may not be entitled to receive, depending on whether paternity of the child(ren) has been established or whether there is a court order for support. However, it is not considered "unconditionally available" to the family, and therefore, if the applicant/recipient chooses not to seek child support from the noncustodial parent, *the eligibility worker cannot discontinue for failure to apply for "unconditionally available income"*.

Certain Child-Only Cases are exempt from the Child Support (CS) cooperation requirements. **(Retroactive June 1, 2014) Per ACL 15-37, long term sanctions were added as of 3/1/2015, and are included as "exempt" from the Child Support requirement.**

Clients need to be informed at intake and annual renewal about this change with Form 2215. Form CW2215 was updated per ACL 15-72 on 10/2/2015. This form is mandatory and no substitute permitted.

Discuss the advantages of having an open CSS case with each client (family will receive more income as any child support payment by the absent parent will be passed along in full to client)

1. Who is exempt from the CSS cooperation requirements?

- Safety Net (SN) cases
- Fleeing Felons (FF)
- 2-Parent Child-only cases with one parent/care taker SN/DF/FF and the other parent ineligible due to SSI or immigration status
- Long term sanctioned clients (WTW sanctioned for 12 or more months and no other adults are aided in the AU (see ACL 15-37))

These are cases with aid codes K1 or 3F

2. What is exempted?

Client does not need to do any of the following anymore:

- Assigning support rights as a condition of eligibility
- CW2.1NA and CW2.1Q are no longer required for these cases unless the case transfers from aid code K1 or 3F to another aid code
- Cooperating with the Local Child Support Agency (LCSA)
- Any sanction and penalty applied due to not assigning child support rights or for not cooperating with the LCSA will need to be lifted.
- Cases transferring back to non K1/3F aid codes re-initiate Child Support Assignment agreement and LCSA cooperation requirements. Initiate new sanction/penalty as with other cases. Transfer these cases to the appropriate CW aid code.

REFERENCES: ALL COUNTY LETTERS (ACL) : 12-49, 13-70, 14-78, 15-18, 15-18E 15-37, 15-72; ALL COUNTY INFORMATION NOTICES (ACIN): I-08-12, SENATE BILL (SB) 855, 79, MANUAL OF POLICIES AND PROCEDURES (MPP) Sec. 44-111.47, 44-315.311, 44-340.42, 82-500, 82-506.1, 82-510, 82-518.2 ad sec., CHILD SUPPORT ENFORCEMENT PROGRAM REGS., CHAPTER 82-500, WELFARE AND INSTITUTIONS CODE (W&I) 11251.3 AND 11486.5 AND FAMILY CODE SECTION 17415.

CalWORKs Eligibility Handbook	Child Support Activities - Intake 52-41
	Effective 10-01-15

52-41 Child Support Activities - Intake

The following procedures outline steps which must be taken during the cash aid.

I. Intake Worker's Responsibilities

During the intake interview, the completed forms mentioned above shall be reviewed to ensure compliance with child support requirements. See exceptions to this requirement for certain Child-Only (AR/CO) cases at the bottom of this section. The intake worker shall review the following:

- A. CW 2.1Q Child Support Questionnaire - The top portion of this form will have been completed by the screener.
- B. CW-2.1 Child Support Notice and Agreement - The lower portion of this form will indicate whether the applicant has refused to assign support rights. If a parent or needy caretaker relative has refused to assign support rights, aid is denied for that person while the remaining AU members can be approved.
- C. CW-371 Referral to the District Attorney - The completion of this form by the Local Child Support Agency verifies whether or not the applicant has cooperated with the child support process. If a parent or needy caretaker relative has not cooperated and there is no good cause, the amount of aid that can be approved will be reduced by 25%.
- D. CW-51 - If the applicant claims "Good Cause" refer to Section 58-4 for procedures which must be followed. The "Claim Detail Screen" must be completed in CalWIN.

NOTE: Since an unborn child is not mandated to be included in the AU, nor have support rights been established for the unborn child, Intake staff shall not send pregnant women or pregnant minor parents to Child Support until after the child is born.

II. Certain Child-Only Case Exempt from CSS Cooperation Requirements

NOTE: Maximum Family Grant (MFG) will end January 1, 2017 and cases with MFG children are required to cooperate with Child Support Services (CSS) starting 1/1/17, except for aid codes K1 and 3F.

1. Who is exempt from the CSS cooperation requirements?
 - Safety New (SN) cases

- Fleeing Felons (FF)
- 2-Parent child-only cases with one parent/caretaker SN/DF/FF and the other parent ineligible due to SSI or immigration status
- Long-term sanctioned clients (WTW sanctioned for 12 or more months and no other adults are aided in the AU (see ACL 15-37)

These are cases with aid code K1 or 3F.

Aid Code K1 – Unaided Single-Parent Safety Net, Fleeing Felon, Long-Term Sanction Child-Only Cases (only one parent/caretaker in the home): CalWORKs cases that include only one, unaided Safety Net, fleeing felon, or long-term sanction (sanctioned 12 consecutive months or longer for noncompliance in the WTW program) parent/caretaker, with no other parents/caretakers in the home. This code provides for continued cash aid and Medi-Cal coverage for children whose parents have been discontinued from, or are ineligible for, cash aid due to their status as a Safety Net adult, fleeing felon, or long-term sanction individual.

Aid Code 3F – Unaided Two- Parent Safety Net, Fleeing Felon, Long-Term Sanction Child-Only Cases: CalWORKs cases in which two or more unaided parents/caretakers are any combination of Safety Net, fleeing felon, or long-term sanction (sanctioned 12 consecutive months or longer for noncompliance in the WTW program) adults, and no other adults are aided in the AU. In addition, cases are also assigned to this aid code when at least one parent/caretaker is unaided due to any of the previously mentioned reasons, and the other parent(s)/caretaker(s) in the home is (are) ineligible for another reason, such as being an ineligible non-citizen or a recipient of Title XIX Social Security Income. This code provides for continued cash aid and Medi-Cal coverage for children whose parents/caretakers have been discontinued from, or are ineligible for, cash aid due to their status as a Safety Net, fleeing felon, or long-term sanction individual.

Zero-parent AUs, in which all parents in the home are excluded due to receipt of SSI benefits or status as an ineligible non-citizen, will not be assigned to aid code 3F.

(Reference: [ACL 15-37](#))

CalWORKs Eligibility Handbook	Child Support Activities- Carrying 52-42
	Effective 10-01-15

52-42 Child Support Activities - Carrying

NOTE: The Maximum Family Grant (MFG) rule has been repealed and will end January 1, 2017. Cases with MFG child(ren) are required to cooperate with Child Support Services (CSS) starting 1/1/17, except for aid codes K1 and 3F.

The following procedures outline the steps which must be taken during a reinvestigation process or when a child is being added to the AU. See exceptions to this requirement for certain Child-only cases at bottom of this section.

I. Reinvestigation

The continuing worker shall review all child support material in the case record. The case record should already contain the following:

- CW-2.1 Child Support Notice and Agreement
- CW-371 Referral to the District Attorney

The worker should familiarize himself/herself with the information on these forms to ensure that the information obtained during the reinvestigation is consistent.

The worker shall:

- Review the child support material in the case record.
- Interview the recipient concerning all absent parents.
- Make a notation of any new information or discrepancies between the absent parent information already in the case record and the statements obtained from the recipient during the interview.

Examples of new information:

- a) Absent parent's current or last known address
- b) Absent parent's current or last known employer
- c) Absent parent has been arrested and/or is incarcerated.
- d) Absent parent has changed marital status.

- e) There are new court orders regarding child support.
- f) Enter any new information or discrepancies on a CW-371, and forward to it to Child Support. If there is no new information or the discrepancies, the worker should still complete a CW-371, notating "Renewal - No New Information" in the Comments section, and forward it to Child Support.

Give the recipient the CW 2.1 Child Support Notice and Agreement to read. This explains the child support requirements, benefits, and the right to claim "Good Cause". Ideally, the recipient will check the "agreement" box and then sign and date the form. The worker must also sign and date the form. A copy shall be given to the recipient and the original filed in the case record.

II. Adding a Child to the Assistance Unit

When adding a child to the AU, the continuing worker must complete steps which parallel the Intake process. See exceptions to this requirement for certain Child-only cases at bottom of this section.

- A. Explain the contents of the CW 2.1 Notice and Agreement.
- B. Explain "Good Cause" (included in the CW 2.1 NA).
- C. Explain that aid can be discontinued to the parent/needly caretaker relative who refuses to assign support rights and that aid can be reduced by 25% if the parent/needly caretaker relative fails to cooperate with the other child support requirements.
- D. Complete a CW-371 Referral to the District Attorney and the top portion of a CW-2.1 Questionnaire and give the forms to the recipient with instructions that they must be taken to Child Support. There is a Child Support outstation on the first floor of 170 Otis, OR the client may to the main office at 617 Mission St. The recipient will be interviewed and then given back the CW-371 to return to the worker.
 - 1. A CW-371 and/or CW-2.1Q is not necessary if a parent is deceased and there is verification of it.
 - 1. When both parents are in the home but are not married to one another, paternity must still be established.
- E. CW-2.1 Child Support Notice and Agreement - If a parent or needly caretaker relative has refused to assign support rights, discontinue aid for that person when adding the child.

F. CW-371 Referral to the District Attorney - If a parent or needy caretaker relative has not cooperated with the child support process and there is no good cause, reduce the amount of aid by 25% when adding the child.

G. CW-51 - If the applicant claims "Good Cause" refer to Sec. 50-36 for procedures which must be followed.

II. Certain Child-Only Case Exempt from CSS Cooperation Requirements

1. Who is exempt from the CSS cooperation requirements?

- Safety New (SN) cases
- Fleeing Felons (FF)
- 2-Parent child-only cases with one parent/caretaker SN/DF/FF and the other parent ineligible due to SSI or immigration status
- Long-term sanctioned clients (WTW sanctioned for 12 or more months and no other adults are aided in the AU (see ACL 15-37)

These are cases with aid code K1 or 3F.

Aid Code K1 – Unaided Single-Parent Safety Net, Fleeing Felon, Long-Term Sanction Child-Only Cases (only one parent/caretaker in the home): CalWORKs cases that include only one, unaided Safety Net, fleeing felon, or long-term sanction (sanctioned 12 consecutive months or longer for noncompliance in the WTW program) parent/caretaker, with no other parents/caretakers in the home. This code provides for continued cash aid and Medi-Cal coverage for children whose parents have been discontinued from, or are ineligible for, cash aid due to their status as a Safety Net adult, fleeing felon, or long-term sanction individual.

Aid Code 3F – Unaided Two- Parent Safety Net, Fleeing Felon, Long-Term Sanction Child-Only Cases: CalWORKs cases in which two or more unaided parents/caretakers are any combination of Safety Net, fleeing felon, or long-term sanction (sanctioned 12 consecutive months or longer for noncompliance in the WTW program) adults, and no other adults are aided in the AU. In addition, cases are also assigned to this aid code when at least one parent/caretaker is unaided due to any of the previously mentioned reasons, and the other parent(s)/caretaker(s) in the home is (are) ineligible for another reason, such as being an ineligible non-citizen or a recipient of Title XIX Social Security Income. This code provides for continued cash aid and Medi-Cal coverage for children whose parents/caretakers have been discontinued from, or are ineligible for, cash aid due to their status as a Safety Net, fleeing felon, or long-term sanction individual.

Zero-parent AUs, in which all parents in the home are excluded due to receipt of SSI benefits or status as an ineligible non-citizen, will not be assigned to aid code 3F.

(Reference: [ACL 15-37](#))

CalWORKs Eligibility Handbook	Child Support Activities - Good Cause/DV 52-43
	Effective 9-21-18

52-43 Child Support Activities - Good Cause/DV

NOTE: Maximum Family Grant (MFG) ended January 1, 2017 and cases with MFG children are required to cooperate with Child Support Services (CSS) effective 1/1/17, except for aid codes K1 and 3F.

Domestic violence policy provides good cause to not cooperate with child support requirements.

Prior to referral of an individual/cases to the Local Child Support Agency, determine if the applicant/recipient has good cause for non-cooperation for any reason, including reasons related to domestic violence/abuse.

I. Good cause reasons for child support non-cooperation shall be found if:

1. Cooperation would increase the risk of physical, sexual, or emotional harm to the child/children;
2. Cooperation would increase the risk of domestic abuse to the parent or caretaker, defined in Section 50-32;
3. The child/children was conceived as a result of incest or rape. A conviction of incest or rape is not necessary (Note: MFG rules may apply);
4. Legal proceedings for adoption of the child/children are pending;
5. The applicant or recipient is currently being assisted by an adoption agency to resolve whether to keep the child or relinquish the child for adoption;
6. The applicant/recipient is cooperating in good faith but is unable to identify or assist in locating the absent parent;

7. Any other credible reason cooperating would be contrary to the best interests of the child/children.

II. Written and verbal notice of the child support good cause exception process

A. When to give the child support notice

Written and verbal notice shall be given at application and reinvestigation and upon addition of a child/newborn to the case.

III. Child support good cause process

A. *Notice and Agreement for Child, Spousal, and Medical Support* (CW 2.1)

The *Notice and Agreement for Child, Spousal, and Medical Support* (CW 2.1) includes information on how to claim good cause, and explanation of the process of paternity establishment and child support enforcement, and a discussion of the benefits, risks, and consequences of cooperation.

B. *Child Support - Good Cause Claim for Non-Cooperation* (CW 51)

- If the applicant or recipient claims good cause to not cooperate when completing the *Notice and Agreement for Child, Spousal, and Medical Support* (CW 2.1), he or she is given the *Child Support - Good Cause Claim for Non-Cooperation* (CW 51) form. If any of the reasons are checked, he or she may be eligible for a waiver.

- If a client claims DV and completes Form CW 51, *Child Support Good Cause Claim For Non-Cooperation*, workers will enter "Unknown" in the Non-Custodial Parent box on the CW 51 Form and on the Collect Absent Parent Detail Window, click "Unknown to the CalWIN Case" button and enter "Unknown" in the box for First and Last Name. Enter your case comments on your entries/actions.

NOTE: If the NCP is known to CalWIN (may have been previously in the AU), click "Unknown to the CalWIN Case" button and enter "Unknown" in the box for First and Last Name (example shown in high-lighted screenshot.) Enter your case comments on your entries/actions. When submitting the packet (CW 51, NOA, CalWIN screenshot-Claims Detail Window) to your Supervisor, also include the CalWIN screenshot of the Collect Absent Parent Detail Window showing "Unknown."

C. Documentation of good cause.

1. Sworn Statement

The *Sworn Statement of Abuse and Request for CalWORKs Waiver* (Form 4127) is the only evidence needed to document domestic violence. See Section 50-36.2, "Evidence of Abuse and Standards of Proof".

The DV Advocate may be of help in completing the Sworn Statement.

2. Referral to DV Advocate

If any reason related to domestic violence is checked, make a referral to the DV Advocate who will:

Assist the applicant with completing a *Sworn Statement of Abuse and Request for CalWORKs Waiver* (Form 4127), as needed

and/or

Offer services to alleviate the situation.

3. Other evidence

Other "Evidence Provided" as listed on the CW 51 is also acceptable for documentation, including:

- Medical records
- Court documents
- Social agency letter
- Mental health professional letter

D. Examples of situations in which Domestic Violence Waivers are warranted for CalWORKs eligibility (Handbook 50-36)

1. Waivers of requirements to disclose information, such as paternity, where the applicant or recipient is afraid such disclosure will increase the danger of abuse to the applicant or recipient or that individual's dependents;

IV. Notice of action for denial

If the applicant/recipient's good cause claim is denied, inform him/her in writing of the denial, the reason for the denial, and rights to appeal through the standard grievance and state hearing process, using the *Good Cause Claim and Determination Transmittal* (Form CW 51).

V. Confidentiality

Ensure that individuals are notified of program participation requirements in a manner that preserves confidentiality and safety. The Local Child Support Agency operates under strict confidentiality rules as well. See Section 50-38, Confidentiality, or WTW Handbook 75-3.

VI. Cross References

A. Other sections of this Handbook

50-30 through 39

B. WTW Handbook

Section 71-6

Section 73-17

CalWORKs Eligibility Handbook	Child Support Payments 52-44
	Effective 11-1-18

52-44 Child Support Payments

NOTE: The MFG rule has been repealed and ended 1/1/17. Cases with MFG children are required to cooperate with Child Support Services, except for AU's designated aid codes K1 and 3F.

Child Support Payments

There are four kinds of child support payments that a client might receive. Each are treated differently. Also, included below is how to handle non-receipt of any payment issued by Child Support.

I. Direct Payments

Sometimes, when a client applies for cash aid, he/she may be receiving child support payments directly from an absent parent. Or, a client in an ongoing case may start receiving payments directly from an absent parent. Child Support must be notified of the direct payment situation on the CW-371.

A. In order to be eligible for cash aid, the client agrees to assign legal rights to any child support to the Local Child Support Agency and to cooperate with the child support enforcement process, which includes turning over any child support that might be received directly. Eventually, arrangements can be made so that the absent parent's payments are paid to Child Support, but, until those arrangements are in place, the client must cease retaining any direct payments and turn them over to Child Support.

B. Any direct payments that are retained by the client, in the same months that cash aid is issued, must be budgeted as income for cash aid, minus the first \$50 as an income disregard.

C. If a client continues to retain the direct payments, without turning them over to Child Support, for two consecutive months, it is considered "non-cooperation with the child support enforcement, and a penalty should be imposed.

II. Disregard Payments from Child Support

Since the first \$50 of current child support paid for an AU is disregarded and exempt as income (see Section 53-2 Excluded or Exempt Income), when Child Support collects the child support on behalf of the AU, it issues a payment for the disregarded amount to the AU in the month following the month of collection.

III. Regular Pass-ons from Child Support

A "Pass-on" is issued when the total child support collected by Child Support for a month, minus the disregard, exceeds the total cash aid paid for the same month. A payment is produced in order to "pass-on" the excess to the client. This is done in the same computer process which creates the disregard payment described in Part II above.

A. Unlike Disregards, these Pass-ons are NOT exempt as income for cash aid. They should be budgeted retrospectively.

B. Like Disregards, Pass-ons are not exempt as income for Food Stamps.

C. Whenever a Pass-on is issued, the case must be reviewed to determine if there is continuing eligibility. The recipient income test should include the child support that is being collected monthly. A Pass-on could mean that for only one month there was excess income, but if it is anticipated that the situation will continue, then the case should be discontinued. If a Pass-on is issued for two months or more, it is a good indication that income eligibility has been lost. If the discontinuance is due to receipt of the child support collection itself, the client is eligible for special Post-active Medi-Cal Type 54.

IV. MFG Pass-ons from Child Support (See above highlighted information regarding MFG Repeal)

Another type of Pass-on is for child support which is collected by Child Support for a child subject to the Maximum Family Grant (MFG) rule. Any child support for MFG children including these Pass-ons are exempt as income when determining eligibility for cash aid and computing the grant. However, they are countable under Food Stamp regulations. Note that the child support itself must have been collected during a month in which the AU received FS.

V. Child Support Payments for Stepsibling or Half-sibling

Under new rules established by Senate Bill (SB) 380 (effective 11/1/2018,) CalWORKs applicants and/or recipients have the option to exclude the needs of stepsiblings and half-siblings from consideration in the determination of the Maximum Aid Payment (MAP) for the AU in order to keep 100 percent of child support payments made on behalf of that child.

For the purpose of this rule, “stepsibling” or “half-sibling” means a child who meets all of the following conditions:

- He or she lives with at least one eligible child;
- He or she is a child for whom child support payments are received.

- The monthly child support payment received for that child is greater than the cash aid amount that child would receive; and
- The parent/caretaker relative has requested in writing that the child not be included in the number of needy persons used to calculate the MAP.
- The child's needs (not income and resources) are considered for the Minimum Basic Standards of Adequate Care (MBSAC) but excluded from consideration when determining the AU's MAP amount.

The child remains eligible for other programs and services (i.e., CalFresh, Medi-Cal, Child Care, Special Needs, Temporary Shelter Assistance, etc.), as long as all other eligibility conditions are met.

Additionally:

- a. Any parent/caretaker relative who opts to exclude a step/half-sibling from the AU's MAP for purposes of receiving child support would continue to receive cash aid for all other eligible members in the AU.
- b. Any child support payments received on behalf of the step/half-sibling after their needs have been excluded from consideration (when determining the AU's MAP) shall not be treated as income when determining CalWORKs eligibility or grant amounts.

Choosing Option Not to Exclude

Applicants and recipients who do not opt to exclude step/half-siblings from the AU's MAP would continue to receive the cash aid for the step/half-siblings and up to a \$50 pass-through payment. Child support payments would be assigned to the county according to current policy.

The income of the step/half-sibling of the eligible child would continue to be considered available and included in the number of needy persons used to calculate the AU's MAP. Aid codes K1/3F families are eligible to exclude a step/half-sibling from the AU's MAP determination under the new rules.

Mid-Period Reporting

If the step/half-sibling is not excluded from the MAP determination at application, the designation of whether or not a child is a step/half-sibling shall only be reevaluated during annual redetermination and/or the processing of the semi-annual report, **except** when the parent or caretaker relative voluntarily reports mid-period that the child support payment or payments have decreased or ended.

The request for re-evaluation of the designation must come from the parent/caretaker relative by written statement or oral/verbal request.

Step/half-siblings whose needs are excluded from the MAP determination are considered part of the AU and remain otherwise eligible for CalWORKs services.

If the parent/caretaker relative requests to add a previously excluded step/half-sibling's needs back into the MAP determination mid-period due to a loss or decrease of child support income, the step/half-sibling's needs must be considered in determining the AU's MAP, and the AU's grant must be increased within 10 days after verification of the change in income is received.

If a request is made to have a step/half-sibling's needs determined mid-period, the EW must receive all required documents for verification to be able to meet the 10-day timeframe.

Required documents are:

- Birth certificate
- Social Security card or similar verification from SSA
- Medical immunization records
- Any additional documents providing verification

EWs should not delay or deny CalWORKs cash aid for the AU while gathering verification for eligible children.

EWs should use current verification gathering timeframes for new CalWORKs applicants requesting to have the step/half-sibling's needs excluded from the MAP determination. Current recipients should have verifications already on file for their aided children.

Income and Resources of Eligible Child

Income and resources of children whose needs are excluded from the MAP determination shall not be considered for the purposes of determining CalWORKs eligibility and the grant amount for the remaining AU members.

Children Turning 18 Years Old

When a child whose needs are excluded from determining the AU's MAP turns 18 years of age, and is either not attending school or not expected to graduate before his or her 19th birthday and is being discontinued from the CalWORKs case due to age limits for eligible children, any child support arrearages received by the parent/caretaker relative on behalf of that child are considered unearned income to the AU.

The 18-year-old is considered an adult for the purposes of CalWORKs eligibility and the child support arrearages are paid to the parent/caretaker relative.

If the 18-year-old is enrolled in school and expected to graduate by his or her 19th birthday, he or she must continue to be considered a child for the purposes of CalWORKs until he or she graduates or reaches his or her 19th birthday, whichever comes first and the 18-year-old's income would not count as long as she/he remains a CalWORKs child.

Social Security Disability Insurance Payments

Example 1: A step/half-sibling is receiving SSA Disability from the aided custodial parent and is also receiving child support from the absent parent.

- a. If the step/half-sibling is receiving child support that exceeds the CalWORKs grant amount, and if the parent/caretaker relative requests it in writing, the step/half-sibling's needs shall not be considered in the MAP and 100% of the child support payments shall be passed through to the parent/caretaker relative in the AU.
 1. When a child's needs are excluded from the MAP determination, his or her income is also excluded. Any income of the child is considered to be intended for the care and support of that child and not for the use of other members of the family.

Example 2: The step/half-sibling is receiving SSA Disability due to the absent parent's disability, which is credited as child support by Child Support Services (CSS).

- a. The SSA Disability received from the non-custodial parent (NCP) is passed on to the family and is treated by CSS as child support, the SSA Disability received from the NCP would also be treated as child support for the purposes of the total amount of child support received.
 - 1. If the step/half-sibling receives both SSA Disability and child support, both sources would count towards the total child support amount received. If these payments, either separately or combined, exceed the CalWORKs grant amount for the child, the child would also be eligible to participate.

Mandatory Inclusion Rules

Once a parent/caretaker relative has chosen to exclude a child’s needs when determining the AU’s MAP amount, mandatory inclusion rules no longer apply to that child and the child’s needs can only be added back to the AU’s MAP determination at the following times:

- a. When Semi-Annual Report (SAR 7) is due;
- b. When AU’s Annual Redetermination is due or;
- c. When the parent or caretaker relative voluntarily reports mid-period that the child support payment or payments have decreased or ended, and the parent/caretaker relative requests the child’s needs be reconsidered in determining the MAP.

The request to add the excluded child’s needs back to the MAP determination may be made on the SAR 7, the SAWS 2 Plus, AR 3, SAR 3, a written statement or orally/verbally by the parent/caretaker relative.

CalWORKs Eligibility Handbook	Non-Cooperation 52-45
	Effective 03-01-98

52-45 Non-Cooperation

I. Definition of Non-cooperation

Non-cooperation means the applicant/recipient has not complied with the child support requirements. There are two categories of possible non-cooperation:

1. Refusal to assign support rights.
2. Failure to cooperate with the Child Support in establishing paternity and establishing/modifying/enforcing a child support order (i.e., "the child support enforcement process") for a child for whom aid is requested.

II. Refusal to Assign Support Rights

At the time of Intake or when a child is being added, an applicant/recipient may refuse to assign support rights on the CW-2.1 Child Support Notice and Agreement form, which is given to the applicant/recipient to read and sign. "I refuse to assign support rights" is a statement which may be selected by the applicant/recipient before signing.

- A. If the applicant/recipient is an otherwise eligible parent or is a needy and eligible non-parent caretaker relative, the penalty is to NOT include the person in the AU.
- B. For an application that is being approved, this means that the person is not made active for cash aid, while others in the AU are.
- C. If the applicant/recipient is a non-needy non-parent caretaker relative, an ineligible parent, or a parent that is already being excluded from the AU for some other reason, this penalty cannot be imposed.
- D. Note that, if the applicant/recipient is receiving child support payments directly from the absent parent and refuses to turn them over to Child Support, this is considered "non-cooperation with the child support enforcement process" and not "refusal to assign support rights."
- E. If the family is getting Food Stamps, the person should be made/kept active for FS, but you must add the reduced amount back into the FS computation. FS benefits should not increase when a cash aid is reduced due to a sanction or penalty.

III. Non-cooperation with the Child Support Enforcement Process

A non-cooperation situation with the child support enforcement process can happen during an Intake or the adding of a child to the AU, when a client is referred to Child Support to be interviewed about an absent parent. It can also happen, though, at any time during the life of a case, because of the ongoing activities by Child Support in establishing paternity or in establishing, modifying, or enforcing a child support order.

A. The following non-cooperation situations can occur:

- 1) The client claims good cause on the CW-2.1 Notice and Agreement for refusing to cooperate with the child support enforcement process, but a

determination is made that the good cause claim is not valid, and the client still refuses to go to Child Support.

- 2) The client does not return a CW-371 after having been referred to Child Support and given sufficient time to complete the process.
- 3) The client goes to Child Support as a result of a referral, but the CW-371 which is returned indicates non-cooperation.
- 4) The client is receiving child support payments directly from the absent parent, while getting cash aid at the same time, but refuses to turn the payments over to Child Support, and this continues for two months or more. Note that the direct child support should be budgeted as income for cash aid, minus the \$50 disregard. For Food Stamps it is counted in full.
- 5) Child Support sends a CW-371 indicating that a non-cooperation situation is occurring with some aspect of the ongoing child support enforcement process.

B. Be alert to a good cause situation.

Aside from the situation described in Item A.1 above, a client can claim good cause at any other time during the process. So, even though the client may have already signed the CW-2.1 Notice and Agreement indicating full cooperation, the worker should be alert to any subsequent verbal claims of good cause, which might be reported by Child Support on the CW-371 or mentioned by the client during a discussion about the non-cooperation situation. If there is an indication, the good cause determination procedure should be followed.

C. Reduce the grant by 25%

If a parent, whether in the AU or not, or a needy (in the AU) non-parent caretaker relative fails to cooperate with Child Support in the child support enforcement process, without good cause, the grant is reduced by 25%.

1. If the family gets Food Stamps, add the reduced amount back into the FS computation, since FS benefits should not increase when a grant is reduced due to a sanction or a penalty.

IV. "Double penalty"

It is possible for a case to have a "double penalty."

- A. If the parent or needy caretaker relative refuses to assign support rights AND fails/refuses to cooperate in the child support enforcement process, the person would be deleted and the grant would be reduced by 25%.
- B. If there are two parents and/or needy caretaker relatives (senior parent/minor parent or an unmarried couple) who fail/refuse to cooperate in the child support process, a double 25% penalty can be imposed.

V. Lifting the Sanction/Penalty

There are different ways in which compliance is established and different ways in which case actions are taken in order for the sanctions or penalties to be lifted.

A. Refusal to Assign Support Rights

- 1. Compliance with assignment of support rights is established by the client signing a new CW-2.1 Notice and Agreement without the "...refuse to assign support rights..." option checked.
- 2. For a case that was already active and the sanction was due to start in the following month, but the client complies prior to the effective date, the case action may be rescinded.
- 3. For a case where the sanction is already in effect (after approval of new case with the sanction, or after the effective date of a sanction on a continuing case), the person is added back on the case effective the date of compliance.

B. Failure/Refusal to Cooperate with the Child Support process

- 1. If it was initiated by the CW-371:

Compliance with the child support enforcement process is established by a new CW-371 which indicates that the client is now cooperating. Child Support can send a copy of a CW-371 through interoffice mail, but the most expedient method is to have the client return it to the worker.

- 2. If it was due to direct child support:

Compliance with turning over direct child support payments is established by a receipt from Child Support showing that the client turned in at least one payment, or a CA-371 indicating that the client has cooperated in arranging to have the payments sent directly to Child Support.

3. Effective Dates/Case Actions

- a. For a case that was already active and the 25% penalty was to start in the following month, but the client complies prior to the effective date, the case action may be rescinded.

b. For a case where the 25% is already in effect, the 25% penalty is removed effective the first of the month which compliance occurs; no proration is necessary. Note that, if compliance occurs during the first month of the penalty, it essentially becomes a rescission.

CalWORKs Eligibility Handbook	Child Support Interface/Good Cause 52-46
	Effective 9-4-18

52-46 Child Support Interface/Good Cause

NOTE: Maximum Family Grant (MFG) ended January 1, 2017 and cases with MFG children are required to cooperate with Child Support Services (CSS) effective 1/1/17, except for aid codes K1 and 3F.

The San Francisco Department of Child Support communicates with CalWIN through an interface.

This interface is designed to partially automate the child support referral process.

CalWORKs staff will enter the current absent parent information into CalWIN. Within three days after a case has been approved in Intake, the interface will transfer the absent parent information to Child Support. Child Support will send the client an appointment letter. Inform the client that the appointment letter will be coming and remind them to take the letter with them to the Child Support appointment.

Child Support staffs are out-stationed at 170 Otis and are available to answer general inquiries but they will not open a child support case at this location.

Carrying EWs are responsible for following up with the case once it leaves Intake.

Acceptable Reasons for Missing Appointments – Temporarily not cooperating

Upon receipt of a non-cooperation alert via the interface, the EW takes the following actions:

- Contact Child Support to verify the validity of the non-cooperation, and the reason for the non-cooperation alert. The client may have refused to cooperate with Child Support at the appointment or missed the appointment altogether. Do not act on the alert alone without verification.

- Contact the client to determine the reason for non-cooperation. The client may have missed the appointment due to illness, a sick child, or simply forgotten. Noncooperation may also be due to DV related issues. Contact Child Support and ask them to send a new appointment letter.
- If the reason for non-cooperation is other than a DV issue, inform the client that he/she must comply at the second appointment. Narrate in case comments that the client has been rescheduled due to temporary good cause. Make no entries in CalWIN for Good Cause in these cases.
- If the client does not comply after 21 days, and there is no Good Cause, initiate the penalty in CalWIN. Make sure that the Notice of Action is mailed.

Good Cause for DV related reasons:

If Good Cause is granted due to reasons related to DV, it is imperative that a case not be opened by Child Support as this could result in harm to the custodial parent or the child/children.

CalWIN Entries:

- On the Collect Absent Parent Detail Window, click the Absent Parent Information and on the "Court Order Details" tab, enter "N" in the 'Family Support' field.
- On the next tab "Claims Details" complete all fields, including that Effective Begin Date, Claim Date and Final Determination Date match the clients request date on form CW 51 and Enter "Y" in the "Good Cause" field below the Final Determination Date.
- After granting Good Cause, submit the original CW 51, approval NOA 7058 A, and "Claim Details" screenshot to unit supervisor.

If the client withdraws the DV waiver request:

- End date it on the Claims Detail tab, enter the date of withdrawal, and enter "N" on Final Determination field.
- On the Court Order Details tab enter a "Y" in the 'Family Support' field.

If there is no Good Cause, but the worker enters an erroneous Effective Begin Date for Good Cause:

- End date it for the same date.

If the client refuses to disclose information including name of NCP during good cause determination that could result in harm to the custodial parent or the child/children:

- Enter "unknown" under NCP name on form CW 51 and on the Collect Absent Parent Detail Window

CalWIN

As CalWIN is no longer creating the non-compliance record automatically in the individual compliance window, each time CalWIN receives a cooperation status that is different from what is currently applied to the case, an alert will be generated to the worker. CalWIN will continue to create alerts as long as the cooperation status is out of synch and could thus create multiple alerts.

CalWIN will **not** automatically create a non-compliance record or a sanction/penalty record if a non-cooperation transaction is sent to CalWIN from Child Support. The worker will need to apply the proper action to the CalWIN database as they determine it. The worker will need to review, verify, and evaluate eligibility including imposing or lifting sanctions/penalties as information is received from Child Support.

CalWORKs Eligibility Handbook	Paternity at Issue 52-47
	Effective 1-1-17

52-47 Paternity at Issue

NOTE: The Maximum Family Grant (MFG) rule has been repealed and will end January 1, 2017. Cases with MFG child(ren) are required to cooperate with Child Support Services (CSS) starting 1/1/17, except for aid codes K1 and 3F.

An "unmarried parent" is a parent in the home of a child who is not married to the child's other natural parent who is also in the home. All unmarried parents must cooperate in establishing paternity as a condition of eligibility for cash aid. Referral to Family Service Bureau is required when an application is made for cash aid for a child and both parents are in the home and are unmarried minors or are unmarried adults but paternity has not already been established by a court order or a signed CS-909 Declaration of Paternity.

A referral must still also be made to establish eligibility in a Pregnant Woman Only (PWO) case, since paternity cannot be declared before a baby is born.

I. CS-909 Declaration of Paternity

The CS-909 Declaration of Paternity is part of the "Paternity Opportunity Program (POP)" which started in January 1997. The form is now a requirement for having an unmarried father's name appear on the birth record, so it is now offered as part of the routine paperwork at the hospital after the birth of a baby. After 60 days, a CS-909 filed with the State Office of Vital Records (OVR) has the same authority as a court order.

II. Procedure for Referral to Child Support

A referral to Child Support should be made to establish paternity in cases with unmarried parents when:

- There is not already a court order or a signed CS-909.
- At least one of the parents is an unemancipated minor.
- There is conflicting evidence regarding paternity.

Follow the procedure below to refer the parents to Child Support:

- A. During initial applications and when adding a child, the unmarried couple should be referred to Child Support for an interview, using the CW-371 and the CW 2.1 Questionnaire.
- B. The top part of the CW 2.1 Q must have the case name, case number and the application date entered on it. Above the case name, across the top of the form, write "PATERNITY AT ISSUE".
- C. If there is conflicting evidence regarding paternity or if the parents are minors, notate that information on the CW-371 as well.
- D. If there are several children and the case involves both Paternity at Issue and Continued Absence situations, one CW 2.1Q is given to the couple for the Paternity at Issue and one CW 2.1Q for each absent parent.
- E. If the couple applying for assistance state they are married but cannot produce a marriage certificate, or verification of marriage has not been

received, they are not referred to Child Support at that time. The intake worker will send for the marriage certificate.

- F. When the marriage certificate or verification or marriage has not been received, then the procedure, starting with Part I above, should be followed. If the couple is referred to Child Support, indicate on the CW-371 that attempts to verify the marriage have not succeeded and that paternity needs to be established. This procedure should also be followed when the responding agency reports that no record of the marriage was found.

III. Paternity at Issue Non-cooperation

If the parents are referred to FSB for establishment of paternity and then refuse or fail to cooperate (do not return the CA-371, return a CA-371 indicating non-cooperation, etc.), the non-cooperation penalty must be imposed. Note that a "double penalty" can be imposed: 25% for each parent, for a total reduction of 50%.

53 - Income and Budgeting

CalWORKs Eligibility Handbook	Income - General 53-1
	Effective 10-1-19

53-1 Income - General

Income - General (EAS 44-101)

The amount of cash aid to which a family or child is eligible depends on the amount of net income available for their support in relation to need. Current income is all the income available to a client during a given period. Payments may be considered property, income, or combination of both, depending on the sources from which they are received and the period over which they are accrued.

Income is any benefit in cash or in-kind which is, in fact, currently available to the AU during the budget period.

I. Worker responsibilities

The worker and client together review the family's circumstances to determine what income is actually received by the children, parents, or other members of the AU.

Verification is obtained and evaluated. The worker has responsibility to record all income, regardless of the amount, and to record changes in income received by any member of the AU. The worker is responsible for the following:

- A. Determining if the income must be considered when computing the grant or should be considered exempt.
- B. Applying the regulations relating to current and lump sum income when determining when and how income is to be considered in computing the grant.
- C. Computing deductions to arrive at the amount of net income.
- D. Encouraging the production of income within the client's capabilities.

Resources that might produce income include:

- 1. Social insurance such as OASDI, Railroad Retirement, Unemployment Insurance, Disability Insurance.
- 2. Benefits available to veterans and members of military service, their spouses, and their dependents.
- 3. Rights and interests in real or personal property.
- 4. Responsible relatives who may be contributing or have a legal responsibility to contribute.
- 5. Other persons who may be contributing.
- 6. Recipient's own capacity for self-help and employment.
- 7. Private pension plans, union welfare funds, life insurance disability benefits, and other forms of assistance.

NOTE: All applicants and recipients must apply for and accept UIB, if eligible. See section 53-3, Potential Income.

II. Applicant and Recipient Responsibilities

Applicants and recipients have the following responsibilities:

- A. Give all information necessary for income determination. Income must be reported on the Quarterly Report, the QR 7, and submitted in a timely fashion.

B. Take all actions necessary to obtain unconditionally available income. See section 53-3; Potential Income.

III. Availability of Income (44-102)

Income is considered unconditionally available if the applicant or recipient has only to claim or accept the income, e.g. a relative's offer of a contribution, or OASDI. See section 53-3, Potential Income.

For purposes of budgeting, availability of income depends on the date it is received and the number of months the income is intended to cover. In some situations, it is necessary to apportion income to future months, i.e. interest income. In such cases, the income is considered current income in the month to which it is apportioned. A school teacher, under the annual contract of employment, is an example.

IV. Child Support

Child support which is paid directly to the recipient by the absent parent and not forwarded to the county, or which is collected by the county and paid to the recipient, is considered available when received by the client.

V. Refunds of Income Taxes and Retirement Contributions

Refunds of income taxes are not to be considered as income, but rather as liquid resources available to the applicant/recipient and must be counted toward the property limit. (EAS 42-211.21)

Lump-sum refunds of the employer's share of retirement contributions are considered net non-exempt income and the earned income disregard is not applied. (The interest earned on accumulated retirement contributions is treated as income in the month received). (EAS 44-113.8)

The following sections deal with various types of income available to the AU and how such income must be treated in determining the needs of the family.

VI. CalFresh Maximum Allotment and Standard Deductions

The CalFresh Maximum Allotment for FFY 2019 - 2020 are listed on the chart below:

FFY 2019 - 2020 Maximum Allotment by Household Size	+ Each
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1	2	3	4	5	6	7	8	additional person
\$194	\$355	\$509	\$646	\$768	\$921	\$1018	\$1164	\$146

The standard deduction is revised as shown below.

Standard Deductions for FFY 2019 - 2020:

Household Size	Standard Deduction
1 to 3 persons	\$167
4 persons	\$178
5 persons	\$209
6 or more persons	\$240

Additionally, the maximum excess shelter deduction has increased from \$552.00 to \$569.00 and;

- the homeless shelter allowance of \$143.00 increased to \$152.06.
- the Standard Utility Allowance (SUA) of \$415.00 increased to \$432.00.
- the Limited Utility Allowance (LUA) of \$130.00 slightly increased to \$135.00.
- the Telephone Utility Allowance (TUA) of \$18 remains the same.

For more information, please refer to [ACIN I-54-19, COLA EFFECTIVE, OCTOBER 1, 2019](#)

CalWORKs Eligibility Handbook	Excluded or Exempt Income 53-2
	Effective 1-1-17

53-2 Excluded or Exempt Income

Excluded or Exempt Income (EAS 44-111)

Federal and state laws exclude or exempt benefits in whole or in part from consideration as income. Benefits which are currently exempt are listed below.

I. Exemption of Earned Income

See Section 53-4 for information about earned income disregards and exemptions, which include the student exemption, the Independent Living Program, and the College Work Study Program.

II. Exemptions of Payments from Public Sources

A. Federal Payments to Indians

1. Any funds distributed per capita or held in trust for members of any Native American tribe under Public Law (PL) 92-254 or PL 94-540 are exempt income.
2. Funds of Native American tribes, including interest from and investment income derived from such funds, are exempt as income when the funds have been distributed on a per capita basis, or held in trust, by the Secretary of the Interior.
3. Income of individual Indians derived from individually owned interests in trust or restricted lands are exempt up to \$2000 in any 12 consecutive month period.
4. Distributions from a Native Corporation, established pursuant to the Alaskan Native Claims Settlement Act (ANCSA), to a Native household, individual Native, or descendent of a Native are exempt as income, including cash and cash dividends on stock up to \$2000 per person per annum, as well as stock, partnership interest, land or interest in land, and interest in a settlement trust.

B. A relocation assistance benefit paid by a public agency to a public assistance recipient who has been relocated as a result of a program of area development,

urban renewal, freeway construction, or any other public development involving demolition or condemnation of existing housing, is exempt as income.

C. Payments received by victims of Nazi persecution are exempt.

D. Compensation received by recipients 60 years old or older for volunteer services performed under the Retired Senior Volunteer Program, the Foster Grandparent Program or the Older Americans Community Service Program of the National Older American Act, is exempt.

E. Payments to children of Vietnam veterans who are born with spina bifida are exempt.

F. Advance payments or reimbursements made by GAIN or CalWORKs WTW for supportive services are exempt.

G. Payments made under the Domestic Volunteer Services Act of 1973 to welfare recipients who are Vista volunteers are exempt.

H. The value of supplemental food assistance received under the Child Nutrition Act (WIC) and the National School Lunch Act (PL 92-433 and 93-150) is exempt.

I. Payments for supportive services or reimbursement of out-of-pocket expenses made to persons serving in the Service Corps of Retired Executives (SCORE) and the Active Corps of Executives (ACE) pursuant to Section 418 of PL93-113 are exempt.

J. Payments made for out-of-pocket expenses of persons serving on an advisory group(s) set up by SDSS and/or the Health and Welfare agency are exempt.

K. The following payments or funds received from the California Franchise Tax Board are exempt. They are considered personal property resources rather than income; however, all three categories are exempt from consideration as property if they are not commingled with other money and can be separately identified.

1. Renters Credits
2. Senior Citizen Homeowners and Renters Property Tax Assistance Program (applies to persons who are disabled, blind, or 62 years of age or older).
3. Senior Citizens Property Tax Postponement Program (applies to persons 62 years of age or older).

L. Special tax rebates, credits, or similar tax relief measures are specifically exempt. The State advises counties of the exempt statuses as they occur.

M. Payments received under the California Victims of Crimes Program are exempt.

N. The allowance for training expenses paid to recipients participating in Department of Rehabilitation training programs are exempt.

O. Fuel and Utility Payments

Payments received under the Energy Crisis Assistance Program or the Low-Income Home Energy Assistance Program (LIHEAP) are exempt. LIHEAP is a federally funded program designed to provide financial aid amounts to meet costs of home energy. LIHEAP, which is administered by the Office of Economic Opportunity, provides for the following:

1. Home Energy Assistance (HEAP)

The state can make direct payments to eligible households for fuel and utility bills up to \$400 per year per household.

2. Energy Crisis Intervention

Assistance can be provided to households experiencing a life-threatening or health-related emergency because of weather-related and supply-shortage energy crises. Payments may not exceed a total of \$200 per year for any eligible household.

3. Weatherization

The maximum per housing unit weatherized will be limited to \$1,000. LIHEAP payments are made directly to the eligible household. These payments are exempt from consideration as income and as property.

P. Payments received as restitution made to U.S. citizens and permanent residents of Japanese ancestry and to Aleuts, as a result of being relocated during WWII, are exempt.

Q. Payments provided under major disaster assistance programs are exempt.

R. Payments made for Agent Orange settlements are exempt.

S. Payments made under the Radiation Exposure Compensation Act are exempt.

T. Earned Income Tax Credit payments are exempt. Be sure not to include "advance EITC" payments as earned income. The amount of a client's paycheck which is advance EITC should be specified on the pay stub.

U. Payments made under the Filipino Veterans Equity Compensation Fund are exempt.

V. WtW work-study income

W. **CJP 1, CJP Work Study, and VIP Subsidized Employment**

CJP 1 is expected to last no more than 30 days and therefore is treated as exempt income for both CW and CF.

CJP Work Study /VIP subsidized employment income with an educational component from City College of San Francisco. This is noted with a coded designation, "4 CJP-WS", or "3 VIP" on the check stub or wage information sheet. This income is treated as exempt for CW, but is budgeted for CF following SAR rules. This income does not meet the Work Study Title IV rules needed to be exempt for CF.

Work Study Title IV employment income is exempt from both CW and CF. This income is noted with a coded designation, "3591" on the check stub or wage information sheet.

Examples: [CJP Work Study Check Stub 1](#) [CJP Work Study Wage Information 2](#)

NOTE: Work study earnings are **only** exempt for the purpose of determining CalFRESH benefits if the income meets Title IV Work Study rules. (See CalFRESH Handbook, Section 19.1.2, Wages and Salaries.)

Subsidized CJP income	exempt CW		exempt CF
CJP 1	y		y
CJP Work Study and VIP subsidized employment coded 4 CJP-WS or 3 VIP	Y		N
Work Study Title IV coded 3591	Y		Y

III. Income Tax Refunds

Regular income tax refunds are treated as property, not income, in the month received (42-211.21). EITC (earned income credit) that is received as a part of an income tax return, is exempt as income and property, and is exempt as property in the month received and the month following.

IV. Exemptions of Payments from Other Sources

A. Child Support

1. The first \$50 of current child/spousal support is disregarded as income and is be excluded both during the month it is received by the county and when it is received by the assistance unit, if different.
2. Child support payments are no longer exempt under the new MFG rules and must be included as income for both eligibility and grant determination. (Also see Eligibility HB Section 54-14 MFG for more information on how the repeal and processes apply.
 - As of 1/1/17, cases with former MFG children will be subject to child support requirements and shall be referred for child support services and collection.
 - These families will only receive the first \$50 child support paid. Because the child support will be retained by the county and no longer provided directly to the family, this income cannot be reasonably anticipated and should not be used in the grant calculation.
 - K1/3F cases with former MFG children will continue to receive any child support payments collected by child support services directly, and any reasonably anticipated child support income beyond the \$50 disregard must now be counted as unearned income against the child-only grant according to AR/CO reporting rules.
 - For recipients with a child not identified on an existing [Child Support Questionnaire, CW 2.1Q](#), as a condition of eligibility, the parent must agree to assign support rights to the state or be sanctioned, and in order to avoid the 25 percent child support penalty, the adult will also be required to cooperate with child support services in determining paternity of the aided child and cooperating with child support enforcement, unless good cause is found to exist.
 - EWs must explain all of the changes of the new MFG rule regarding child support requirements and collections to recipients/AUs with a newly eligible child or children so that the family is aware of penalties and sanctions that may apply if they fail to follow the new rules. AUs are required to complete and sign the [Notice and Agreement for Child, Spousal and Medical Support, CW 2.1NA](#) and [Child Support Questionnaire, CW 2.1Q](#), forms.

B. County Supplementation and Voluntary Contributions

County supplementation and voluntary contributions from persons or organizations having no liability for the support of the recipient are not considered income when the service is designated as a need by the State DSS, the contribution would not be available for expenditure unless used in accord with conditions imposed by the donor, and the recipient's grant and other income are not sufficient to meet his/her total need, which includes Federal Rent Supplements.

C. Certain types of loans and grants are exempt. See Section 53-12.

D. Certain types of infrequent/irregular income are exempt. See Section 53-5.

E. Certain types of income-in-kind are exempt. See Section 53-6.

CalWORKs Eligibility Handbook	Potential Income 53-3
	Effective 03-01-98

53-3 Potential Income

An applicant or recipient of cash aid must apply for potentially available income and accept it, if eligible.

I. Technical Condition of Eligibility

Applying for potential income is a technical condition of eligibility when applying for cash aid. A "technical condition of eligibility" is considered to have been met on the date of application, as long as it is completed by the date of authorization for aid, and, therefore, does not affect the Beginning Date of Aid (BDOA). See Section 55-3 Beginning Date of Aid.

II. Mandatory Inclusion

Cash aid should be denied or discontinued for the entire A U when a mandatorily included person fails to apply for or accept potentially available income. Note that this affects the entire AU, regardless of the reason for deprivation.

For optional persons, the sanction is limited: only the person who fails to apply or accept potential income is denied aid or deleted from the AU.

III. Apparently Eligible for Potential Income?

Income is only "potential" if the person is apparently eligible for it. This is particularly important for UIB, which has certain eligibility factors which need to be met. Don't refer someone who has never worked in employment covered by UIB, is already receiving UIB/DIB, is on strike, etc.

IV. Special UIB Requirements

If a mandatorily included person, who is not exempt from the cash aid work requirements, is apparently eligible for UIB and applies for it, but fails without good cause to meet other conditions of eligibility according to UIB regulations (reporting periodically to the UIB office, being available for work, conducting the required work search, etc.), the sanction may also be imposed.

No sanction is imposed for a mandatorily included person who is exempt from cash aid work requirements or an optional person.

CalWORKs Eligibility Handbook	Earned Income 53-4
	Effective 11-14-16

53-4 Earned Income

Earned Income (EAS 44-101.5)

I. Defined

Earned income is income received in cash or in-kind as wages, salary, commission, or profit from activities in which the recipient is engaged as an employee or as a self-employed individual.

A. Earned Income Also Includes:

1. Earnings over a period of time for which payment is made at one given time, as in the instance of sale of artwork by a craftsman, other than sale of an entire holding.
2. Returns from personal or real property (see Section 53-7). This includes income from rental of rooms, or board and room, which is treated as self-employment income (see Item II. A below).
3. Training incentive payments and work allowances under ongoing manpower programs, other than GAIN/CalWORKs and JTPA. (Refer to Section 53-2.)
4. Earnings from On-the-Job Training (OJT) and earnings from Public Service Employment.
5. Vacation pay and sick pay.
6. Tips. The worker must inquire about such compensation received by the recipient.
7. Meals provided by an employer of a restaurant worker, when the dollar value is included as part of the gross wages. When an employer does this, cost of the meal is also listed on the pay stub as a deduction.

B. Earned Income Does Not Include: (EAS 44-101.53)

1. Loans and grants, or portions thereof, that are not excluded (see Section 53-12). For College Work Study see Item III. E below.
2. Benefits not in the nature of wages, salary and profit, accruing as compensation or regard for services, or as compensation for lack of employment; for example, UIB, pensions, and Veterans benefits. (See Section 53-5.)
3. The training allowance paid to a recipient in Job Training Partnership Act (JTPA) programs. The expense allowance paid to an adult JTPA participant is applied against the actual expenses of training to determine net income. Only the amount that exceeds the expenses is counted as income. Also see Item III. B below.

II. Deductions and Disregards (EAS 44-113.2)

A. Self-Employment Expense Deduction

Applicants and recipients must choose one of two methods for determining net income from self-employment:

Actual business expenses, or a

Flat deduction of 40% of the gross business income.

Once a choice is made, the client can not switch to the other method until redetermination OR after six months, whichever comes sooner.

1. The Actual Expense Method

The actual expense method is based on Food Stamp (FS) regulations for self-employment income. See FS Handbook Section 82-9.8 for instructions. If the actual expense method is chosen, the client must submit verification of expenses Quarterly on the QR-7. If no verification is submitted, no deduction of expenses from gross business income is given.

2. The 40% Method

If the 40% flat deduction method is chosen, the client does not have to submit any verification of business expenses, only of gross business income.

3. Informing the Client and Documenting the Choice

To inform the client of the two methods and to document the client's choice, have the client complete either Form 4029. The form or should be provided when:

- a. a self-employed client applies for cash aid,
- b. a recipient reports self-employment income for the first time, or
- c. a self-employed recipient wants to change the computation method.

4. Once the net business income is computed from the gross business income by using one of the two methods above, the net business income is treated as "gross earned income" in the applicant and recipient income tests, as well as the grant computation.

B. Earned Income Disregards

When income eligibility and the grant amount is computed, gross earned income is allowed certain deductions, called "disregards," before it is compared to or subtracted from the standard limits (MBSAC or MAP). For more detail, see Sections 51-55 Income Eligibility and 53-26 Computing the Grant Amount.

1. \$90 Earned Income Disregard

In the applicant income test, if the AU has earned income, a \$90 disregard is allowed for each employed person whose income is being counted. The remaining earned income plus any other countable income, is compared to MBSAC in the applicant test.

2. \$225 Disability-Based Income/Earned Income Disregard

In the recipient income test and the grant computation, the family is first allowed a \$225 disregard from certain disability-based income, then any remainder of this disregard is applied to any earned income. Note that, unlike the \$90 disregard above, the \$225 disregard is allowed for the whole family, not each wage earner.

(Refer to Section 51-55 for more information and procedures on new income disregards enacted by Senate Bill 72 (SB 72) effective July 1, 2011.)

3. 50% Earned Income Disregard

In the recipient income test and the grant computation, the family is also allowed a 50% disregard from earned income, including any remainder after the \$225 disregard is applied. Note again, that the disregard is allowed for the whole family, not each wage earner. The final remaining amount of earned income, plus any other countable income, is compared to MAP in the recipient test.

4. Child Care

Note that no disregard or deduction from earned income is allowed for child care. Clients must enroll in the CalWORKs Child Care program for assistance with child care costs. See the CalWORKs Welfare-To-Work Handbook, Section 74-1, for the procedure to refer clients to the program.

III. Exempt Earned Income

A. Student Exemption (EAS 44-111.22)

All earned income of a child under 19 years of age (not a minor acting as the adult caretaker relative) is exempt, provided:

1. He or she is a full-time student, or
2. He or she has a school schedule that is equal to at least one-half of a full-time curriculum and is not employed full-time. Full-time employment is 173 hours or more per month; therefore, for purposes of this exemption, an employed student must be employed fewer than 173 hours per month.

Note:

The exemption applies to full- or part-time earnings between school terms or during vacation periods, if the child plans to continue to be a student in the next term or when the vacation period ends. The exemption is applied for both income eligibility and grant determination whether or not the student has received aid previously.

For purposes of this exemption, school attendance is defined as attendance in a school, college, university, or in a course of vocational or technical training designed to fit the child for gainful employment and includes participation in the Job Corps Program under the Economic Opportunity Act.

B. College Work Study (CWS) (EAS 44-111.25)

Earned income from College Work Study is exempt when computing income eligibility and the grant amount.

C. Independent Living Program (ILP) (EAS 44-111.26)

Income and incentive payments earned by a child 16 years of age or older who is participating in the Independent Living Program are exempt as income for both eligibility and grant determination, when received as part of the ILP written transitional independent living plan.

D. Earned Income Credit (EIC)

Earned Income Credit payments are always exempt as income, whether paid in a lump sum with the income tax refund or with the wage earner's regular paycheck ("Advance EIC"). Be sure not to include Advance EIC with the gross earnings when computing income eligibility and the grant amount.

E. CJP Work Study and VIP Subsidized Employment

CJP 1 is expected **to last no more than 30 days** and therefore is treated as exempt income for both **CW and CF**.

CJP Work Study /VIP subsidized employment income with an educational component from City College of San Francisco. This is noted with a coded designation, **"4 CJP-WS", or "3 VIP"** on the check stub or wage information sheet. **This income is treated as exempt for CW, but is budgeted for CF following SAR rules. This income does not meet the Work Study Title IV rules needed to be exempt for CF.**

Work Study Title IV employment income is exempt from both CW and CF. This income is noted with a coded designation, **"3591"** on the check stub or wage information sheet.

Examples: [CJP Work Study Check Stub 1](#) [CJP Work Study Wage Information 2](#)

NOTE: Work study earnings are **only** exempt for the purpose of determining CalFRESH benefits if the income meets Title IV Work Study rules. (See CalFRESH Handbook, Section 19.1.2, Wages and Salaries.)

	exempt CW		exempt CF
Subsidized CJP income			
CJP 1	y		y
CJP Work Study and VIP subsidized employment coded 4 CJP-WS or 3 VIP	Y		N
Work Study Title IV coded 3591	Y		Y

CalWORKs Eligibility Handbook	Unearned Income 53-5
	Effective 1-1-17

53-5 Unearned Income

Assembly Bill 1603 (AB 1603), was signed into law on June 27, 2016, repealing the CalWORKs MFG rule. Effective January 1, 2017, no child will be denied aid because he or she was born into a family that received cash aid continuously for ten months immediately prior to their birth. Children previously determined as MFG and excluded from the Assistance Unit (AU) shall have their needs included when determining the Maximum Aid Payment (MAP) and must be added to the AU effective January 1, 2017, if all other conditions of eligibility are met. See Eligibility Section 54-14 Maximum Family Grant for more information on repeal and rules that apply.

I. Defined

Unearned income includes all benefits received by the recipient in cash or in-kind which are not considered earnings. Unearned income also does not include payments which are specifically excluded or exempt. See Section 53-2 Excluded or Exempt Income.

Examples of unearned income include UIB, DIB, VA Benefits, absent parent contributions, Social Security Benefits (not to be confused with SSI/SSP), and Railroad Retirement. (State and federal income tax refunds constitute personal property and are considered liquid resources.)

II. Treatment of Certain Types of Unearned Income

Specific exemption or disregard amounts are allowed for certain types of unearned income.

A. The first \$50 of child/spousal support received is disregarded as income. Child support "pass-ons" from the Local Child Support Agency are not exempt or disregarded.

B. The first \$30 of cash income received in a calendar quarter by a prospectively-budgeted AU, which is too infrequent or irregular to be reasonably anticipated, is exempt.

Sources of this income may be small nonrecurring gifts, such as those for Christmas, birthdays, and graduation. Calendar quarters commence with the first day of January, April, July, September, and December, respectively. Note that since the exemption is only for prospectively-budgeted months, it can only be applied "after-the-fact" and would only be factor in determining whether an overpayment occurred.

C. "Disability-based unearned income"

Certain types of unearned income which are issued because of a person's disability are in a category separate from other unearned income. Income in this

category get a special \$225 disregard in the recipient income test and the grant computation. Not all types of "disability-based" unearned income are included in this category, only those that are listed below. Any disability income which is not listed below does not get the disregard:

1. State Disability Insurance (SDI)
2. Temporary Workers' Compensation (TWC)
3. Temporary Disability Indemnity (TDI) benefits
4. Private Disability Insurance benefits
5. Social Security Disability Insurance (SSDI) benefits

Note: The person receiving the income does not have to be disabled, does not have to be in the AU, and does not have to be in the home. This means that the disability-based income of children who themselves are not disabled, but are receiving the income based on the disability of a parent not in the home, will get the special disregard. See Section 51-55.

Also see Section 53-6 Income-in-kind.

CalWORKs Eligibility Handbook	Income-in-Kind 53-6
	Effective 03-01-98

53-6 Income-in-Kind

Income-in-kind is any benefit received other than in cash. It includes the value of need items provided at no charge.

I. Treatment of Income-in-Kind

Normally, when any item of need (housing, utilities, food or clothing) is provided cost-free to the AU, including those items of need provided in lieu of earnings, then the value of that need item(s) as set forth for that size AU is treated as income (earned or unearned) for that AU. There is no income-in-kind for any need item in which the recipient shares in the cost. Items of need paid in full by the donor direct to the vendor

are usually valued at the actual cash amount paid up to the level of the income-in-kind table.

A. The worker must inform the applicant that if he/she does not agree with the value arrived at by use of the income-in-kind table, he/she may contest that value by submitting evidence of the actual cost.

1. For housing and clothing, the in-kind income is the net market value of the item received.
2. For utilities and food, the in-kind income value is the cost to the person who paid for them.

If the applicant or recipient presents satisfactory evidence that the value of the item which he/she received in-kind is less than the value specified in the in-kind tables, such evidence shall be used by the worker in determining the value of the item.

B. If the applicant or the recipient presents evidence of the value of a need item shared with persons who are not members of the AU, the in-kind value attributable to the AU is the lesser of :

1. Their prorated share of the net market value or cost of the item; or
2. The value listed in the Income-in-Kind Table for the AU.

II. Types of Income-in-Kind

A. Earned Income-in-Kind

If the recipient is employed and a portion of the compensation from the employer is in the form of income-in-kind (e.g., housing is provided), then the income-in-kind value for that size AU shall be considered as part of the gross earnings subject to the disregards allowed for earned income.

B. Children Living with Non-Needy Relatives (Parents are never considered "non-needy.")

Income-in-kind from such relatives will only be considered if the non-needy relatives choose to make a voluntary contribution to the AU. The worker must ask the relatives if they wish to make such a contribution. If they do, the value placed on it will be either the income-in-kind value in **EAS 44-115.3**, or a lesser value if

so established, as in **EAS 44-115.32**. Partial items of need are not considered income (**EAS 44-111.452**)

C. AFDC Recipient Residing with SSI/SSP (44-115.21)

When an AFDC recipient is living in the same household with an adult relative who is an SSI/SSP recipient, no deduction of income-in-kind to the AFDC recipient is made.

D. Free Board and Lodging Received During Temporary Absence from Home

1. Absence of One Month or Less

The value of free board and lodging received by a recipient during a temporary absence from his home of not more than one calendar month is exempt (**44-115.11**).

2. After an absence of one month, free board and lodging is considered income to the extent the value exceeds the continuing cost to the recipient of maintaining the home to which he/she expects to return.

III. Income-in-Kind Exemption (44-111.454)

Any income-in-kind, whether a full or partial item of need, provided on the basis of need by a private nonprofit organization is exempt as income.

Private nonprofit organizations are religious, charitable, educational, or other organizations such as described in Section 501(c) of the Internal Revenue Code of 1954. Examples of private nonprofit organizations include, but are not limited to: churches, the Salvation Army, and the Red Cross.

NOTE:

This exemption does not include public or government agencies. nor does the exemption apply to assistance provided by Voluntary Resettlement Agencies (VOLAG) during the refugee's resettlement period.

CalWORKs Eligibility Handbook	Income from Real or Personal Property 53-7
	Effective 03-01-98

53-7 Income from Real or Personal Property

Net income from property (including that from property in which a life estate is held), produce or business enterprises is considered income available to meet the needs of the applicant or recipient. Net income to the AU from property is computed as follows.

I. Rental of Real Property

When real property not used as a home is being rented, a determination of income must be made. To determine income, deduct the following expenses, if verified, from gross rental:

- A. Taxes and assessments.
- B. Interest on encumbrance payments. (Do not deduct principal payments.)
- C. Utilities.
- D. Insurance payments.
- E. Upkeep and minor repairs.

Prorate the above expenses on the same periodic basis as the periodic basis in which the rental is received, i.e., monthly, quarterly, annually. If rental is received weekly, multiply the weekly amount by $4 \frac{1}{3}$ to arrive at the monthly income

II. Rental of Rooms or Room and Board

Income from room and board or from room rental is treated as self-employment income. See Section 53-4 Earned Income for information about computing self-employment net income.

III. Sale of Real Property under Contract of Sale - Title not Passing

The interest received is net income (principal payments represent conversion of property from real to personal property). Deduct any interest payments on prior encumbrances in determining net income from interest received from the sale of real property under a contract of sale.

IV. Rental of Personal Property

This might include such items as rental of trucks and equipment. To determine income from personal property:

- A. Deduct from the gross rental all expenses necessary for maintenance, etc.
- B. The remainder is considered net income available to the AU.

V. Interest in Personal Property

All interest received from savings accounts is considered net income. Such interest is apportioned equally over the number of months it has been accrued, beginning with the month after receipt. All other interest income is considered income in the month received.

CalWORKs Eligibility Handbook	Lump Sum Income 53-9
	Effective 7-1-04

53-9 Lump Sum Income

Lump sum non-recurring payments are considered property under the quarterly reporting/prospective budgeting system.

I. Types of payments

Lump sum income includes "windfalls" and can be unearned or earned income. The following are examples:

- A. Winnings from lotteries, raffles, sweepstakes, gambling, bingo, etc.
- B. Cash gifts from relatives or friends.

This includes "loans" which do not meet the criteria for exemption.

- C. Inheritances.
- D. Death benefits from insurance, minus any verified expenses for the funeral, cremation, or burial of the deceased.

E. The employer's portion of a retirement account plus the interest (paid when a person leaves a place of employment that has a pension plan).
The employee's portion is considered property.

F. Irregular earnings and self-employment earnings such as real estate commissions or income from free-lance work.

G. Retroactive payments from the Social Security Administration (except SSI), the Veteran's Administration, etc.

H. The portion of a personal injury award or worker's compensation payment THAT IS NOT "EARMARKED" for the injury (e.g., to cover the back medical bills).

I. The portion of a payment (from insurance companies, settlements, court judgments, etc.) to compensate for "converted" property WHICH EXCEEDS THE VALUE of the property that was lost, stolen, damaged or destroyed, minus any verified related expenses such as, attorney's fees and litigation costs.

Income tax refunds are considered property, not income. In addition, certain payments are not only exempt as income but also exempt as property in the month received and the month following: EIC (both year-end and advances) and retroactive public assistance payments (as a result of re-computing grants to correct errors or to comply with court cases).

II. How to treat lump sum income

Non-recurring income received in the form of a lump sum will not be used in the benefit calculations for CalWORKs or Child Support. Lump sum income, by definition, is income that is non-recurring, in source and amount, and therefore not expected to continue.

Such non-recurring lump sum income will be treated as property in the month of receipt under QR/PB rules and will not be used to determine benefit amounts. An AU/household will have the entire payment quarter to spend down the lump sum.

Note that there is a POI for recipients (not applicants) who transfer property for "less than fair market value." See Section 51-31 Transfer of Assets.

CalWORKs Eligibility Handbook	Other Types of Income 53-10
	Effective 1-1-17

53-10 Other Types of Income

Assembly Bill 1603 (AB 1603), was signed into law on June 27, 2016, repealing the CalWORKs MFG rule. Effective January 1, 2017, no child will be denied aid because he or she was born into a family that received cash aid continuously for ten months immediately prior to their birth. Children previously determined as MFG and excluded from the Assistance Unit (AU) shall have their needs included when determining the Maximum Aid Payment (MAP) and must be added to the AU effective January 1, 2017, if all other conditions of eligibility are met. See Eligibility HB Section 54-14, Maximum Family Grant for more information on repeal rules and new procedures.

I. Voluntary Contributions (44-101.6)

A voluntary contribution is a contribution for which the contributor had no legal liability. When a member of the AU receives a voluntary contribution, it shall be considered as net income to the AU except when:

- A. The service provided is designated as a need by CDSS, and
- B. The contribution would not be available for expenditure unless used in accordance with conditions imposed by the donor, and
- C. The recipient's grant and other income are not sufficient to meet his total need within the limitations specified in the Need chapter, or the designated need is one, all or a portion of which is not included in the assistance standard and thus cannot be met from the recipient's grant and income.

II. Interest Income (44-101.9)

Interest income includes interest on a savings account in a bank, savings and loan association or other institution authorized to accept savings, and interest which is received as a result of any contractual obligation. Interest income which is received on a regular basis, but less frequently than monthly, shall be apportioned equally over the number of months it has been accrued beginning with the month after receipt.

III. Absent Parent Contributions (44-111.47)

Monthly child/spousal support paid regularly by an absent parent (for a non-MFG child), minus a \$50 disregard should be considered as income when computing income

eligibility but not the ongoing grant amount. Once the case is active, it is a requirement that all such payments be directed to Child Support for processing. Recipients should not receive direct support payments while on cash aid. (see above info. on MFG repeal and references.)

A. Direct Payments to the Assistance Unit:

1. May occur only during the initial application process.
2. Must be considered for both eligibility and the grant amount (if retained), except payments for MFG children.
3. Are subject to the \$50 child/spousal support disregard when budgeting income.

Disregard the actual amount received up to \$50.

4. Must be fully budgeted for Food Stamp benefits.

B. Payments Made to Child Support

1. Child Support forwards the first \$50 of child/spousal support to the client with a stuffer indicating that this amount must be reported on the CW 7.
 - a. The monthly report is not considered incomplete if the client fails to report and/or verify the payment.
2. The worker ignores the Child Support disregard payment for cash aid budgeting purposes, but counts it as income for the Food Stamp benefits.
3. When an AU receives a disregard payment(s) for a prior month(s) in addition to the current month,
 - a. Ignore all payments for cash aid budgeting.
 - b. Budget only the current month's payment for Food Stamps
 - c. Count the additional monthly payment(s) as property in the month received.

C. Absent parent contributions beyond the \$50 disregard are treated as repayment of the cash aid.

D. The amount of an absent parent contribution received by Child Support for a non-MFG child which exceeds the amount of cash aid issued for a given month is passed on to the AU.

For the same month, a disregard and a pass-on will have been issued. While the disregard should be treated as in Item B above, pass-ons should be budgeted in full for BOTH cash aid and Food Stamps. Note that issuance of a pass-on may indicate income ineligibility for the AU if the same amount of income is expected to continue.

E. Child Support will "pass-on" the full amount of an absent parent contribution for a MFG child.

This pass-on is exempt from the income eligibility determination and the grant computation for cash aid, but not for Food Stamps. (SEE INFO. ABOVE REFERENCING MFG REPEAL)

IV. Death Benefits (44-101.7)

Death benefits from a private source are considered income. Death benefits are those life insurance or burial payments made to a deceased's beneficiary.

Net income from death benefits is the amount remaining after deducting the actual expenses of the funeral, cremation or burial of the insured. Such expenses must be verified by the recipient with acceptable evidence. Also see Section 53-9 Lump Sum Income.

V. Income from Excluded or Sanctioned Parents

If a parent living in the home is excluded from the assistance unit for reasons other than being a recipient of another aid program (SSI or Foster Care), a member of a different assistance unit, or an individual who has been sanctioned (i.e., has failed to cooperate in meeting a condition of eligibility), his/her income is counted, and the parent is included in "Big MAP." This also applies to the father of an unborn in a Pregnant Woman Only (PWO) case.

If the parent living in the home is sanctioned for non-cooperation reasons such as Assignment of Support Rights, SSNs, IPV, work requirements, School Attendance, Immunization, his/her income is counted, but the parent is not included in "Big MAP."

VI. Income from Stepparents

Refer to Sec. 52-5, Stepparent Regulations.

CalWORKs Eligibility Handbook

VII. Income of Sponsored Aliens

Refer to Sec. 52-6, Aliens Sponsored by Individuals, and Sec. 52-7, Aliens Sponsored by Organizations.

VIII. Income of Unrelated Adult Male

Refer to Sec. 52-15.

CalWORKs Eligibility Handbook	Loans and Grants 53-12
	Effective 11-13-19

53-12 Loans and Grants

Certain types or portions of loans and/or grants are excluded as income and property. Some are completely excluded and some must be considered on an individual basis to determine what portion is, in fact, available to meet current needs of the family. For educational loans and grants, workers must verify the source and amount by certification or letter from the proper student financial aid office of the college the student is attending.

I. Completely Excluded

Any award or scholarship provided by a public or private entity to, or on behalf of, a dependent child is exempt from consideration as income in the CalWORKs program.

A. The following educational loans and grants made to graduate and undergraduate students under Title IV of the Higher Education Act or the Bureau of Indian Affairs student assistance program are completely excluded:

- Pell Grants or Basic Educational Opportunity Grants (BEOG)
- Supplemental Educational Opportunity Grants (SEOG)
- State Student Incentive Grants (SSIG)
- California State Scholarships (Cal Grant A)
- California Opportunity Grants (Cal Grant B)

- Occupational, Educational, and Training Grants (Cal Grant C)
- College Work Study (CWS)
- Perkins Loans (not Perkins Vocational as in II.A.1 below)
- National Direct Student Loans (NDSL)
- Stafford Loans
- Guaranteed Student Loans (GSL)
- Income Contingent Loans (ICL)
- Parent Loans for Undergraduate Students (PLUS)
- Supplemental Loans for Students (SLS)
- Bureau of Indian Affairs (BIA) Higher Education Grants
- Indian Health Service Scholarships
- Robert C. Byrd Scholarship Program
- Federal Family Education Loans (FFEL)
- Federal Consolidation Loan Program
- Paul Douglas Teacher Scholarship Program
- National Science Scholars Program

B. Educational grants to undergraduate students made or insured under any program administered by the Federal Secretary of Education are completely excluded.

C. Educational grants to undergraduate students when awarded based on need are completely excluded.

To determine whether the grant is based upon need, certification from the school must:

1. Be in writing,

2. State whether the grant or award is based in need, and
3. State whether the public assistance grant received by the student was considered in making the award.

D. Grants for any other purposes when it is verified that the proceeds are not available to meet current needs are excluded.

Current needs are the same as defined for "Income-in-Kind." See Section 53-6.

E. Any loans which meet the following conditions are excluded from consideration as income, regardless of whether they are used to meet educational expenses or available to meet personal needs:

1. The terms of the loan are stated in a signed written agreement between the lender and the borrower, and
2. The agreement clearly specifies:
 - a. The obligation of the borrower to repay the loan; and
 - b. A repayment plan which provides for installments of specified amounts that continue on a regular basis until the loan is fully repaid.
3. The recipient has submitted copies of the loan contract papers or the written agreement verifying the conditions in #2 above.

II. Excluded Up To Amount of Educational Expenses

A. The following educational loans or grants made to graduate or undergraduate students are excluded from consideration as income only to the extent that the proceeds are used to meet educational expenses such as tuition, fees, equipment, books, materials, supplies, special clothing needs, transportation to and from school, child care services necessary for school attendance, etc.

1. Loans and grants under the Carl D. Perkins Vocational and Applied Technology Education Act for a student attending school on at least a half-time basis.
2. Grants other than those excluded in Items I.A, I.B, and I.C. Educational programs available through the Veterans Administration (VA) fall within this category (aka the G.I. Bill). However, one-third of Veterans Educational Assistance Program benefits (VEAP) represent the veterans

own contribution and is never counted as income, although it can be counted as property if retained.

B. If the verification from the school's financial aid office does not include a list of educational expenses, or if the student claims that the actual amounts of the expenses are greater than the ones listed on the verification from the school, the student must provide his/her own verification of the appropriate educational expenses.

C. The necessary costs of transportation to and from school are allowed based on the mode most economically available and feasible in the particular circumstances. If personal car usage meets the criteria above, all actual transportation costs will be prorated based on the percentage of miles driven to and from school to total miles driven. Allowable transportation costs include, but are not limited to, car payments, car insurance, registration, and gasoline.

D. How to Determine Non-excluded Amount Countable as Income

1. Total all non-excluded educational loans or grants received.
2. Total all anticipated student expenses to be met from the total loan or grant. The following lists those expenses which may be deducted from the total loan or grant.
 - a. Tuition and fees
 - b. Books, materials, and supplies
 - c. Equipment
 - d. Special clothing needs
 - e. Child care
 - f. Transportation
 - g. Any other expenses which can reasonably be attributed to be a result of the student's educational attendance.
3. Deduct these expenses from the total loan or grant in the month received. The difference is considered income in the month received.

III. Income from Temporary Census Employment

Effective immediately, any census-related income or stipend earned during the year preceding a decennial census and during the year of the decennial census should not be considered income for the CalWORKs program. This includes all income paid by the U.S. Census Bureau, a governmental entity, or a nonprofit organization for temporary work related to improving participation in the decennial census.

Therefore, any income earned as a result of temporary employment related to the decennial U.S. Census shall be exempt from consideration as income for the CalWORKs program, even if it can be reasonably anticipated to continue.

CalWORKs Eligibility Handbook	Senior Parent Income 53-13
	Effective 07-14-16

53-13 Senior Parent Income

When a Minor Parent (MP) lives with his/her own parent there are two likely situations:

- The Senior Parent is in the AU (is the aided Caretaker Relative)
- The Senior Parent is not in the AU (is unaided and not the CR)

In either situation, if the Senior Parent has income (other than SSI), it is always considered available to the MP and to the MP's children.

I. Definitions

A. A minor parent is a parent of a dependent child in his/her care and/or a pregnant minor, under 18 years of age, and has never been married.

See Section 54-13 for the requirements that a Minor Parent must meet in order to be eligible for cash aid.

B. A Senior Parent is the natural or adoptive parent of a MP who lives in the home.

Note that the procedures in this section generally only apply when the Senior Parent has income.

C. A Senior Parent Unit consists of the Senior Parent, his/her spouse (including "senior step-parent"), his/her children (other than the MP).

The Senior Parent Unit would be the Non-AU members included in "Big MAP." (See Sections 51-55 and 53-26 for explanations about "Big MAP.")

Note that the Senior Parent Unit does not include any person who has been sanctioned (i.e., not in the AU) for refusal or failure to cooperate in meeting a condition of eligibility.

Also note that the income of children and a "senior step-parent" in the Senior Parent Unit is not considered available to the MP or AU.

II. Requirements When Senior Parent is NOT the Caretaker Relative

A. Senior Parent(s) Statement of Facts (CW-23)

1. The MP must complete a CW-23 whenever a SAWS-2 or CW-20 is normally required:
 - a. At the time of application.
 - b. During a complete annual renewal.
 - c. When significant changes occur that affect continuing eligibility.
2. The MP is responsible for obtaining all information necessary to complete the CW-23 and for obtaining the necessary verification from the Senior Parent(s).
3. Failure to provide a complete CW-23 shall result in the denial or discontinuance of aid to the MP and his/her child(ren), even when it is the Senior Parent(s) who has failed to cooperate.

B. Senior Parent(s) Income Report - CW-73

1. The worker must supply the MP with the proper number of forms CW-73 so that he/she may file one quarterly with each QR 7 until the time of the annual renewal.
2. The CW-73 must be returned by the MP completely filled out, with all necessary verifications attached.

3. If the QR 7 and/or CW-73 is not returned by the 11th of the submit month or it is incomplete, the worker must take the appropriate "X-" or "Y-hold" action.

C. The CW-23/CW-73 are still required, although the MP is excluded due to Senior Parent income (see Part III below).

The MP should be added back on if the Senior Parent's income decreases sufficiently.

D. SSA Notification

When the income of a Senior Parent has been used to compute the SSI/SSP grant of another person, the worker must notify the Social Security Administration that the income of the Senior Parent is now also being considered to compute a CalWORKs grant.

III. Counting Senior Parent Income

A. See Sections 51-55 and 53-26 regarding the computation of income eligibility and the grant amount.

Total countable income is compared to, then subtracted from, a MAP amount that includes AU and Non-AU family members ("Big MAP"). The resulting amount is the Potential Grant, which is then compared to a MAP amount that only includes AU members ("Little MAP"). Usually, the Actual Grant amount is the lesser of those two amounts. Senior Parent income, however, adds at least one other step in this computation.

B. As indicated in the introduction of this section, Senior Parent income is usually counted, but the Senior Parent may or may not be a member of the AU (may or may not be an aided CR).

Also remember, that the Senior Parent's income should not be counted when determining eligibility and the amount of aid for the MP's child(ren).

C. If the senior parent's income results in either:

1. Ineligibility of the original AU (fails income test), or
2. Continuing eligibility, but the Potential Grant is less than MAP for the MP's child(ren), Then the MAP for the MP's child(ren) would be the Actual Grant amount, unless the MP has income of his/her own (see Item D below).
Special Needs of the

MP's child(ren) can also be added.

Note that if the original AU fails the income test, the MP and/or the Senior Parent should be excluded from the AU, unless it is a one-month only income situation.

CalWORKs Eligibility Handbook	Semi-Annual Reporting - Overview 53-21.2
	Effective 09-08-16

53-21.2 Semi-Annual Reporting (SAR) - Overview

SAR (Semi-Annual Reporting) was mandated by AB 6 beginning 04/01/2013. Under SAR, recipients' eligibility and benefits are determined prospectively for a six-month period based on information reported by applicants and recipients at intake or on the semiannual report form, [SAR7 Eligibility Status Report](#).

SAR is required for all CalWORKs and CalFresh cases, except certain child-only CalWORKs AUs who are required to report annually.

Reporting rules are SAR by SAR7 and:

- Mandatory Mid-Period Recipient Reporting
- Voluntary Mid-Period Recipient Reporting
- County Initiated Mid-Period Actions

Reporting periods are aligned between CalWORKs and CalFresh. Since CF cycles cannot be extended past 12 months, the CW cycle has to be aligned to an existing CF cycle to align RRR's.

Mandatory Reporting Requirements

Under SAR, county welfare departments (CWDs) are required to re-determine recipient eligibility and benefit amounts every six months, using prospective budgeting and reasonably anticipated income.

CalWORKs recipients are required to report mid-period any changes in income that exceed the income reporting threshold (IRT), established at 55 percent of the federal poverty level (FPL) based on an assistance unit (AU) of three, plus the amount of income last used to determine the AU's benefits; the level that would render the AU ineligible. .

CalFresh recipients must report mid-period if their income exceeds 130 percent of FPL.

NOTE: also see HB Section 55-26, Income Reporting Threshold

The SAR cycle is based on the Beginning Date of Aid (BDA or BDOA) rather than the date of application. There are six cycles each six months long. January and July are Cycle 1, February and August are Cycle 2, and so on.

The first month of each cycle is the beginning of the payment period. The last month of each cycle is the submit month or due month for SAR7 and RRR. The month prior to the last month is the data month or reporting month.

Example: Cycle 1: Submit month is June; Reporting or data month is May. Beginning of pay period is July 1st.

Mandatory Mid-Period Reporting

Mandatory mid-period reporting is required when there are changes in the household where additional or new information may affect benefits. Changes must be reported within 10 days of the date the household become aware of the change.

Mandatory mid-period reporting for CalWORKs:

1. When income exceeds the IRT
2. Fleeing felon status
3. Violation of conditions of probation or parole
4. Address changes

Voluntary Mid-Period Reporting

The EW will only take mid-period action on those voluntary reports that result in an increase to benefits:

- When head of household's income increases
- When someone moves into or out of the home
- When a CalWORKs AU member becomes pregnant or gives birth

- When allowable CalFresh deductions increase (CalFresh only).

The [SAR3, Mid-Period Status Report](#) is given to the client whenever they make mid-period reports

In some cases, reported changes may result in an increase in benefits for one program, while decreasing benefits for the other program. (Ex: increase in CW may decrease CF). Action to increase the grant and/or allotment based on voluntary reports shall be based on when the change was reported, not when the change actually occurred;

- Changes in income resulting in increased CW grant are made in the month it is reported.
- Changes in AU resulting in increased CW grant are made the first of the following month it is reported and person is added.

County-Initiated Mid-Period Actions

The EW shall also act on certain changes in eligibility status at the end of the month in which timely and adequate notice can be provided, even if it results in a decrease in benefits. Some of the changes in eligibility status listed below are considered county-initiated and these actions may occur at any time during the semi-annual period.

For CalWORKs these changes are:

- Client timed out
- Sanctions
- Child reaches age limit
- State hearing decisions

For CalFresh these changes are:

- Sanctions
- Errors or incomplete SAR7's,
- Failure to comply with QC review

Income Reporting Threshold (IRT) Informing

At least once per semi-annual period, the CWD shall inform each household of:

- The requirement for families that have earnings to report the receipt of gross monthly income that exceeds the IRT;

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- The consequences for failing to report; and
- The dollar amount of gross monthly income that exceeds the IRT.

[SAR2. Reporting Changes for Cash and CalFresh](#) is used to inform client what is their current IRT and the reporting rules associated with the IRT.

IRT informing shall also occur when:

1. the CalWORKs Family MAP size changes,
2. whenever the amount of income used to calculate the grant changes,
3. at redetermination/ recertification,
4. when the FPL figures are updated, upon recipient request, and any other time the AU household changes.

Tiered Income Reporting Threshold (IRT)

The same three-tiered IRT system is used for both AR/CO and SAR AU's. Under this system, the CalWORKs IRT will vary for each AU depending on their unique circumstances.

The CalWORKs IRT is the **lesser** of the following:

Tier 1	55% of the FPL for a family of three ("baseline") plus the amount of gross income last used in the CalWORKs benefit determination. NOTE: The baseline amount is a specific value that will be used in determining the Tier 1 IRT for all AUs. 55% of the FPL <u>for a family of three</u> will be used regardless of the actual AU size.
Tier 2	The level likely to make a family ineligible for CalWORKs based on the recipient earned income limit for each family size. The Tier 2 IRT is calculated as: MAP x 2 + the current Earned Income Disregard (EID) + \$1.
Tier 3 (CalFresh)	The level likely to make a household ineligible for CalFresh benefits based on the household size. The Tier 3 IRT is 130% of the FPL.

NOTE: Most AUs will have an IRT based on either Tier 1 or Tier 2. The Tier 3 IRT will **only** be used in situations when an AU reports income exceeding the Tier 2 IRT and remains eligible to CalWORKs.

For procedures and more detailed information on budgeting and reporting, please refer to CW Handbook Section 53-22.1, SAR Budgeting.

Verify Upon Receipt (VUR)

For CalFresh, certain reported or known changes are considered Verify Upon Receipt (VUR):

VUR means that:

- the information provided is not questionable,
- the provider is the primary source of the information, and
- No further information is needed to take action.

If secondary information is requested for verification in order to act on a change in another program (such as Medi-Cal), then by definition it is not VUR. Once verified, okay to act on change.

A voluntary report of household composition change by head of household or responsible adult member is considered VUR. Once verified, it must be acted on.

Information from the following systems is considered VUR:

- BENDEX and SDX from the Social Security Administration
- SAVE from the United States Citizenship and Immigration Services
- IEVS
- Work Number
- Worker number e United States Citizenship and;
- State agency determination of an IPV
- Actions taken by other programs within the county agency that affect CalFresh expenses
- Information from a state, county or local work agency that a client failed to comply with work requirements

Information not considered VUR includes (but is not limited to):

1. Quarterly wage match data,
2. New hire matches,
3. Unearned income matches from Internal Revenue Service, and
4. Wage data from the Social Security Administration.

Assembly Bill 6 now requires the replacement of the current Quarterly Reporting/Prospective Budgeting (QR/PB) System, with a Semi-Annual Reporting (SAR)

System for the CalWORKs Program.

Please refer to Section 53-21.3, Annual Reporting/Child-Only (AR/CO) for overview and additional information regarding CalWORKs, CalFresh and CFAP for those cases.

The table below provides a comparison of reporting requirements for AR/CO and SAR.

AR/CO	SAR
<ul style="list-style-type: none"> • Annual reporting cycle • Income exceeding the IRT (three-tiered IRTs); • Address changes; • Drug felony convictions • Fleeing felon status; or • Violations of conditions of probation or parole; • Changes in HH composition. 	<ul style="list-style-type: none"> • Semi-annual reporting cycle • Income exceeding the IRT (three-tiered IRTs); • Address changes; • Drug felony convictions • Fleeing felon status; or • Violations of conditions of probation or parole

##

CalWORKs Eligibility Handbook	Minimum Payment 53-23
	Effective 3-1-98

53-23 Minimum Payment

I. Amount of Aid

A. There is a minimum amount of aid that can be paid in a given month.

The following summarizes the limitations:

1. If the total grant including special needs is determined to be less than \$10, no aid payment is paid for that month. If the total amount of the grant plus special needs is \$10 or more, that amount is authorized as the aid payment.

2. In cases where the beginning date of aid is after the first of the month and the grant is prorated, if the grant is less than \$10, no payment is made for that month.
- B. A case that does not receive any payment because of the \$10 minimum payment regulations is one type of a "zero grant" case (see Section 53-24).
- C. If a grant is under \$10 and is expected to remain under \$10, the case is still considered eligible, just not eligible for a cash grant.

II. Overpayments and Underpayments

A. Underpayments

An underpayment (supplemental payment) can be issued when it is less than \$10. The minimum payment regulations apply only to the total grant and do not apply to underpayments that are to be issued as supplements to the basic grant.

B. Overpayments

1. The grant amount which is actually paid is considered an overpayment (O/P) in \$10 minimum payment cases. For example, a recipient is paid \$85, but the correct amount should have been \$7, which would have resulted in a zero grant. The amount of the O/P is \$85, not \$78.
2. A \$9.99-or-less grant amount which has been issued in error is an adjustable O/P.
3. If, after an O/P adjustment, the balance of a grant is less than \$10, the balance can be issued. For example, the O/P adjustment amount for a case is \$56, which leaves an \$8 balance for the grant. The \$8 is a payable amount because the original grant amount was \$64.
4. If a grant is computed to be less than \$10 and there is an outstanding overpayment, the recipient cannot receive credit toward the O/P. For example, a grant is computed to be \$9. There is an outstanding O/P of \$50. Because the recipient is not eligible for a grant, the \$9 cannot be applied toward the \$50 O/P.

III. Worker Responsibility

A notice of action is required even when the recipient is not eligible to an aid payment, or when a grant amount remains under \$10, but changes from one amount to another. For example, a recipient's grant is computed at \$6. The worker must send a timely notice of action that the recipient will receive a zero grant. The following month the payment is computed at \$8. The worker must send a second notice, but it need not be timely.

CalWORKs Eligibility Handbook	Zero Grant 53-24
	Effective 1-1-17

53-24 Zero Grant

NOTE: Maximum Family Grant (MFG) will end December 31, 2016 and cases with MFG children are required to cooperate with Child Support Services (CSS) starting 1/1/17, except for aid codes K1 and 3F.

A Zero Grant case is a case which does not receive a grant payment for the month, but which remains eligible for cash aid and the other benefits associated with that eligibility such as Homeless Assistance, Medi-Cal, and Food Stamps.

There are several ways a zero grant can occur on a case. Some cases may only have a zero grant for one or two months, while others may remain a zero grant almost indefinitely.

I. Grants of less than \$10

These are explained fully in Section 53-23. They are also due to income, earned or unearned, and usually only occur on a case for one month, as with suspensions, but can continue almost indefinitely.

II. Other Causes of Zero Grants

A. Overpayment Adjustments

When an overpayment is being collected on a case with income, the maximum allowable monthly adjustment sometimes exceeds the computed grant amount. The actual overpayment adjustment amount, then, would be the total amount of the computed grant for the month, leaving a zero amount payable to the client.

B. Penalties

If a time-limited penalty, such as the ones for Cal-Learn, is imposed on a case with income, it can result in a zero grant amount. Note, though, if a penalty is not expected to be automatically lifted within a short and specific period of time, and its duration is actually dependent on the client's cooperation, the case should be discontinued and not just allowed to become a zero grant.

C. MFG Children (**REPEALED 1/1/17**)

Since MFG (Maximum Family Grant) children are considered eligible recipients and active members of the AU, it is possible for a case to have a zero grant when other members of the family are not eligible for cash aid. For example, this can occur if the parent is sanctioned, leaving the MFG child as the only eligible member of the AU (the MFG child is not counted when determining MAP).

CalWORKs Eligibility Handbook	Computing the Grant 53-26
	Effective 1-1-17

53-26 Computing the Grant

Assembly Bill 1603 (AB 1603), was signed into law on June 27, 2016, repealing the CalWORKs MFG rule. Effective January 1, 2017, no child will be denied aid because he or she was born into a family that received cash aid continuously for ten months immediately prior to their birth. Children previously determined as MFG and excluded from the Assistance Unit (AU) shall have their needs included when determining the Maximum Aid Payment (MAP) and must be added to the AU effective January 1, 2017, if all other conditions of eligibility are met. Also see Eligibility HB Section 54-14, Maximum Family Grant for more information on how to compute grant under repeal regulations.

Before a grant amount is computed, two tests of income eligibility which must be applied to determine initial and/or continuing eligibility: the Applicant Test and the Recipient Test. For a description of these two tests, see Section 51-55 Income Eligibility.

The Grant Computation shares three components with the income tests, and the first part of the Grant Computation appears to be very similar to the Recipient Test, but differs in three very important ways.

I. Three Components Shared with the Income Tests

A. The "Disability-based unearned income" concept:

Certain types of income which are based on a person's disability are in a category separate from other unearned income. Income in this category get a special disregard in the Recipient Income Test and the Grant Computation. Not all types of "disability-based" income are included in this category, only those that are listed below. Any disability income which is not listed below does not get the disregard:

1. State Disability Insurance (SDI)
2. Temporary Workers' Compensation (TWC)
3. Temporary Disability Indemnity (TDI) benefits
4. Private Disability Insurance benefits
5. Social Security Disability Insurance (SSDI) benefits

Note: The person receiving the income does not have to be disabled, does not have to be in the AU, and does not have to be in the home. This means that the disability-based income of children who themselves are not disabled, but are receiving the income based on the disability of a parent not in the home, can get the special disregard.

B. The "Family Members" concept:

This concept refers to the AU and certain family members who live with the AU whose needs and/or income are considered when determining income eligibility and the grant amount.

1. The following is a list of types of persons included in the "Family" and whether their income and/or needs are considered. "Considering the needs of a person" means counting them in the family size. Note: only the needs of certain children are considered, not their income.
 - a. Step-Parents (income & needs) and step-siblings (needs only) of aided children
 - b. Senior Parents (income & needs), Step Senior Parent (needs only) and minor siblings (needs only) of the minor parent
 - c. Ineligible Alien Parent or Spouse (income & needs)

- d. Ineligible Alien Children (income & needs)
- e. Other Persons Excluded/Ineligible (income & needs):
 - i. Father of Unborn (in a Pregnant Woman Only case)
 - ii. Spouse of Aided Child
 - iii. Sponsored Aliens
 - iv. Drug and Fleeing Felons

Note that the needs of persons in a and b above are not considered if the Stepparent/Senior Parent has no income.

- 2. The following is a list of the types of persons whose income we consider but whose "needs" we do not, i.e, they are NOT counted in the family size.

Persons sanctioned for non-cooperation relating to:

- a. Child Support (refusal to assign support rights)
- b. Social Security Numbers
- c. Potential Income
- d. Fraud/Intentional Program Violations (IPV)
- e. Work Requirements
- f. School Attendance
- g. Immunization

- 3. Also note that when the State refers to "Non-AU family members" in any of their ACLs, ACINs, forms, or regulations, they are referring specifically to the persons listed in Item I.B.1 above.

C. The income disregards from the Recipient Test:

- 1. \$225 Disregard

Given for any Disability-based Unearned Income FIRST. THEN for any Earned Income (if any disregard is unused)

(Refer to Section 51-55 for more information and procedures on new income disregards enacted by Senate 72 (SB 72) effective July 1, 2011.

2. 50% Disregard

Given for any Earned Income (including any remaining amount after the \$225 disregard is applied)

The disregards above are applied to the income of not only the members of the AU, but to others in the home who fall into the categories in I.B.1 and I.B.2. These disregards are given for the total income for the whole family, not the income of each employed person.

In the Recipient Test, after the disregards are applied, the total Net Non-exempt Income (NNI) is compared to the MAP for the family size. Persons in I.B.1 above are included in the family size when determining this MAP, but persons in I.B.2 are not. If the NNI is less than this MAP, the family is eligible. If it is equal to or greater than this MAP, the family is not eligible. Note that an informal term to describe this MAP is "Big MAP."

II. The Grant Computation Differs from the Recipient Test

Note that, although the first part of the Grant Computation (computing the NNI) seems very similar to the Recipient Income Test, they differ in three very important ways:

A. The Recipient Test does not include Recurring "Special Needs" and Pregnancy Special Needs, while the grant computation does.

Note that Non-recurring Special Needs such as "Homeless Assistance" is not included.

B. The Recipient Test includes any child support which is being paid for an eligible child (except for a MFG child), even if it is paid to Child Support, while the grant computation does not.

C. The Recipient Test is based on income which is expected to continue every month, while the grant computation is based on either actual income received or an estimate of income which is anticipated to be actually received in a given month.

III. The Grant Computation

If a family passes the Recipient Income Test, then the grant amount can be computed. The grant computation has five steps:

- Computing the total NNI
- Determining "Big MAP"
- Computing the Potential Grant
- Determining "Little MAP"
- Determining the Actual Grant

A. Computing the Total NNI

The total Net Non-exempt Income (NNI) for the Potential Grant is computed similar to the way it is in the Recipient Income Test. However, while the same income disregards are given, the total amount of income may not be the same. In the Recipient Income Test, any child support which is being paid is included (except for MFG children), but it is not included in the Grant Computation.

B. Determining "Big MAP"

The MAP amount used in the Grant Computation is determined the same way as it is for the Recipient Income Test. Please see Item I.B above, as well as Section 51-55.

In the Grant Computation, the amounts of Special Needs (including Pregnancy Special Needs) of the AU and other family members who are in Big MAP (who fall into the first category under I.B.1, above) are ADDED to the MAP amount. The Special Needs of family members who are not in Big MAP (who fall into the second category under I.B.2) are NOT added to the MAP amount.

C. Computing the Potential Grant

In the Recipient Test, the total NNI is compared to "Big MAP," but in the Grant Computation the total NNI is subtracted from Big MAP plus any Special Needs (as explained above). The resulting amount is the Potential Grant.

D. Determining "Little MAP"

After the Potential Grant is computed, it is then compared to the MAP amount for the AU members only. This is referred to as "Little MAP" and does not include

those persons who were included in Big MAP for the Recipient Test or the Potential Grant (i.e., family members who fall into category in I.B.1 above). This is also true for Recurring Special Needs, only those of the AU are added to "Little MAP."

E. Determining the Actual Grant Amount

The Actual Grant amount is usually the lesser of the Potential Grant or Little MAP. However, there is an exception to this rule for minor parent cases.

IV. Proration of the Initial Aid Payment

If an applicant family is eligible to receive aid on the first of the month, they are entitled to receive payment for the full month. When eligibility is effective after the first day of the month, however, payment is made only for the portion of the month during which the family is eligible. This effective date of eligibility is called the "Beginning Date Of Aid." See Section 55-3 Beginning Date of Aid.

When computing the grant amount for a partial month, the rate of aid per day is computed on the basis of the actual number of days in the particular month involved, including the Beginning Date of Aid itself. If the proration of aid for a partial month results on a payment that is not a whole dollar amount, the cents must be rounded to the lower whole dollar amount. (For example, \$99.99 is to be rounded to \$99.00.) If the prorated amount is less than ten dollars, refer to Section 53-23.

To determine an initial grant for an AU of one parent and two children whose full monthly grant is \$565 and whose aid is to begin on March 10th, complete the following steps:

- A. Determine the day of the month aid is to begin.
In this example, aid will begin on the 10th.
- B. Determine the number of days in the month.
In this example, the month of March has 31 days. (Thus, a total of 22 days.)
- C. Determine the correct "reciprocal" using a reciprocal table, by finding the row corresponding to the day of the month from which aid is to be paid and the column corresponding to the number of days in the month.
In this example, the reciprocal is .7097.

54 - Determination of Need

CalWORKs Eligibility Handbook	Homeless Assistance 54-8.1
	Effective: 2-5-20

54-8.1 Homeless Assistance

STATE LAW CHANGES:

- Assembly Bill (AB) 1603 amends Welfare and Institutions Code (WIC) section 11450 by repealing the once-in-a-lifetime limit placed on temporary and permanent HA benefits. Under the new law, both temporary and permanent Homeless Assistance (HA) shall be available to an eligible assistance unit (AU) once every 12 months, with exceptions. Exceptions can be found here: Manual of Policies and Procedures (MPP) Section 211-44.541

- Assembly Bill 236, mandates CalWORKs families receiving Family Reunification (FR) services are now eligible for temporary Homeless Assistance (HA) benefits. AB 236 does not make any changes to the policies or procedures around CalWORKs cases receiving FR services, except to state that these families are now eligible for temporary HA if they are otherwise eligible and the county determines that HA is necessary for reunification to occur.

- Senate Bill (SB) 80 Section 57 repealed the consecutive day rule for temporary HA benefits. Homeless CalWORKs families and apparently eligible families will no longer need to use their 16 days of temporary HA benefits consecutively. The once every 12-month issuance of temporary HA benefits will not be considered exhausted until all 16 days have been issued, the family resolves their homelessness, or 12 months have passed. The 12-month period begins on the date that the first payment of temporary or permanent HA is made.

- Assembly Bill (AB) 960 expanded who is considered an allowable provider of housing for purposes of receiving HA payments to include anyone with whom the family has executed a valid lease, sublease, or shared housing agreement. These provisions allowing shared housing are effective on January 1, 2020.

(EAS 44-211.5)

I. General

Homeless Assistance is a non-recurring special need in CalWORKs. It is available to a homeless Assistance Unit seeking permanent housing. There are two separate special needs payments; Temporary Homeless Assistance (THA) and Permanent Homeless Assistance (PHA). Temporary Homeless Assistance is designed to provide housing for up to 16 cumulative days within 12 month period) while the family locates permanent housing. Permanent Homeless Assistance covers the reasonable and necessary costs of obtaining housing for the family and can cover such move-in expenses as rent and utility deposits.

Eligibility for Homeless Assistance is restricted to once-in-a-lifetime, unless certain exceptions are met. Persons who have received THA or PHA payments at any time are considered to have received their once-in-a-lifetime benefit. Also, an AU must now have a continuous period of homelessness caused by the same specific circumstances for both THA and PHA to be granted. There are some allowable exceptions to the once-in-a-lifetime rule (See V. below).

There is also a **non-recurring special need** when a family's home is made uninhabitable by sudden and unusual circumstances beyond the control of the AU. This is a separate special need, and both may be paid, but not to cover the same items of need. When a family is homeless, eligibility to Homeless Assistance must be explored before the non-recurring special need is used for interim shelter

Transitional housing is temporary housing and does not qualify for Permanent Homeless Assistance.

Recipients of Refugee Cash Assistance are eligible to Homeless Assistance to the same extent as CalWORKs recipients.

II. Policy

A. Homeless Assistance (HA) is available to Assistance Units that meet the definition of homelessness in EAS 44-211.5.

1. An AU is homeless if:

- It lacks a fixed and regular nighttime residence,
- It is staying in a shelter,
- It is living in a place not designed for or normally used for living accommodations, or
- It is living temporarily with another family

2. The assistance can be used for a commercial establishment, shelter, publicly funded transitional housing or from a person with whom the family has executed a valid lease, sub-lease or shared housing rental agreement.

3. These definitions apply whether the family was evicted or chose to move from their previous housing.

4. When the client states he or she is homeless, the AU must complete a CW 42 *Statement of Facts for Homeless Assistance*. This is in addition to any other application documents, including the SAWS 2 *Statement of Facts*.

B. Homeless Assistance is limited to a once-in-a-lifetime payment with certain exceptions. Anyone who has received a temporary shelter or permanent housing payment is considered to have received his or her lifetime payment.

1. Either portion of Homeless Assistance (Temporary Shelter or Permanent Housing) not paid will only be issued if the incidence of homelessness is the result of the same circumstances that resulted in the initial payment. This is true regardless of the length of time between payments.

2. Anyone who has received the once-in-a-lifetime benefit will be eligible for additional Homeless Assistance only if he or she meets one of the specified exceptions.

C. Homeless Assistance consists of two parts; a temporary shelter payment and permanent housing payment. To be eligible for both payments, the AU must have a continuous period of homelessness caused by the same specific circumstances.

1. An incident of homelessness begins on the day on which the first homeless assistance payment is issued.

2. Homelessness ends when the AU has permanent housing. The incidence of homelessness may also end if the Au obtains permanent housing without the payment of Homeless Assistance. The AU may move into the permanent housing before applying the Permanent Housing payment or may move into housing that exceeds the 80% total monthly household income limit on rent. If an AU obtains permanent housing, the incidence of homelessness ends.

3. The temporary shelter payment and permanent housing payment may be paid in any order, but must be linked to the same incidence of homelessness.

D. A separate CW 42 *Statement of Facts for Homeless Assistance* is required for each portion of Homeless Assistance.

1. This is true even when the request for a temporary shelter payment and a permanent housing payment are made at the same time.

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2. Separate CW 42s allow for evaluations of any changes in circumstances, particularly when there is a significant time period between a request for temporary shelter and permanent housing benefits.

3. Unless application for temporary shelter and permanent housing payments are made simultaneously, eligibility and homelessness must be verified for each CW 42 completed.

E. If the AU has liquid resources exceeding \$100, there is no eligibility for Homeless Assistance, either THA or PHA.

1. The \$100 resource limit is evaluated only once per incidence of homelessness. If the family is ineligible due to the resource limit, it will not be eligible for this incidence of homelessness even when it spends its resources down to less than \$100.

2. Liquid resources are, by definition, property. Income received in the month, including the CalWORKs grant, is not included. Liquid resources are not budgeted as income in determining the amount of the payment.

F. the amount paid for both temporary shelter and permanent housing is based on the number of persons in the AU. In determining the AU size, the following family members are not counted:

- a non-citizen applicant who has not provided verification of his or her eligible alien status
- a woman with no eligible children who has not provided medical verification of pregnancy, or
- a sanctioned or penalized person

1. Any mandatorily included adult who is not eligible, sanctioned, or penalized is considered to have received the once-in-a-lifetime benefit when living with an AU that does receive this special need.

G. Any otherwise eligible AU that has received a homeless assistance payment at any time on behalf of an eligible child shall not be eligible for further homeless payments, unless:

there is a new caretaker relative who was not living with the AU at the time the original homeless assistance payment was issued,
and the new caretaker relative has not received homeless assistance on behalf of or part of another AU, and
the former caretaker relative is no longer living in the home with the AU.

H. A minor parent who has received homeless assistance as part of an AU as a child has not used his or her once-in-a-lifetime Homeless Assistance benefit.

I. Homeless Assistance cannot be denied based on the availability of shelter at no cost when the AU is not staying at a cost-free shelter.

J. Approval and issuance of Homeless Assistance cannot be delayed pending the outcome of fraud investigation, if that investigation cannot be completed within the timeframes for issuing Homeless Assistance.

III. Temporary Homeless Assistance

A family that is determined "homeless" can get temporary homeless assistance (THA) for shelter costs if they have no place to stay while they are looking for a permanent place to live.

The family must be eligible for CalWORKs to be eligible for a THA payment. They must have completed an application for CalWORKs (SAWS 1) and a SAWS 2 *Statement of Facts*.

A. A family or relative caretaker can receive three initial days of THA, up to maximum of 16 days within a 12 month period.

1. There must be one housing search per day. The housing search verification (CW 74) and a hotel/motel receipt must be submitted before additional payments for temporary shelter, up to the maximum 32 days are issued. There is a mandatory FRED referral if no hotel/motel receipt is provided. A "good cause" statement from the recipient(s) can be applied and/or a sworn statement in lieu of receipts is allowable in those instances where benefits are not received and the families have not kept their receipts.
2. Homeless CalWORKs families and/or eligible families will no longer need to use their 16 days of temporary HA benefits consecutively. The once every 12-month issuance of temporary HA benefits will not be considered exhausted until all 16 days have been issued, the family resolves their homelessness, or 12 months have passed. The 12-month period begins on the date that the first payment of temporary or permanent HA is made.
3. The first issuance of three days of temporary HA payments shall be issued on the day that the family applies for HA while they are being verified. Followed by weekly issuances not to exceed a total of 16 days of benefits. There is no requirement to re-verify homelessness after the initial verification of

homelessness, even if the family does not receive or use their benefits on consecutive days. If the request is based on an exception, verification of the exception must be submitted before additional payments for temporary shelter, up to the maximum number of days, are issued.

B. Shared Housing Agreements and Leases

Effective January 1, 2020, families are no longer required to rent from individuals in the business of renting properties, or who has a history of renting properties and may instead now rent from any person or establishment with whom the family has executed a valid lease, sublease, or shared housing agreement. Under these new provisions:

- All other rules regarding allowable providers of housing remain the same (back rent/security deposit requirements, monthly rent max, legal eligibility of property, renter protections in CA, etc.)
- At minimum, SHAs must include landlord and tenant names, the unit address, the rent amount, agreement terms, and the date of occupancy and documentation for clients to verify they are entering into a valid agreements.

Expands the allowable use of Temporary Housing Assistance (THA) benefits:

- THA is generally intended for motels, but families may use THA on a short-term lease, sublease or SHA, while searching for permanent housing.
- Money spent on housing from a commercial establishment, shelter, or person/establishment that the family executed a valid lease, sublease, or SHA with, is not considered misuse of funds.
- THA benefits could also be used for SHAs that stretch the number of days they are sheltered, even when extending longer than the issuance usually covers.

Example: A family of four receives seven days of THA in the amount of \$595 but enters a short-term shared housing agreement that states that they will pay \$595 to stay at the house for two weeks, while looking for permanent housing. This would be an allowable use of temporary HA benefits, provided they enter into a valid lease, sublease, or SHA with the provider of housing.

Reference: [ACL 19-118 - Removal of the Consecutive Day Rule for THA Benefits: HA Payments to Include Shared Housing](#)

C. The amount for the Temporary Shelter payment is \$85 per day for an AU of four or less.

- This amount may be increased at the rate of \$15 per day for each family member up to a maximum of \$145 daily.

D. The payment for temporary shelter must be issued or denied within the same working day in which the AU requests homeless assistance. Issuance of homeless assistance cannot be delayed pending the outcome of a fraud investigation, if that investigation cannot be completed within the time frames for issuing homeless assistance.

Reference: <http://www.cdss.ca.gov/Portals/9/ACL/2018/18-106.pdf?ver=2018-09-17-123246-293>

IV. Permanent Homeless Assistance

Permanent homeless assistance (PHA) is available to assist homeless recipient AUs in obtaining permanent housing. An AU cannot receive PHA after securing housing and moving in.

The County will determine the most appropriate method of payment to third parties which includes, but is not limited to, direct vendor payments, two-party checks, or voucher payments.

A recipient of Permanent Homeless Assistance shall provide within 30 calendar days of having received the permanent housing assistance payment proof of the amount expended for permanent housing.

A. A nonrecurring special need payment for permanent housing assistance is made only to AUs presenting evidence that the AU has found permanent housing which does not rent for more than 80% of the AU's total monthly household income, without special needs.

1. If it is determined that the AU intends to share housing costs, and the AU's share of the total housing cost does not exceed 80% of total monthly household income, the AU has met this requirement.

2. Shared housing includes, but is not limited to the following:

two or more AUs residing together, SSI/SSP recipient(s) residing with the CalWORKs AU, an AU residing with unaided persons providing that the AU's share does not exceed 80% of the total monthly household income for the AU, a person, not living with the AU agrees to contribute the

amount of rent over 80% of total monthly household income. There must be a written statement signed by the person who agrees to contribute to the rent.

B. A special need up to the amount of two month's rent is available to the AU for security deposits when the deposits are necessary for the AU to move in.

1. Security deposits may include last month's rent and any legal payment, fee, deposit, or charge that is required by the landlord as a condition of the AU moving in. The first month's rent should be paid from the monthly CalWORKs grant or other income.
2. That portion of the security deposit payment, available for the last month's rent shall not exceed 80% of the AU's total monthly household income, without special need.
3. When an AU is moving into subsidized housing, an amount not to exceed two months of an AU's rent is available to pay for the reasonable costs of security deposits when the deposits are a condition of securing a permanent residence. In subsidized or shared housing cost situations, the amount that the AU is obligated to pay to secure housing (that is, the total rental cost) shall be used.
4. In order for the homeless assistance program to be available to meet the costs of security deposits, the recipient must pay the permanent housing assistance to a commercial establishment or a person in the business of renting properties who has a history of renting properties.
5. If the payment is made by warrant to the recipient, he/she shall provide verification within 30 calendar days of having received the permanent housing assistance payment of:

the amount expended for permanent housing and the payment of the permanent housing assistance to a commercial establishment or a person in the business of renting properties who has a history of renting properties.
6. A determination that the payments were not used for permanent housing or not used to pay a commercial establishment or a person in the business of renting properties shall result in a determination of mismanagement of funds which may result in an overpayment.

C. The payment for permanent housing costs may include the actual costs of utility deposits in addition to the amount allowable for security deposits required for the start up of utility service. Recipients must be eligible to the homeless assistance under either the once-in-a-lifetime homeless assistance or meeting one of the exceptions to be eligible for utility deposits.

1. The payment shall cover deposits required for gas, electricity, and/or water. Telephone service is not included in this special need.
2. The special need does not cover the cost of overdue utility bills or payments to another party in a shared housing situation when utility service is already in use.

D. The payment for permanent housing costs is not available to assist recipients to return to their most recent former residence unless there are unusual circumstances beyond the recipient's control.

1. The most recent former residence is any unit in a multiple unit dwelling such as a duplex or apartment building in which the recipient lived just prior to being determined homeless.
2. Unusual circumstances beyond the recipient's control include, but are not limited to, moving due to the condemnation of a property that later becomes habitable, after repairs or being evicted due to new ownership and moving back after the building is remodeled.

E. The removal of the consecutive day rule also applies to AB 557 benefits, otherwise known as "expanded temporary HA for CW applicants that are fleeing domestic abuse".

These benefits are still issued in two 16-day increments for a total of 32 days; however, the two issuances of 16-days will no longer have to be consecutive. Because the two 16-day increments do not need to be used consecutively, the second issuance of 16 days could be for a different instance of homelessness, months or even years later, as long as the applicant meets the eligibility criteria for these benefits.

Benefits are still issued in two 16-day increments and limited to a maximum of 32 days in a lifetime.

V. Eviction prevention and rent arrearages

Homelessness is also defined to include families who have received a notice to pay rent or quit, meaning pay the rent that is due or leave the residence.

In these circumstance, there is another kind of permanent homeless assistance that is designed to prevent eviction. Receipt of either of these two PHA payments would constitute an AU's once-in-a-lifetime payment.

This type of PHA is available to pay up to two months of rent arrearages (back rent) to prevent homelessness. Each month of arrearages payments is limited to 80% of the total monthly household income.

A. Eligibility for payment of arrearages:

1. In order for an AU to be entitled to receive permanent homeless arrearages payments, the payment of back rent must be a "reasonable condition" of preventing eviction. In addition, a family who applies for back rent payments due to a receipt of a "notice to pay rent or quit" must demonstrate that the eviction is the result of a verified financial hardship that resulted from "extraordinary circumstances" beyond their control, and not due to other lease or rental violations. The family must be experiencing a financial crisis that could result in homelessness if preventive assistance is not provided.
2. Examples of expenses that might place an AU in a financial hardship situation include, but are not limited to:
 - High hospital bills not covered by Medi-Cal
 - Car repairs
 - Funeral expenses
 - Cost required for traveling to visit an ill or dying relative or to attend a funeral
 - Repair of household appliances not otherwise covered by CalWORKs non-recurring special needs
 - High utility bills resulting from unforeseen circumstances, such as weather extremes.
 - Loss of ages due to illness or self or family members.
3. Situations that might not be considered resulting from "extraordinary circumstances beyond the AU's control" include, but are not limited to, the following:
 - Loss of income due to purchase of non-essential household goods, gambling debts, parties, or vacations
 - Failure to budget properly
 - Paying off regular credit card debts.

4. If the CalWORKs family shares rent with others, such as SSI recipients or others who are not being aided, the payment of back rent for the AU is contingent on the other people living in the house being able to pay their share to prevent eviction. If the AU's portion of the back rent is paid, but the other(s) in the household are not able to pay enough of their share of the back rent to prevent eviction, the the AU's request must be denied.

VI. Exceptions to the once-in-a-lifetime eligibility

Following the issuance of the once-in-a-lifetime homeless assistance the AU may claim an exemption at any time. Once homeless assistance has been issued under an exception, the Au is not eligible under another exception for 12 months.

Natural Disaster or Emergency

Participants who become homeless as a direct and primary result of a state or federally declared disaster, the following applies: (1) these participants qualify for good cause for failure to provide proof of housing search; and (2) counties may waive the initial three-day limitation on temporary HA benefits and instead provide temporary HA in increments of more than one week. The number of days of temporary HA benefits the county issues at a time to such participants is at county discretion, based on the circumstances. There is no limit on the number of times families can receive HA in a year due to homelessness created by declared disasters. (AB 607)

A. Temporary and permanent homeless assistance are limited to once-in-a-lifetime payment with the following exceptions:

- Whenever a state or federally declared natural disaster is the direct and primary cause of homelessness.
- The declaration of disaster is an official act on the part of the governor or the president.

Limited to a maximum of one period of up to 16 consecutive calendar days of temporary shelter and one payment of permanent homeless assistance in 12 months when homelessness is the result of any of the following exceptions:

- Domestic violence by a spouse, domestic partner, roommate or uninhabitability of the former residence caused by sudden and unusual circumstances beyond the applicant/recipient's control which include, but are not limited to, fire, natural catastrophe, or condemnation, or a medically verified physical or mental illness, excluding alcoholism, drug addiction or psychological stress.

B. If claiming homeless assistance under the exceptions of physical or mental illness or uninhabitability of a residence, the applicant for HA must submit verification of the

exception. Workers must explore with applicants and participants what kinds of proof are available to the individual. The following are examples of possible sources of proof:

- Physical or mental illness - medical verification from the appropriate treating physician, state certified nurse, nurse practitioner, medical or clinical personnel with access to the patient's records who can verify the diagnosis. Although the regulations specify a government or private or public agency as the source of third party records, it is not required that a physician or other licensed health care provider be part of a specific agency.
- Uninhabitability of the residence - written statement or copies of reports from police departments, fire departments, the Red Cross, health department or any other agencies authorized to verify uninhabitability of the former residence.

C. An incidence of homelessness begins on the day on which the first homeless assistance payment is issued. The 12-month waiting period between exceptions begins on the day on which the first homeless assistance payment is made.

D. The initial issuance of temporary shelter and/or permanent housing is considered the once-in-a-lifetime assistance benefits regardless of the reason for the homelessness.

1. This includes when the reason for the homelessness meets one of the exceptions.
2. The initial issuance means the first time that temporary shelter payments up to the maximum of 16 days and/or the permanent housing payment were issued to an AU.
3. The month of initial issuance of a homeless assistance payment is month one when determining eligibility under an exception once in a 12-month period.

E. Homelessness ends when the AU receives the payment for permanent housing. If an AU obtains permanent housing, the incident of homelessness is no longer continuous. The incidence of homelessness may end without the payment of permanent housing assistance if the AU obtains permanent housing without the payment of homeless assistance.

VII. CalWORKs Family Reunification Cases

Effective January 1, 2018, CalWORKs FR cases that are experiencing homelessness shall be eligible for temporary HA benefits, if the county determines these benefits are

necessary for reunification and the family is otherwise eligible (i.e., they are homeless and have no more than \$100 in available liquid resources). Child Welfare staff making the determination for the need of homeless services in the reunification plan should coordinate closely with the CalWORKs eligibility staff to ensure these families can access temporary HA as appropriate.

If it is determined that housing is necessary for reunification to occur, the county should offer temporary HA and consider pairing these benefits with a program like HSP or BFH (if available in their county), which offers housing search assistance, short term rental subsidies, and intensive case management. In other instances, the family may experience homelessness toward the latter stages of their case plan. Presuming they are still a CalWORKs FR case, temporary HA may prove an acceptable interim solution that allows a dependency court judge to safely return the children to the care and custody of the parents, after which time the family may qualify for permanent HA or other interventions.

VIII. Fleeing Victims of Domestic Violence or Abuse (AB 557 Applicants)

Assembly Bill (AB) 557 (effective 7/1/2018) expanded THA benefits for individuals of domestic violence or abuse who provide a sworn statement of past or present abuse, who are deemed homeless, and are fleeing his or her abuser. Individuals who apply for THA benefits under these rules are considered "AB 557 applicants" and eligibility for benefits are as follows:

1. On, or apparently eligible for CalWORKs; "apparently eligible" means that information provide on the applicant's sworn statement indicates that the applicant would be otherwise eligible if the information provided was verified.
2. Must have a child or provide medical proof of pregnancy; applicant must also provide a Social Security number for the child or provide proof that the child is a eligible non-citizen.
3. Applicants are exempt from providing proof of their search for permanent housing, unless they are granted immediate need payment or are issued their first month's CalWORKs aid.

While AB 557 expands eligibility for THA for applicants fleeing domestic violence or abuse, it does not changed CalWORKs eligibility rules for these individuals. All applicants who apply for CalWORKs will not necessarily be determined eligible, but when determining CalWORKs eligibility, income and assets available to the applicant at the time of application should evaluated toward the \$100.00 limit. Income and assets attributable to the alleged abuser are disregarded when determining eligibility for these

benefits, however determination must still be made whether that income and/or those assets are unavailable to the applicant and considered separate property.

If the applicant states in their sworn statement that they do not have access to those assets, those assets should be disregarded for the purpose of CalWORKs eligibility, unless there is provable evidence to the contrary.

AB 557 HA benefits are allowed once in a lifetime and are in addition to regular temporary or permanent benefits. They do not count against the once-a-year exception, including exceptions based on domestic violence or abuse. The benefits are in addition to any other payments in which the applicant may become a CalWORKs recipient later.

AB 557 applicants shall receive a lump sum equal to 16 days of THA benefits on the day of his or her application, rather than in weekly increments. Applicants shall receive one additional lump sum payment (for 16 additional days) immediately following the end of the initial 16-day period, equaling a total of 32 consecutive days of THA benefits if they are still homeless and if the CalWORKs application has not yet been approved or denied.

If the applicant's written request is to receive the initial THA benefit directly or issued directly to the applicant's provider of temporary housing or shelter, then payment shall be made according to their request. If the lump sum payment for the first 16 days is issued directly to the applicant, and they cannot verify that they spent the money on shelter, the second lump sum payment should be issued by vendor/voucher.

AB 557 applicants are exempt from providing proof of search for permanent housing, unless they are given immediate need payments or issued first month CalWORKs aid. CalWORKs recipients are not exempt from providing proof of search for permanent housing, however CalWORKs case applicants fleeing domestic abuse should be granted "good cause" if they do not necessarily meet permanent housing search criteria.

Applicants must fill out a CW application (SAWS 1 or SAWS 2 PLUS), Statement of Facts - Homeless Assistance (CW 42), and sign a sworn statement that they are fleeing DV.

IX. Intercounty transfers

A. The county is which an applicant or recipient first asks for homeless assistance is the county that must process the payment.

B. If an application is filed in one county but (a) the AU moves to another county before eligibility is determined and/or aid is authorized and (b) an application for homeless assistance is made in the second county, the processing of the application for cash aid and homeless assistance are the responsibility of the second county. The first county does not deny aid, but sends copies of all

documents to the second county. The beginning date of aid, if the AU is otherwise eligible is the date of the original application in the first county.

X. Guidelines for FRED Referrals for Homeless Assistance Payments

Most applications for Homeless Assistance do not require investigation, or can be verified in the usual manner via documents, collateral contacts, etc.

FRED can assist with property checks. Referrals for this are not entered in the FRED database as fraud investigations.

Reminder: Temporary Homeless Assistance must always be approved or denied the same day. Permanent Homeless Assistance must be approved or denied within one working day.

Search for previous Homeless Assistance payments before proceeding, and explore exemptions to the once-in-a-lifetime limit if the applicant has previously applied received Homeless Assistance.

A. Criteria for FRED Referral

1. A questionable situation exists and the applicant or third party will not cooperate in providing necessary verification that affects eligibility or the benefit amount.
2. The applicant failed to report pertinent information.
3. There is an allegation of fraud from a government agency or a citizen's complaint.

B. Temporary Homeless Assistance

1. Verify homelessness through normal procedures, such as documents provided by the client, collateral contacts (with the client's consent), etc.
2. Homelessness must be verified within the first three working days.
3. Homeless Assistance can be approved before the cash aid is granted, as long as the applicant is apparently eligible.
4. If necessary, the applicant must sign a statement under penalty of perjury that includes:

- a. Statement of liability for providing false information
 - b. Name, address, and telephone number of previous landlord
 - c. Location where the applicant is currently staying
5. Generally, unless third-party verification of homelessness is immediately available, issue initial benefits for three working days, plus any non-working days, while pursuing further confirmation of homelessness.
 6. After the three working days, the applicant must return the housing search form **and verification that temporary benefits were expended properly** before subsequent payments are made.
 7. Payment must have been made to a commercial establishment, shelter, publicly funded transitional housing, or a person in the business of renting properties that has a history of renting properties.
 8. If the verification returned after the initial three days is questionable or contains conflicting information, **refer to FRED**. Do not wait for FRED response; issue an additional three working days of benefits pending the results of the investigation. **If this results in a finding of mismanagement of funds, any future Homeless Assistance payments must be vendor payments.**

C. Permanent Homeless Assistance

1. **A lease or rental agreement is not required.** It is sufficient to obtain written verification signed by the landlord that specifies the amount of move-in costs and rent and documents the landlord's intent to rent to the applicant upon payment of move-in costs and first month's rent and the signing of a final lease or rental agreement by both the tenant and the landlord.
2. If necessary, contact the landlord directly (with the applicant's consent), to determine the validity of the verification provided. If this is outdated or unclear, or there is conflicting information and the county cannot contact the landlord or verify by some other means that the agreement has been made, the applicant may sign a statement under penalty of perjury, which includes:
 - a. Statement of liability for providing false information
 - b. Name and phone number of the landlord
 - c. Location of the rental
 - d. Terms of rental

e. Amounts of deposits and rent.

3. In general, payments to San Francisco Housing Authority for Homeless Assistance are automatically approved, providing the documentation is not questionable and all eligibility criteria are met.

New or Revised NOAs (Notices of Action)

- NOA Homeless Assistance Denial (M44-211D) was revised to include reasons for denials based on requests for expanded temporary HA for applicants fleeing domestic abuse under AB 557, temporary HA for CalWORKs Family Reunification cases under AB 236, and HA requests based on natural disasters under AB 607.
- NOA M44-211B was created to approve requests for expanded temporary HA for applicants fleeing domestic abuse under AB 557. This NOA message states that these benefits are only available once in a lifetime and explains that these benefits may be available for up to 32 days of shelter payments

CalWORKs Eligibility Handbook	Maximum Family Grant 54-14
	Effective 1-1-17

54-14 Maximum Family Grant (Repealed - Effective 1/1/17)

I. Overview

Assembly Bill 1603 (AB 1603), was signed into law on June 27, 2016, repealing the CalWORKs MFG rule. Effective January 1, 2017, no child will be denied aid because he or she was born into a family that received cash aid continuously for ten months immediately prior to their birth. Children previously determined as MFG and excluded

from the Assistance Unit (AU) shall have their needs included when determining the Maximum Aid Payment (MAP) and must be added to the AU effective January 1, 2017, if all other conditions of eligibility are met.

Transition of MFG Status Cases

- Most actions on MFG cases will be automated in CalWIN, but EW's will go over the TEMP 2260 with clients for families with MFG child(ren) at phone RRR's starting in 10/2016 and will go over the TEMP 2260 with clients.
- For cases with CSS cooperation requirement, the EW's will act proactively to have clients with MFG families sign CSS forms at RRR GI's. Cases with aid codes K1 and 3F do not have a CSS cooperation requirement. The MFG child needs to be included on forms CW 2.1Q and CW 2.1. If the MFG child is not included:

Workers should include the CW2.1Q "Support Questionnaire" and CW 2.1 for the MFG child(ren) in the Group Informing Packet for clients to complete and sign off on these forms during GI.

- The system will send notice (TEMP 2260) to all CalWORKs recipients on November 1, 2016, informing recipients of the change in state law that repeals the MFG rule.
- The system will generate and send timely notices to MFG families prior to January 1, 2017 about the MFG child being added to the case and change in grant amount.
- **The change in MFG status will be treated according to SAR and AR/CO rules.**

For example, if removing the MFG status from a child and counting their income results in a decrease to the grant amount, the change must take effect at time of next RRR.

- Other income and/or benefits (i.e., Social Security, disability, retirement, etc.) paid to or on behalf of the child subject to the MFG rule are no longer exempt (effective at the next RRR) from consideration as income in determining the grant. EWs must take action to identify and reevaluate this income and

determine if any changes to the AU's grant are necessary with timely and adequate notice provided. If the cycle (cycle 1) falls on January 2017 and EWs cannot provide a 10-day notice to reduce or discontinue the January grant, they shall provide a 10-day notice to reduce February's grant, and collect any overpayment for January. Income of MFG child will not be evaluated by the system.

- This change will not apply "retroactively". When determining the Maximum Aid Payment (MAP), the number of needy persons in a family shall not include the needs of a child subject to the MFG rule until January 1, 2017.
- Former recipients who reapply for aid prior to January 1, 2017 will not have the needs of the child subject to the MFG rule considered in calculating the cash aid grant until the new law goes into effect.
- When the AU size increases, the AU's Tier Two IRT will also increase. As a reminder, EWs must inform recipients of their new IRT amount anytime it changes. CalWIN automatically will create the new notice. IRT requires earned income in combination with unearned income to apply.

Child Support

Child support payments are no longer exempt under the new MFG rules and must be included as income for both eligibility and grant determination.

- As of 1/1/17, cases with former MFG children will be subject to child support requirements and shall be referred for child support services and collection.
- These families will only receive the first \$50 child support paid. Because the child support will be retained by the county and no longer provided directly to the

family, this income cannot be reasonably anticipated and should not be used in the grant calculation.

- K1/3F cases with former MFG children will continue to receive any child support payments collected by child support services directly, and any reasonably anticipated child support income beyond the \$50 disregard must now be counted as unearned income against the child-only grant according to AR/CO reporting rules.
- For recipients with a child not identified on an existing Child Support Questionnaire, CW 2.1Q, as a condition of eligibility, the parent must agree to assign support rights to the state or be sanctioned, and in order to avoid the 25 percent child support penalty, the adult will also be required to cooperate with child support services in determining paternity of the aided child and cooperating with child support enforcement, unless good cause is found to exist.
- EWs must explain all of the changes of the new MFG rule regarding child support requirements and collections to recipients/AUs with a newly eligible child or children so that the family is aware of penalties and sanctions that may apply if they fail to follow the new rules. AUs are required to complete and sign the Notice and Agreement for Child, Spousal and Medical Support, CW 2.1NA and Child Support Questionnaire, CW 2.1Q, forms.

CalFresh

CalFresh benefits shall be recalculated for those CalFresh households whose CalWORKs grants have been adjusted. As a result of the recalculation, the amount of CalFresh benefits may decrease. EWs shall provide adequate notice to all CalFresh households of any change to their CalFresh benefits as a result of the recalculation. Unearned income from MFG children will continue to be budgeted for CF as before.

Immunization

As of 1/1/17, cases with former MFG children age 6 and younger will be subject to immunization requirement. Since these children had been unaided recipients while on MFG they are not added to the case, but rather became eligible when MFG status ended. The immunization verification is therefore due at the next RRR following 1/1/17.

New, Revised, Obsolete Forms and NOAsNew Forms

TEMP 2260 (08/16) – Changes To the California Work Opportunity and Responsibility To Kids (CalWORKs) Maximum Family Grant (MFG) Rule. This form was created to send to all CalWORKs AUs to inform them of changes to the MFG rule, effective January 1, 2017. This is a required form with no substitutes permitted.

TM44-314 (08/16) - Maximum Family Grant Repealed - This Notice of Action (NOA) was created to send to a CW AU when their AU size has increased due to the inclusion of a child who was previously deemed subject to the MFG rule. This NOA also informs AUs that their monthly grant has changed due to the inclusion of an additional AU member.

Required Forms - No Substitute Permitted

Forms in this category are required forms that may not be modified or restructured (with exception to OM Section 23-400.211 and Section 23-400.212).

The following forms were revised to remove language referencing the MFG rule:

- CW 2.1Q (7/16)
- CW 215 (7/16)
- SAWS 2
- SAWS 2A
- QR/QR 7/QR 25A
- CW 2103 (6/16)
- CW 2218 (7/16)

The SAWS 2A SAR will be addressed under separate cover as part of the SAWS 2 Plus, which is currently being revised.

Obsolete Forms

The following forms and NOAs are obsolete as of January 1, 2017 and should no longer be used:

- CW 2102 (8/00) - The Maximum Family Grant (MFG) Rule for Recipients of Cash Aid
- M44-314 (11/00) - Maximum Family Grant, Approval
- M44-314A (11/00) - Maximum Family Grant, Other
- M44-314B (11/00) - Maximum Family Grant, Change
- M44-314C (9/97) - Maximum Family Grant, Change

Please note that the above procedures and policies will go into effect on January 1, 2017. The policies below are in effect until December 31, 2016.

If you have any questions regarding current MFG procedures, please consult with your unit supervisor.

The **Maximum Family Grant (MFG)** statute requires that the Maximum Aid Payment (MAP) will not be increased for any child born into a family that has received CalWORKs continuously for the ten months prior to the birth of the child. Aid will be considered continuous for the ten months prior to the birth of the child, unless there was at least a consecutive two-month break in aid during that period.

MFG rules apply to all children born on or after September 1, 1997, except for the children of minor parents. A minor parent's child born before July 1, 2001, is not subject to MFG rules. When the child of a minor parent is born after that date, the child is an MFG child only while receiving aid in the Assistance Unit (AU) of a senior parent. When the minor parent has his or her own case, the child will no longer be an MFG child.

There are exceptions to the MFG rule, and cases should be reviewed at intake and at every RRR.

II. REFERENCES:

All County Letters	All County Notices	CalWORKs PIMs	EAS	Cross References to Other Sections of CW Handbook
ACL 94-112 , ACL 96-37 , ACL 00-78 , ACL 01-82 , ACL 11-29 ,	ACIN I-62-98 , ACIN I-82-00 , ACIN I-02-06	WTW PIM # 06-01 , CW PIM # 97-8, CW PIM #00-14, CW PIM #01-6,	MPP 44-314 , MPP 42-713.22 , MPP 42-715.511	53-24 Zero Grant

ACL 97-29, ACL 01-16				
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III. APPLICATION OF MFG RULE:

NOTE: Prior to establishing MFG status for a child, the [Maximum Family Grant Checklist](#) must be completed. Please remember that **ALL MFG decisions** must be reviewed and approved by your supervisor.

A. When a child is born into an AU that has received aid for at least ten months immediately prior to the birth of the child, MFG rules state the child shall not be included in the AU size for determining the Maximum Aid Payment (MAP). **This means that the grant amount will not increase** [MPP 44-314.14](#).

1. MFG applies when the CW 2102, the "MFG Informing Notice", has been given and there has not been a break in aid as defined below:

a. The CW 2102 must be given to every applicant at intake and in carrying when adding a person.

b. The CW 2102 must be given to the recipient at every redetermination.

(1) A copy of the form must be signed, dated, and filed in Part 2 of the Eligibility folder. The worker will use the presence of this form to determine if the parent(s) were informed of the MFG rule at least ten months prior to the birth of the child.

(2) If the parent(s) refuse to sign the CW 2102, the worker must document the refusal to sign on the form and date the form. Indicate in the case comments in CalWIN that the parent was given a copy of the form and the rule was explained on that date.

(3) Worker has completed the Maximum Family Grant Checklist and decision has been reviewed by unit supervisor.

c. The AU has received written notice of the MFG rules at least ten months prior to the birth of the child, and

d. The AU has not had a break in aid for at least "*two consecutive months during the ten months immediately prior to the birth of the child.*"

B. A MFG child means the child, or children in the case of multiple births, is not included in the AU size for the purposes of determining the MAP amount for the AU [MPP 44-314.14](#).

C. MFG rules apply even if the parent in the home is not in the AU (an eligible non-citizen, a sanctioned parent, or a recipient of SSI, for example) [\(MPP 44-314.4\)](#).

D. Once a child has been determined to be MFG, MFG continues to apply until the AU has not received aid for at least 24 consecutive months. "Received aid" means received cash aid for himself or herself on behalf of his or her eligible child(ren). This includes:

- a. A parent who is sanctioned or ineligible by law and does not have a protective payee
- b. A needy caretaker relative included in the AU.
- c. If neither the parent nor any child has received cash aid in the past 24 months, the MFG rules will cease to apply to the child.

IV. MINOR PARENTS:

B. MFG rules apply to children belonging to the adult caretaker in the AU, including those parents who are sanctioned or ineligible by law. MFG rules only apply to a minor parent's child in certain circumstances:

- a. MFG rules do not apply to the child of a minor parent when the child is born prior to July 1, 2001.
- b. MFG rules apply only to children born to minor parents after July 1, 2001, and then only while the teen parent and his or her child(ren) receive aid in the AU of a senior parent. **Once the teen parent has his or her own case**, the MFG rule will not apply to those children born 10 months or less after the teen parent's own case has been granted and the teen parent has signed the CW 2102 informing notice [\(MPP 44-314.56\)](#).

V. 10 CONSECUTIVE MONTH DETERMINATION:

- A. The ten consecutive month determination is made as follows:
- a. A partial month (such as the month of application) counts as a month of aid when counting the ten consecutive months.
 - b. The worker will count backward ten months starting with the month before the birth as month one.
 - c. If a parent, such as a pregnant minor or adult, moves from one AU to another, each aided month is counted.

VI. EXEMPTIONS TO MFG RULE:

- A. The MFG rule shall not apply if [\(MPP 44-314.5\)](#):
1. The **child was conceived as a result of an act of rape**, as defined in Sections 261 and 262 of the Penal Code and the rape has been reported to a law enforcement agency, medical, or mental health professional or an organization that provides counseling to victims of rape prior to, or within three months, after the birth of the child.
 - a. A law enforcement agency includes federal, state, and local law enforcement agencies.
 - b. A mental health professional means a person who is provide counseling services.
 - c. The recipient shall provide written verification from one of the agencies, health professionals or organizations described above, that states that the incident of rape was reported and provides the date the report was made. The written verification does not need to be a copy of the report.
 2. The **child was conceived as a result of incest**, as defined in Section 285 of the Penal Code, paternity has been established or the following reporting requirements have been met.
 - a. The incest has been reported to a law enforcement agency, medical or mental health professional or an organization that provides counseling to victims of incest prior to, or within three months after the birth of the child.
 - b. The recipient shall provide written verification from one of the agencies, health professionals or organizations above that states that the incident of

incest was reported and provides the date the report was made. The written verification does not need to be a copy of the report.

3. There is verification that the **child was conceived as the result of a failed contraceptive** (intrauterine device (IUD), Norplant, or the sterilization of either parent.)

4. The **child was conceived while either parent was an *unaided* non-parent caretaker relative.**

a. An unaided non-parent caretaker relative is a non-needy caretaker relative for a child or children not his or her own.

5. The **child belongs to a minor parent and was born before July 1, 2001.**

6. The **child who belongs to a minor parent was born after July 1, 2001, and was previously designated as an MFG child** when born to a minor parent (nested teen) who was aided as a child in their senior parents' case **AND the minor establishes their own AU.**

7. The **child/ren is/are NOT living with either parent.**

8. Child was born after September 1, 1997 and **no adult in the AU received written notice of the MFG rule** at least ten months prior to the birth of the child.

9. Was previously designated an MFG child and **has not received aid for at least 24 consecutive months**, including time as an MFG child receiving Zero Basic Grant (ZBG).

10. Was born on or after September 1, 1997, but the **parent(s) have not received aid for 10 months prior to his/her birth.**

1.

11. Was born on or after September 1, 1997, and there was a **break in aid of at least two consecutive months in the 10 months prior to the birth of the baby.**

NOTE: Client's refusal to sign the acknowledgement on the bottom of the CW 2102 must be documented by the EW by making a notation on the top of the form along with the date. The worker must also make a case comment in CalWIN. The refusal to sign does not nullify the notification, documenting it however establishes the evidence of written notification.

V. INCLUDING THE MFG CHILD IN THE AU:

- A. The MFG child is considered eligible for, and a recipient of, CalWORKs aid including special needs ([MPP 44-314.6](#)):
1. The MFG child is included in the AU size for determining the MBSAC figure used in the Applicant Financial Eligibility Test.
 2. When an MFG child is born to a recipient AU, MAP does not increase to include the MFG child.
 3. The child is eligible for all CalWORKs related benefits such as special needs, including temporary homeless assistance, and child care benefits.
 4. The pregnancy special need is for the pregnant family member, not the unborn child. Although the newborn will be an MFG child, the pregnant woman is eligible for the pregnancy special need if she is aided. ([MPP 40-211.6](#)) **Note:** When discontinuing PSN, QR rules apply. Even when pregnancy ends mid-cycle, PSN must continue until end of current cycle.
 5. Income in kind calculations will not include the MFG child.
 6. As with any eligible child, the parent must cooperate with all Child Support requirements. Refusal to assign support rights for an MFG child makes the parent ineligible to aid. Failure or refusal to cooperate with Child Support results in the 25% financial penalty for failure to cooperate.
 7. A cash case must be opened or continued even if the only child in the case is an MFG child.
 8. MFG grant rules only apply to the MFG child when he or she is living with either or both of his or her parents. If an MFG child no longer lives with either parent, but with another eligible caretaker relative, MFG does not apply.
 9. If there is a change in the caretaker parent from one parent to another, MFG rules continue to apply.
 10. The child of a minor who is receiving CalWORKs will be subject to MFG rules only while the minor parent receives aid in the senior parent's AU. **Once the minor parent established his or her own AU, MFG rules no longer apply to his or her child.**

NOTE: When an MFG child moves from the home of one parent to another, or the caretaker parent in the home changes from one parent to another, MFG rules continue to apply. This is true although the second parent was not in the home at the time of the informing notice.

VII. CHILD SUPPORT:

A. Any support payments received by the AU, including those distributed by the Local Child Support Agency (LCSA) for the MFG child shall be given to the AU. These payments are exempt from the applicant financial eligibility test, the recipient financial eligibility determination and income from determining the eligible grant amount ([MPP 44-314.62](#)). (Note: Food Stamps rules for applying child support income may be different from CalWORKs).

1. Caseworkers must clearly identify an MFG child on the Child Support referral form.
2. Child support payments placed in a bank account for an MFG child count toward the AU's property limit.

VIII. OTHER MFG INCOME:

1. The Social Security or other government benefits paid to or on behalf of an MFG child based on the disability or retirement of an absent parent are considered child support and are exempt as such.
2. Other income of the MFG child, e.g. Social Security benefits based on the disability of the caretaker parent is not exempt and would be counted in accordance with existing income rules.
3. Death and/or survivors benefits are not considered child support for purposes of the MFG child as they are not based on an absent parent's disability or retirement. Death and survivor's benefits are not exempt; they are considered income and treated accordingly.

IX. INFORMING:

- A. All applicants and recipients of CalWORKs shall be notified in writing of the MFG rule and the impact the rule will have on future aid to the family. The CW 2102 shall be used for this purpose.

The initial informing stuffer was mailed to all CalWORKs recipients in July 1996 by the California Department of Social Services (CDSS). In order to establish the mailing list for receipt of the stuffer, CDSS used the MEDS system to identify active AFDC cases in the AFDC aid codes.

Should a question arise regarding whether a particular recipient received the TEMP 2102 during the July 1996 CDSS mailing, the following shall be evaluated to establish that proper notification occurred.

1. Establish that the recipient was an active AFDC recipient in July 1996.
2. Identify if there were any documented problems with the mailing address during the time of the CDSS mailing and that the recipient received his/her August 1, 1996 warrant.

Once these facts have been established and if the recipient did receive their August 1, 1996 warrant without any documented mail delivery issues, it will be determined that the recipient did, indeed, receive the mass mailing of the TEMP 2102.

- o **If it is determined that the client was not informed at any time of the MFG rule, the child will not be MFG.**

In August 2000, the CDSS once again mailed out a revised MFG informing notice, TEMP 2102, to the entire CalWORKs population via the same method as described above. The revised TEMP 2102 has a place for the adult head of household to sign indicating acknowledgement of the MFG rule and how it applies.

Effective August 2000, counties were instructed by the CDSS to inform all new recipients who would not have received the revised MFG informing notice through the August 2000 mass mailing, including those who eligibility was determined after June 2000.

- B. Applicants and or Recipients shall also be informed at intake and at time of recertification of CalWORKs Welfare- to -Work temporary waiver program requirements. The CW 2198, "CalWORKs Domestic Abuse Waiver Request Form", must be given to all applicants and recipients so that workers may discuss the need

for services and the potential to temporarily waive some of the CalWORKs program requirements.

X. DV WAIVERS of MFG RULE

INFORMING:

During the initial intake interview, at RRR, or during the development of the welfare to work (WTW) plan, it is the responsibility of the EW, or the ES to inform the client regarding the availability of DV services.

The purpose of this informing is to assist them in escaping or stopping future domestic abuse.

A. When domestic violence is declared in the home of an MFG child, exemption from the MFG rule shall be considered if the exemption will prevent further risk to the AU. This determination shall be made on a case by case basis ([MPP 42-715.5](#)).

1. To consider an exemption from the MFG rule, the adult(s) must be a recipient in the AU. When the AU adult(s) is timed out, sanctioned, undocumented, or otherwise ineligible for CalWORKs, the AU will not meet an exemption to the MFG rule.
 - a. The domestic violence situation must prevent the adult individual from obtaining employment, or participating in WTW activities. The DV situation must be of a nature to prevent the adult individual from meeting WPR. These individuals are encouraged to participate in WtW to the extent possible.
2. Verification of domestic violence from a third party is encouraged; however not required. If verification, such as a police report documenting the domestic violence cannot be obtained, a statement under penalty of perjury is sufficient.
3. A maximum of three months retroactive benefits may be granted from the date of when the request for DV waiver was made.
4. Retroactive benefits will be approved on a case by case basis and require Eligibility Manager Approval.

B. When an exemption to the MFG rule is considered, the EW shall:

1. Submit DV exemption requests to the Eligibility Manager as soon as request is received.
2. Document in CalWIN case comments the decision by the Eligibility Manager whether a DV exemption of the MFG requirement has been granted or not.
 3. Send CW 2199, "CalWORKs and WELFARE TO WORK DOMESTIC ABUSE WAIVER REQUEST DETERMINATION", to indicate approval or denial of the DV waiver request.
 4. If the MFG waiver is approved, immediately add the MFG child to the cash case. Give retroactive benefits for the MFG child for up to three months prior to the date the applicant/ recipient reports the past or present abuse.

XI. BREAK IN AID:

- XII. The MFG rule will not apply when there has been a break in aid of at least two consecutive months during the ten months immediately prior to the month of birth of the child. **Effective September 1, 2000** suspense and /or zero basic grant months occurring within the ten month break in aid, are also considered as months off aid and are to be counted toward the two month break in aid for MFG purposes.
- a. **ZBG Months:** Months in which the grant has been reduced to zero because of a penalty or overpayment.
 - b. **Break in Aid:** A break in aid is established when no member of the AU has received CalWORKs for two consecutive months in the 10 months prior to the birth of the child.
 - c. **Does the MFG rule Apply?:** EW's shall use the following MFG checklist, prior to establishing MFG status for any child born into any AU on or after September 1, 1997. [\(Link Checklist.\)](#)
 - d. **Is this child still an MFG child?:** EW's shall use the following MFG checklist for all new applications, and at RRR for all children previously determined to be MFG. [\(Link Checklist.\)](#)

XII. EXAMPLES:

Example #1:

Mother and daughter receive aid for more than ten months with no break. The daughter becomes pregnant and gives birth while still a minor (under age 18). Her child is MFG.

Mother and daughter receive aid for more than ten months with no break. The daughter gives birth at age 17. The child is MFG. At age 18 she is taken out of her mother's AU and placed in her own AU, with no break in aid. MFG status is lifted for the first child. Fifteen months after establishing her own AU, she gives birth to a second child. The second child is MFG, because it was born more than 10 months after the new case was established.

Example #2:

A child is born into an absent parent case which has received aid continuously for a year with no break. It is an MFG child. This child then goes to live with the father, who has never received assistance. Several months later, but less than 24 months, the father applies for aid for himself and the child. The child remains an MFG child.

Example #3:

Mother and children have received aid for several years. Father is in the home but sanctioned. A new baby is born 11/27/98. Father moves out, taking newborn, and applies for aid. The newborn meets the definition of a child born into a family receiving aid for 10 months or more without a break of at least two months. The child is an MFG child no matter which parent he lives with.

Example #4:

A mother and teenage daughter begin receiving CalWORKs in November 2000. They have a renewal in November 2001, at which time the senior mother receives and signs the CW 2102. The minor gives birth to a child on January 4, 2002. In reviewing the case, the worker cannot find a CW 2102 dated earlier than the November 2001 renewal. The child is not MFG, because an informing notice was not received at least ten months before the birth of the child.

Example #5:

A 17-year-old gives birth to a baby in October 2001. Her family received the CW 2102 in September 2000, so the baby is MFG. In January 2002, she turns 18 and is transferred to her own case. The baby is no longer MFG effective the first month that aid is paid in the new case.

Example #6:

Mother and daughter receive aid for more than ten months with no break. The daughter becomes pregnant at age 17. At age 18 she is taken out of her mother's AU and placed in her own AU, with no break in aid. Her child is not MFG. MFG status will apply to any future children she may have ten months or longer after establishing her own case.

Example #7:

Philip a CW recipient since October 1998, was provided and signed the CW 2102 at his RRR on November 2, 2000. On the October 2001, monthly report Philip reported the birth of another child with a date of birth of October 3, 2001. Since Philip had been provided a written copy of the CW 2102 at least ten months prior to the birth of the child, MFG would apply to this child, if no other exemptions apply.

Example #8:

Jill was on aid with David until 10/99, when the CW was discontinued. From 06/00- 10/00, David received aid with a non-needy Aunt. Jill reapplied for aid in 11/00 for herself and David. Jill had another child, Jessica, in 03/01. Does the MFG rule apply to Jessica?

No. The second AU with Mom and David did not exist ten months prior to the birth of Jessica. Jill & David's AU did not become effective until 11/00, four months before the birth of Jessica in 03/01. Therefore, Jessica was not born into an AU that received aid for at least ten consecutive months prior to the birth of the child.

Example #9:

Sonja and Ron are on aid with their child Amanda. Sonja becomes pregnant in 01/00. In 03/00 Amanda moves out of the home and into Foster care. Sonja and Ron's CW case is discontinued at the end of the month. Neither Sonja or Ron received aid for 04/00 or 05/00. Jessica is returned home on 06/01/00; they reapplied for CW and resumed aid effective 06/01/00. Sonja had twins in 10/00. Does the MFG rule apply to the twins?

No. The MFG rule does not apply to the twins because there was a two month break in aid, 04/00 and 05/00. No member of the AU received CW for two consecutive months in the ten months prior to the birth of the twins. Foster Care

payments are not considered "cash aid" for purposes of determining MFG application.

Example #10:

Brianna is on aid with her two children, John and Dylan in county #1 in 05/10. The AU has been on aid continuously since 05/09. Philip, John and Dylan's dad took custody of them in 06/10, and applied for and received CW in County #2 based upon Brianna's absence, effective 06/01/10. Brianna and Philip are unmarried. In 11/10, Brianna joined the AU in county #2, with her eligibility effective in 12/10. When she joined the AU, she was pregnant. Deprivation changed from the absence of Brianna to the unemployment of Philip. Brianna's baby was born on 03/15/10. Does the MFG rule apply?

Yes. the AU has not demonstrated that there is a two month break-in-aid of two consecutive months. The children never were off aid. Mom rejoined the AU in 12/10. The baby was born into an AU that received aid continuously for the ten months prior to the birth.

Example #11:

Dayna is in receipt of aid with her daughter, Alyssa since 12/08. Alyssa left the home and went to live with her grandmother in 12/09. Dayna received CW for Alyssa continuously through 12/09. Jean, the grandmother of Alyssa, received CW for her effective 01/10 through 07/10 at which time Dayna came back into the home and is pregnant. Dayna's child, Max was born 08/10. Is max considered MFG?

Yes. The AU has not demonstrated a break- in- aid in the 10 months prior to the birth of Max. Aid for the AU has been continuous since 12/08.

Example #12:

Mom was on aid with child #1 until 10/99, when case was discontinued. From 6/00-10/00, child #1 received aid with a Non-needy aunt. Mom reapplied for aid in 11/00 for self and child #1. Mom had child #2 in 3/01. Does the MFG rule apply to child #2?

No. The second AU with mom and child #1 did not exist ten months prior to the birth of child #2. That AU (mom and child #1) did not become effective until 11/00, four months before the birth of child #2 in 3/01. Therefore, child #2 was not born into an AU that received aid for at least ten consecutive months prior to the birth of the child. The MFG rule does not apply to child #2.

The fact that child #1 was on aid with an aunt from 6/00-10/00 does not change this case. That AU (child #1 and the aunt) is not relevant, as it began after mom and child #1 established a two month break-in-aid.

Example #13:

Mom and dad are on aid with two children. Mom becomes pregnant in 1/00. In 3/00 the two aided children move out of the home and into Foster Care. The AU was discontinued at the end of the month. Neither parent was aided for 4/00 or 5/00. The children were returned to the home on 6/1/00; cash aid was resumed, effective 6/1/00. The mom had twins in 10/00. Is the MFG rule applied to the twins?

No. The MFG rule does not apply to the twins because there was a two-month break-in-aid, 4/00- 5/00. No member of the AU received CalWORKs for two consecutive months in the ten months prior to the birth of the twins. Foster care payments are not considered "cash aid" for purposes of determining MFG application.

Example #14:

A mom is on aid with two aided children. She was inappropriately discontinued on 3/31/00, although she should have received aid for April and May. Mom and the kids went back on aid in June. The baby was born in 10/00. Does the MFG rule apply to this child?

No. In this case, the recipient had a two-month break-in-aid (4/00-5/00). The MFG cannot be applied to the parent and her child for this county-caused error, even if the county restores aid for those two months.

Example #15:

Mom and two children were on aid in county #1 in 5/00. The AU has been continuously on aid since 5/99. Dad took custody of the children on 6/1/00 and applied for aid in county #2 based upon absent mom. Aid was approved for father and the two children, effective 6/1/00. Mom and dad are unmarried. In 11/00, Mom joined the AU in county #2, with her eligibility effective 11/14/00. When she joined the AU, she was pregnant. Deprivation for the three children was changed to the unemployment of the father. Mom's baby was born on 3/15/01. Does the MFG rule apply?

Yes. The AU has not demonstrated that there is a break-in-aid of two consecutive months. The children were never off aid. Mom rejoined the AU in 11/00 and was included in the AU (MPP Section 82-820.33, mandatory inclusion for a parent of

recipient children). The baby was born into an AU that received aid continuously for the ten months prior to the birth (5/00).

Example #16:

A pregnant woman has received aid for herself and two children for two years. The two children are removed from her home. Because she was in her third trimester, the woman continued to receive aid for herself (a MAP of 1) and pregnancy special needs. Does the MFG rule apply when the baby is born?

Yes. The MFG rule applies to child #3. Mom continued to receive a MAP of 1 and special needs after the children were removed up to the time of the birth of her child. Mom has not demonstrated that she had a two continuous month break-in-aid in the ten consecutive months before the birth of the child.

Example #17:

If a pregnancy occurs due to the failure of Depo-Provera, would this child meet the criteria for being exempt from the MFG rule?(MPP Section 44-315.53)?

Yes. Depo-Provera can be considered equivalent to Norplant for MFG purposes. This is a sterilization method by injection that is administered by a physician to prevent pregnancy. Therefore, this child would not be MFG once the county receives medical verification that the pregnancy occurred as the result of failure of this sterilization method.

Example #18:

A woman on aid was sterilized. She subsequently had a child and was given an MFG exemption for a failed contraceptive. She is currently pregnant and again claiming an exemption for this second child because of the failure of the same prior sterilization. Is this second child also exempt from the MFG regulations?

The woman must provide medical verification of her sterilization status after the birth of the first child. The MFG rule would apply if her physician informed the woman that the first sterilization had failed and she would need other birth control methods to prevent pregnancy in the future. However, the MFG rule would not apply if her physician indicated that a second sterilization or other birth control methods were not necessary to prevent future pregnancies.

Example #19:

A mom went on aid with two children in 1997. The children's father was not in the home at the time of application. In 5/99, the father became the caretaker for the

children when mom left the home. The county did not provide the father with a copy of the MFG informing notice when he became caretaker of the children in 5/99. In 2/00, mom resumed her duties as caretaker and the father left the home. When Mom left the home again in 6/00, the father applied to be caretaker for the children, with aid effective, 6/1/00. He was provided a copy of the MFG informing notice in 6/00. In 9/00, father's girlfriend who was pregnant moved into the home. The father and girlfriend's child was born on 10/28/00. Is the MFG rule applied to this child?

No. The MFG rule would not be applied to the child of the father and the girlfriend. Neither the father nor the girlfriend had been on aid for ten months before the birth of their child. Additionally, the father had not received a copy of the informing notice at least ten months before the birth of the child.

Example #20:

A child was born into an existing AU in county #1 where mom was on aid for more than ten months prior to the birth of the child. The MFG rule was applied to the child. The child now lives with her father in county #2. Does the MFG rule still apply? Also, what if the father was not previously on aid and had not been notified of the MFG rule?

Yes. The MFG rule would be applied if county #2 can document that the AU (mom) was appropriately notified of the MFG rule based on information from county #1, even if the other parent (father) was not an AU member when the written notice was sent to the AU. The MFG rule applies because the child was born into an AU that had been receiving aid for the ten months prior to the birth of the child. When the child went to live with the father, the MFG rule continues to apply.

Example #21:

Can the MFG rule be applied to the child born to an excluded parent, i.e. an undocumented alien or a State Supplemental Security Income (SSI) recipient?

Yes. MPP Section 44-314.14 specifies that the MFG rule is applied to parents who received aid on behalf of his/her children, even if they do not receive aid for themselves. Therefore, the MFG rule applies to the child of a parent receiving SSI or an undocumented parent if the child is a citizen.

Example #22:

A family received aid in another state from 10/99 to 6/00. They moved to California and went on cash aid, effective 8/1/00. The mother was pregnant when she moved to California. A child was born in 2/01. Does the MFG rule apply?

No. Because a month on aid in another state is never considered when counting the ten consecutive months on aid (MPP Section 44-314.14)

Example #23:

An applicant mom became pregnant in the month of application (2/00), the month in which she was provided the informing notice. Due date was 11/28/00. The baby was born prematurely on 10/20/00. Do we apply the MFG rule by the letter of the law (10 months after receipt of written notification of the MFG rule) or the intent of the law (not to increase the MAP while a recipient is getting cash aid).

The MFG rule is applied by the letter of the law. Both the statute and regulations specify that the client must have received written notice of the MFG rule at least 10 months before the birth of the child. In this case, the child was born prematurely in the 8th month. The MFG rule cannot be applied to this child.

Example #24:

How is "the ten consecutive months prior to birth" determined for MFG purposes? To apply MFG, count backward ten months starting with the month before the child's birth. For example, if the child was born in 01/01, begin counting backwards from 12/00, the month before the child's birth date. The 10th month would be 3/00.

Example #25:

Is the month of application counted as a month in which aid was received?

Yes. A partial month (month of application) does count as a month in which aid was received. (MPP 44-314.31 and 44-314.32).

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55 - Aid Payments

CalWORKs Eligibility Handbook	Semi-Annual Reporting - SAR 7 55-23
	Effective 5-26-16

55-23 Semi-Annual Reporting (SAR 7)

The SAR7 is a semi-annual report that recipients, except for AR/CO clients, submit in the last month of the semi-annual reporting cycle. It is used to determine the amount of cash aid and CalFresh benefits to be issued in the next six months.

Elimination of Change Reporting in CalFresh

Senate Bill 79 (SB79) established that the California Department of Social Services (and county welfare agencies) are no longer required to impose Change Reporting (CR) on certain CalFresh households and federal regulations [7 CFR 273.12(a)(5)] allow the option to assign all households to SAR.

HSA decided to implement this policy change effective June 1, 2016 and all households will be assigned to SAR to simplify reporting requirements that were previously designated as CR.

Households no longer requiring CR

- Elderly/Disabled
- Homeless
- Migrant Seasonal Farmworker

Good Cause for Failure to Submit a SAR7

There may be some households affected by the change in reporting that may have some difficulty with the conversion and transition to SAR. To lessen the possibility of

potential problems, the “extenuating circumstances” provision under the good cause regulations (MPP Sections 40-181.23 and 63-508.64) should be applied for the first 12 months.

Good cause provides for discontinuances due to non-submission of the SAR 7 to be rescinded with no loss of benefits when the household cannot reasonably be expected to fulfill his or her reporting responsibilities due to factors outside of his or her control.

Refer to the following guidelines when implementing good cause:

- Good cause may be granted if the household submits their SAR 7 after the extended filing date, but no later than the last day of the month following termination.
- After the twelve-month transition period for the elimination of change reporting, if a household submits its SAR 7 after the extended filing date, but in the month following termination, the CWD must apply the Restoration of Aid rules as described in ACL 12-25, page 18.
- If a household submits their SAR 7 later than the last day of the month following termination, the household must file a new application if they wish to continue to receive benefits.
- Eligibility staff must clearly document in the case record why good cause has been approved.

Example 1: A homeless household in a C-IV county converts from CR to SAR effective July 1, 2016. The household was initially certified in September 2015 and is due for recertification in August 2016. The household’s first SAR 7 is due in February 2017. If the household submits their SAR 7 in March 2017, but after the extended filing date, good cause will be approved and documented in the case record and benefits will be restored effective March 1, 2017 with no break in aid.

Example 2: Same scenario as described above. If the household submits the SAR 7 in April 2017, the CWD will discontinue the case for failure to submit a complete SAR 7 and the household must reapply for benefits.

Example 3: Same scenario as described above. The household submits the first SAR 7 on time. The household is then recertified until August 2017. Their next SAR 7 is due February 2018. Because this is beyond 12 months from conversion for this household, good cause will not be applied for a late SAR 7 unless the household meets existing criteria for good cause.

Conversion Calendar

For conversion and certification periods for submission of SAR7 for affected households, click on this link: <http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2015/15-90.pdf>

Reasonable Anticipation of Income and Expenses Reported on the SAR 7

The SAR 7 is intended to capture income and eligibility information for the SAR Data Month. It is also intended to capture any reasonably anticipated income and expense changes for the next SAR Payment Period that are known during the SAR Data Month.

Therefore, the county shall presume that all income and eligibility information reported on the SAR 7 was known by the recipient in the Data Month. However, if other information received by the county indicates that the recipient-reported changes on the SAR 7 were not known to the recipient until after the Data Month, the change shall be treated as a voluntary mid-period report and acted upon as such.

Determining Reasonably Anticipated Income

Income shall be considered to be reasonably anticipated if the county determines that:

- (a) The income has been or will be approved or authorized within the next SAR Payment Period, or the household is otherwise reasonably certain that the income will be received within the SAR Payment Period; and
- (b) The amount of the income is known; and
- (c) The start date of the income is known.

If necessary, the county may require the recipient to provide one or more months of the previous period's income when the county needs more information to determine what income is reasonably anticipated for the next SAR Payment Period.

That portion of the AU's income which is uncertain or cannot be reasonably anticipated, in accordance with Section 44-101(c)(1)(SAR), will **not** be counted when determining income eligibility and cash aid.

The reasonably anticipated monthly income shall be used to determine cash aid for the SAR Payment Period.

Determine if Income Will Continue or Be Different

The county shall determine whether the reasonably anticipated monthly income is expected to be different from the income reported for the SAR Data Month for one or more months during the next SAR Payment Period or whether the monthly income reported for the SAR Data Month is expected to continue during the next SAR Payment Period.

Again, all applicable disregards for income types of CalWORKs and Food Stamps remain unchanged under SAR.

Refusal to assist to provide information:

If the client refuses to assist in providing the required information (e.g. refuses to sign a release to contact the employer, if necessary) or fails to provide information necessary to determine continuing eligibility, the EW will discontinue benefits at the end of the SAR period after providing a 10-day notice.

Reasonable attempt to cooperate:

If the client is attempting to cooperate to best of his/her ability, yet is unable to provide information that would assist the EW in projecting future income with reasonable certainty, the client will not be considered to have "failed to cooperate" and the case will not be discontinued for that reason.

Questions asked on the SAR 7, and actions by workers depending on the answers to the questions:

Information Required on the SAR 7

Clients who are subject to Semi-annual Reporting must provide information and answers to all questions and items on the SAR7 and declare, under penalty of perjury, that they have truthfully reported all required information.

Each item on the SAR7 pertains to CalWORKs and/or CF eligibility. Clients will be required to report all income received in the SAR Data Month, any changes in household composition or property since the submission of the last RRR, and any changes in income the client anticipates will occur in the upcoming SAR Payment Period.

Additionally, all existing required verification must also be submitted with the SAR7. Verification rules apply.

A SAR 7 Addendum is mailed with every SAR 7 that is system-generated. Staff must include the SAR7 Addendum any time a SAR7 is requested and then mailed to a client.

Request to Stop Benefits

Client response:

- a. Has the client requested aid to stop?
- b. Has the client requested certain aid programs be stopped?
- c. No notation in this area means the client is not requesting discontinuance.

EW Responsibility:

- a. Get clarification from client.
- b. Discontinue the program(s) per the client's request
- c. Document in CalWIN case comments.

Part 1: What Happened in the Data (Report) Month?

Question #9: Did anyone get money from a job or training program or any other source in the report (data) month?

Client Responsibility:

- a. List the name of the person who received the income.
- b. List the name of the employer.
- c. List the hours worked by month
- d. List the gross amount of the check/income received.
- e. List the date the check/income was received.
- f. List the number of days and hours worked or attended training.

g. Verify income.

EW Responsibility:

a. Are all pay stubs or other proof of earnings attached? If not, SAR7 remains incomplete until they are received.

b. Has all income received during the Data Month been listed? If not, ask client for missing information. SAR7 remains incomplete until they are received.

NOTE: Only income received in the Data Month is to be reported and verified.

c. Did the client report income for each pay period in the month? If not, ask client to submit missing pay period information. SAR7 remains incomplete until they are received.

d. Is the client reporting tips (if applicable)? Budget tips as income.

e. Is the client reporting "gross" income? Budget gross income only.

f. Is information sufficient to reasonably anticipate future income? If not, contact client to ask for additional information. Reasonably anticipated income requires EW to have a discussion with client and verifications have to be received before budgeting income for the SAR period. If information provided by the client is not reasonable, use all other information including past income pattern to budget income for the SAR period. Communicate your reasons for the income budgeted to the client and case comment on them in CalWIN.

g. Make collateral contacts, if necessary. Get appropriate releases signed by the client before making the contact. Contacting employers is a sensitive issue, confer with the client first. Client asking employer for income information is preferred. Accept a signed affidavit if client is unable to get income information.

Question #10: did anyone get money from any other source in the data (report) month?

Part 2: What Has Happened Since Your Last Semi-Annual Report?

Question #1: Has anyone moved into or out of your home (including newborns), or did you move in with someone else? Did client move in with somewhere else?

Client Responsibility:

- a. List the name of the person who moved into or out of the home.
- b. List the relationship of that person to the client.
- c. Explain what/why the change occurred.
- d. List the date of the change.

EW Responsibility:

- a. Is there a person who needs to be added to or deleted from the AU/household? If so, take the action and case comment.
- b. Does the change affect the current deprivation? If deprivation no longer exists, discontinue the case with timely notice.
- c. Does the change affect the CF household? CF rules apply – make the change and reevaluate CF.
- d. Does this change result in in-kind income for the AU? Budget any in-kind income accordingly and case comment.

Question #2: Address Change: Fill in this section ONLY if you have moved or have a new mailing address.

Client Responsibility:

- a. If a move has occurred, has the client provided the new address, phone number, and the date of the move?
- b. Provide proof if necessary. (see FS PIM 00-05 for procedures about verification of shelter)

EW Responsibility:

- a. Verify new address only if questionable.
- b. Change address in CalWIN to respond to the reported change, new address or only mailing address
- c. If the mailing address is different from the physical address, obtain clarification. Update both address of residence and mailing address with new information provided.
- d. Complete form 8035 if post office boxed is being used for mail. (This form requires Section Manager signature). Follow up on getting manager signature on form 8035.

Question #3 If you have moved did your housing cost change or did you incur new housing costs since your last report?

Client Responsibility:

- a. Report all changes in housing cost
- b. Submit verifications for new housing cost as requested

EW Responsibility:

- a. Has the household composition changed for CalWORKs or CalFresh? If so, make the changes and reevaluate programs.
- b. Contact client for verification, if necessary.

- c. Is verification of rent provided? (only necessary if questionable per FS PIM 00-05) Budget change in rent amount – end date previous rent amount or CalWIN will add past and current rent amounts together leading to CF error.
- d. Contact the client to determine whether to use the actual utilities or Standard Utility Allowance (SUA). If utility bills are not in the client's name, determine the reason. Apply SUAS once each cycle to maximize client's CF benefits.
- e. Is there a potential for in-kind income? Budget income-in-kind accordingly.
- f. Complete the shared housing form, if necessary (Form 2509). Every time there is a change in HH ask client to submit form 2509.

Question #4: Has anyone in your home been convicted of a drug-related felony for possession, use or distribution of a controlled substance(s) or has anyone been avoiding or running from the law to avoid any felony prosecution, custody, or confinement after conviction, or is anyone in violation of probation or parole? If convicted of a drug-related felony, give date of conviction. As of 4/1/2015 excluded drug felons become eligible as long as they comply with the conditions of their probation or parole, if applicable, including participation in a government recognized drug treatment program, if required (ACL 14-100)

Client Responsibility:

- a. List the full name of the affected person.
- b. Provide the date of the event.

ES/EW Responsibility:

- a. Verify the individual is a member of the cash aid or CF household.
- b. Verify Drug/Fleeing Felon status.
- c. Apply Drug/Fleeing Felon rules and regulations.

As of 4/1/15 Drug felons are eligible for CW and CF benefits. Refer to the CalWORKs handbook sections 51-75.1 "Eligibility for Drug Felons Convicted after 12/31/97" and Food Stamp Handbook sections 81-1 "Household Concept" and 82-9.3 titled "Excluded Household Members"

Question #6: Did anyone, who gets CalFresh benefits have a change in the amount of child support they have to pay since last reported?

NOTE: No deduction is allowed if the court order has not been verified. Current and arrearages are allowed for a child in or out of the home

Client Responsibility:

- a. List the name of the person who paid the support.
- b. Report the amount of support paid.

EW Responsibility:

- a. Verify that proof of the court ordered child support is in file.

Question #7: Did anyone who gets CalFresh benefits, pay for the care of a child, a disabled person or other dependent while working, seeking work, or attending school or training?

NOTE: While CalWORKs will continue to pay for child care through the Children's Council, dependent care deductions, if paid by the CalFresh household, are an allowable deduction. This situation may come up in mixed households.

Client Responsibility:

- a. If expenses were incurred, list the name of the person(s) who received care and the amount paid.
- b. Provide verification.

EW Responsibility:

- a. If expenses were incurred, verification must be provided. If verification is not provided, the deduction is not allowed. The SAR7 is considered complete, but the EW should attempt to obtain verification.
- b. The hours claimed should coincide with the reported number of hours the client worked, sought work or attended school and training, with appropriate travel time allowed.

Question #8: Did anyone buy, get, sell, trade or give away any property?

Client Responsibility:

- a. List the name of the person or people who acquired or disposed of the property.
- b. Indicate the type of property and its value. Evaluate in terms of transfer of property regulations, if appropriate.
- c. Provide verification as needed.

EW Responsibility:

- a. Determine whether or not the household is still property eligible.

- b. Did the AU receive Fair Market Value for the property if it was disposed? If not, establish the FMV and budget accordingly.
- c. Use current regulations with regard to property verification.

Question #11: Have any of the following happen to someone in your household?

- Married, divorced, or separated, or is in a domestic partnership?
- Became pregnant, had a baby, aborted or miscarried?
- Became disabled or recovered from a disability or major illness?
- Citizenship or immigration status change, got a new card, form, or letter from USCIS?
- Started, stopped or changed health, dental or life insurance benefits, including MediCare coverage?
- Student age 16 or older started or stopped school or college. You may claim costs of tuition, school transportation, etc.
- Started or stopped working, refused a job or training, number of hours worked or in training went up or down, or went out on strike?
- Had a change in the amount of time caring for /had custody of their child(ren)
- Started or stopped getting In-Home Supportive Services
- For cash aid only: Child(ren) ages 6-17 stopped or started attending school regularly? (do not require school verification)

- Had somebody pay for all their housing, food, clothing or utility costs

Other

Client Responsibility:

- a. List the name and relationship of the person(s) who expects the change.
- b. Provide an explanation of what occurred
- c. If applicable, provide the dollar amount.
- d. List the date of the change or the expected change.
- e. Verify if appropriate.

EW Responsibility:

- a. Does the information provided require the EW to take an action? If so, take the appropriate action and case comment.
- b. Does the reported change affect deprivation, property or income eligibility? If so evaluate if client is still eligible for cash aid and CF benefits or discontinue as appropriate. Case comment on the action and reasons the action was taken.
- c. Is there potentially a new source of income? If so, contact client and discuss start date and if it is reasonable that the income will continue during SAR period. Budget any reasonably anticipated income. Case comment on action taken, and reasons for action taken.
- d. Did care and control of the child change? If so, client may become ineligible. Discuss with client care and control. If client no longer has care and control discontinue case with timely notice. Establish overpayment/over issuance if timely notice cannot be given.
- e. Is there income-in-kind? Budget any income-in-kind.

- d. Review verification. Request any missing verifications.

Part 3: What Changes to Do Expect in the Next Six Months?

Prospectively budget income and expenses. Discuss with client if any of the information provided above is reasonably anticipated to continue or do they anticipate a change. Follow prospective budgeting rules for changes in income and expenses.

Question #9 & #10 (income) question #5 (Medical cost) & #7 (Child care cost not paid for by CalWORKs) (expenses): Do you expect changes in income or expenses (except for housing and utility costs) in the next six months?

Client Responsibility:

- a. List the name and relationship of the person expecting the change.
- b. Provide information on the anticipated expense(s) or source of income.
- c. Provide an explanation as to why a change is anticipated.
- d. List the anticipated dollar amount for the next 6 months.
- e. Verify, if possible.

EW Responsibility:

- a. Does the information provided require the EW to take an action? Take the action and case comment.

- b. Is there a change in deprivation, property or income eligibility? Discontinue if deprivation ended, client is over property or income limits.
- c. Is there potentially a new source of income? Explore with client to determine if the income will reasonably continue. Budget income according to prospective budgeting rules.
- d. Review verification with collateral contacts if possible. Accept an affidavit if neither client nor you can get the information from collateral contact. Case comment, the reason why the affidavit was accepted in lieu of verification.

Certification/Penalty of Perjury Declaration

Client Responsibility:

- a. Sign and date the SAR7.

For CalWORKs, if both parents are in the home, both parents are required to sign and date the SAR7, including a parent who is on SSI or is not being aided.

EW Responsibility:

- a. Have all the required persons signed the SAR7? (Parents, natural or adoptive, of the aided children, a cash aided spouse of a parent, any other caretaker relative living in the home, an interpreter or other person helping complete the SAR7, and/or a witness to a mark.)
- b. Do all signatures have the date signed beside them?

Reminder: The SAR 7 will **not** be considered correct if it is dated **prior** to the first day of the Submit Month.

Timeliness

The due dates, county actions for late or incomplete SAR7s, and timing of county actions remain unchanged under SAR rules.

The SAR7 is:

- Due by the 5th day of the month.
- Considered timely if it is received by the EW by the 11th calendar day of the SAR Submit Month
- Reminder: The SAR 7 will not be accepted prior to the first day of the SAR Submit Month.
- The SAR 7 is considered late if it is received after the 11th day of the SAR Submit Month

The EW is required to make attempts at personal contact with the client to obtain the SAR 7. If the SAR 7 is not received by the 11th calendar day of the SAR Submit Month, or the SAR 7 is received but determined to be incomplete, the EW will, on the 12th of the month:

- Send an X letter.
- Send a Balderas notice for X letters.

A automated call system will call the client's listed phone number in CalWIN (importance of updating phone numbers in CalWIN at every client contact) and record the outcome of the call or attempted call in CalWIN as case comment.

If the client provides the EW with a complete SAR7 after the 11th calendar day of the SAR Submit Month, but on or before the first working day of the next month (known as the “extended filing date”), the EW will rescind the cash aid and FS discontinuance and restore benefits. The client’s SAR cycle remains unchanged.

Information reported on SAR 7 leads to decrease in benefits

If information reported on a late SAR7 results in a decrease in benefits, and a 10-day notice cannot be provided, benefits will be restored at the previous higher level. An OP/OI will be established for the first month and action taken to decrease benefits in the second month of the next quarter or as soon as 10-day notice can be provided. This means there will be a mid-period decrease of benefits in the SAR payment period.

EXAMPLE: An AU/household of three is in the SAR period designated as May through October (the upcoming SAR Payment Period is November through April). The AU’s grant amount is \$670.- (the maximum amount allowed for a non-exempt AU of three).

The SAR7 is due by October 5th. When the SAR7 is not submitted by October 11th, the EW sends an X letter on the 12th of the month indicating a October 31st discontinuance date, and a Balderas notice at the same time. MOTHER submits a complete SAR7 on October 29th. On the SAR7, mother indicates that earnings from her part-time job will increase and the increase is expected to continue for the next six months.

County Action: Based on the new income the AU/household expects to receive, the EW determines that the cash grant should be reduced to \$500 and FS benefits should be reduced as well per month beginning with the next SAR Payment Period. The EW does not have time to provide the AU/household with a 10-day notice of decreased benefits effective November 1st. Therefore, November benefits must be released to the AU/household at the previous SAR period level for cash aid and for the CF benefits.

The EW will reduce the AU’s benefits to \$500 cash aid and reduce CF benefits effective December 1st. A cash aid O/P and a FS O/I will be established for the amount of October benefits that mother was not entitled to receive

Information reported on SAR7 leads to increased benefits

If information reported on the SAR7 results in an increase in benefits and the EW cannot increase the benefits by the first day of the first month of the next SAR Payment Quarter, a supplement will be issued for that month and benefits increased for the remaining months of the SAR Payment Period.

The 10-day noticing requirement does **not** apply to an increase in benefits.

EXAMPLE: The case consists of mother and two children, aged 11 and 12. The designated SAR Payment Period is January through June. (The upcoming SAR Payment Period is July through December.) The AU's grant amount is \$300. The household's CF allotment is \$100. The SAR7 for the current SAR Data Month is due by June 5TH. When the SAR7 is not submitted by June 11TH, the EW sends an X letter on the 12th of the month indicating a June 31st discontinuance date, and a Balderas notice on the same date. Mother submits a complete SAR7 on June 29th. On the SAR7, mother indicates that she has been laid off from her job on June 15th and received her last check the same day.

Due to mother's loss of earnings, the EW determines that the cash grant should be increased to \$670 (the maximum amount allowed for an AU of three) and CF benefits should be increased per month beginning with the next SAR Payment Period. The EW will increase benefits effective July 1. The 10-day noticing requirement does not apply in this example, as it is a positive action. The late SAR 7 would also be considered a voluntary mid-period report, and a supplemental for June issued, if appropriate.

Determination of Aid Based on Mid-Period Changes

When a recipient mid-period report or a county initiated action changes the amount of cash aid, except as provided in Section 44-316.312(a)(3) (SAR), the county shall determine the grant amount by determining the monthly income that is reasonably anticipated for each remaining month of the SAR Payment Period. The county shall use the reasonably anticipated monthly income to calculate cash aid for the remaining months of the SAR Payment Period.

Discontinuance due to failure to submit SAR7 timely

Benefits will be discontinued effective the last day of the SAR Submit Month if the client fails to submit a complete and correct SAR7 by the first working day of the next month. The client must reapply for aid unless good cause is established.

Completeness

The completeness criteria for the SAR7 remain unchanged from the CW7/SAWS7 completeness criteria.

If the SAR7 is received but determined to be incomplete, the EW will return the incomplete SAR7 to the client with a Y hold notice.

What Must Be Reported on the SAR 7?

For both CalWORKs and the CalFresh programs, the SAR 7 will be considered complete if:

- The form is signed and dated no earlier than the first day of the SAR Submit Month.
- All questions and items are fully answered and the information on the SAR 7 together with the attached documentation provides sufficient information to allow for the determination of eligibility and/or benefit levels; and
- Required verification is provided.
- All income received in the SAR Data Month is reported and verified.

- Any change in household composition or property since the submission of the last SAR 7 is reported and verified, if appropriate. This includes information the client voluntarily reported in mid-period.
- All changes in income the client anticipates will occur in the next 6 months are reported.
- If items pertaining to one program's requirement that are not completed on the SAR 7, the SAR 7 will be considered incomplete for that program only. It will be considered complete for the other program.

EXAMPLE: Two-parent family receiving both CalWORKs & CF benefits submits a SAR7 signed only by the mother. The SAR7 is considered incomplete for CalWORKs because both parents are required to sign. It is considered complete for CalFresh because only the Head-of-Household is required to sign.

EWs must make sure that the changes that are reported in any mid-period report are reflected on the next SAR7. If the next SAR7 submitted by the participant does not contain changes reported mid-period, the EW will take action to resolve the discrepancy. The EW will first attempt to contact the participant for clarification. If the EW is unable to contact the participant, the SAR7 will be considered to be incomplete. Staff will take required action for an incomplete report.

To calculate benefits using reasonably anticipated income provided by the client on the SAR 7, the EW will use the income reported from the data month and budget it for the SAR period.

Income shall be considered to be reasonably anticipated if the county determines that:

- a. The income has been or will be approved or authorized within the next SAR Payment Period, or the household is otherwise reasonably certain that the income will be received within the SAR Payment Period; and
- b. The amount of the income is known; and

c. The start date of the income is known.

If necessary, the county may require the recipient to provide one or more months of the previous period's income when the county needs more information to determine what income is reasonably anticipated for the next SAR Payment Period.

That portion of the AU's income which is uncertain or cannot be reasonably anticipated, in accordance with Section 44-101(c)(1)(SAR), will not be counted when determining income eligibility and cash aid.

The county shall determine whether the reasonably anticipated monthly income is expected to be different from the income reported for the SAR Data Month for one or more months during the next SAR Payment Period or whether the monthly income reported for the SAR Data Month is expected to continue during the next SAR Payment Period.

For cash aid:

- Average the income reported on SAR 7 for the data month if it is weekly or bi-weekly income.

No change in anticipated income over SAR7 period:

- If EW agrees:
 - a. that the reported income for the data month will not change in the SAR7 period or
 - b. client reports an upcoming change in anticipated income, however EW determines that the income reasonably will not change, or
 - c. AU anticipates a change in income and the frequency of pay and the amount of pay is known and is anticipated to remain the same over the SAR7 period then use the average monthly income from the data month for the SAR7 period

Weekly/Bi-Weekly Payments

Under the following circumstances the county shall add weekly or bi-weekly (every other week) Data Month income amounts reported on the SAR 7 or the SAWS 2 and

divide that total by the number of pay periods in the Data Month to arrive at an average weekly or bi-weekly income amount to which the conversion factor (see Section 44-315.315(b)) shall be applied:

An AU reports on the SAR 7 that it is paid on a weekly or bi-weekly basis and indicates that it anticipates changes in income in the upcoming SAR Payment Period, but the county determines in its follow-up review that the AU's reasonably anticipated income in the next SAR Payment Period will not change from what was reported in the Data Month on the SAR 7 or SAWS 2; or

An AU reports on the SAR 7 or SAWS 2 that it is paid on a weekly or bi-weekly basis and indicates that it anticipates changes in income in the upcoming SAR Payment Period and the new amount is known and the frequency of pay is anticipated to remain the same for the SAR Payment Period and the county is in agreement with the AU's report of the change in income.

Example 1: The recipient reports on the SAR 7 that four weekly paychecks were received in the following amounts: \$115, \$100, \$135, and \$95. The recipient also indicated on the SAR 7 that his/her income is not expected to change during the next SAR Payment Period compared to the income reported on the SAR 7. The county will add the four weeks of income together ($\$115 + \$100 + \$135 + \$95 = \$445$), divide by four ($\$445/4 = \111.25) and then factor the resultant amount by 4.33 ($\$111.25 \times 4.33 = \481.71) (use the appropriate conversion factor for the payment frequency) to arrive at the monthly income amount for the next SAR Payment Period. If five pay periods were reported in the Data Month on the SAR 7, the county will add each week together and divide by five and then factor the resultant amount by 4.33.

Example 2: A recipient indicates on the SAR 7 that weekly income of \$100 was received in the Data Month and explains on the SAR 7 that this income amount will not continue during the upcoming SAR Payment Period because the recipient hopes to get a new job soon but has no firm offer. Due to the speculative nature of the new job, the county determines that the income reported in the Data Month on the SAR 7 is reasonably anticipated to continue during the next SAR Payment Period. Therefore, the county would apply the conversion factor of 4.33 to the \$100 weekly amount to arrive at the monthly income amount of \$433 for the next SAR Payment Period. (In this example, because the \$100 weekly amount remains the same for each pay period, the step requiring that the weekly amounts be added together and divided by the number of pay periods is not necessary.)

Example 3: The SAR Payment Period is January through June. A recipient indicates on the May SAR 7 that bi-weekly income of \$200 was received in the Data Month and explains on the SAR 7 that this income amount will increase to a bi-weekly amount of \$250 beginning in the Submit Month of June and will continue at that amount. The county agrees with the recipient's SAR 7 information and applies the 2.167 conversion

factor to the \$250 bi-weekly amount to arrive at the monthly income amount of \$541.75 for the next SAR Payment Period.

(In this example, because the \$250 bi-weekly amount remains the same for each pay period, the step requiring that the bi-weekly amounts be added together and divided by the number of pay periods is not necessary.)

Example 4: The SAR Payment Period is January through June. A recipient indicates on the June SAWS 2 that their current weekly income of \$150 will only continue through August, when their summer job will end. The county agrees with the recipient's SAWS 2 information and applies the 4.33 conversion factor to the \$150 weekly amount to arrive at the monthly income amount of \$649.50 for the months of July and August. No income will be used for the months of September through December.

Budgeting reasonably anticipated income:

- The conversion factors can only be used if weekly or bi-weekly payments are reasonably anticipated to continue throughout the SAR Payment Period.
- Monthly Payments monthly (two times a month) and is expected to continue, the county shall use the total monthly income amount reported on the SAR 7 or the SAWS 2 for the SAR Data Month to calculate cash aid for the next SAR Payment Period. The conversion factors shall not be used for income that is received monthly or semi-monthly.
- Add the reasonably anticipated disability based unearned income for each month.
- Apply all applicable disregards for each income type to the averaged monthly income amounts to generate an average net non-exempt income.
- Add the net non-exempt income of each income type together to determine the full net non-exempt income for the AU/household.
- Subtract the total average net non-exempt income from the applicable MAP.
- The result is the benefit amount for the upcoming SAR Period.

Change of anticipated income over the SAR period

For income that is reasonably anticipated to change during the SAR Payment Period, the current monthly income amount shall be used to calculate the grant for the months in which it is reasonably anticipated to be received. When a change in income is reported, the new amount of income shall be used to calculate the grant for the months of the SAR Payment Period in which it is reasonably anticipated to be received.

If this income is paid on a weekly or bi-weekly basis, the county shall convert the income into a monthly amount as described in Section 44-315.315(a)(SAR) to compute the reasonably anticipated income to use for each month of the SAR Payment Period.

Example: A recipient is in a January through June SAR Payment Period. The recipient indicates on the June SAR 7 that weekly income of \$100 per week was received in the SAR Data Month and that this income will increase to \$150 per week beginning in August.

The \$100 weekly income will be converted to a monthly amount ($\$100 \times 4.33 = \433) and used to determine the benefit amount for the month of July.

The \$150 weekly income will be converted to a monthly amount ($\$150 \times 4.33 = \649^*) and used to determine the benefit amount for the remaining months of the SAR

Payment Period (August through December).

*50% Earned Income Disregard and Net non-exempt income must be rounded down to the nearest dollar amount per MPP Section 44-315.34.

Income Expected to Fluctuate after Data Month

If an AU/household's monthly income fluctuates or they expect the income received in the Data Month to change in the upcoming SAR Payment Period, the CWD must attempt to find out the amount of income the AU/household reasonably expects to receive, in order to determine what income, if any, can be reasonably anticipated and used in the next SAR Payment Period's benefit calculation. Only that portion of income that the AU/household reasonably anticipates it will receive can be used in the benefit calculation.

New income cannot be anticipated unless the AU/household is reasonably certain of the amount of income and the start date. If an AU/household reports that they expect their income to change or stop, but are uncertain of when or by how much, the CWD cannot reasonably anticipate this change. However, if the recipient states that the Data Month income is not typical, explains why, and lists an estimate of future income, barring any information to the contrary, the recipient's estimate of future income should be used.

Additionally, if the recipient states that their income fluctuates so much that they can't anticipate any income, no income will be counted. If the CWD disagrees that the income is too unpredictable to anticipate, it must explore with the applicant or recipient what amount, if any, can be reasonably anticipated and document the basis for the amount used in the case narrative.

Example 1: Recipient provides a SAR 7 with four check stubs for the Data Month of varying amounts (\$50, \$150, \$75, and \$500). There were five weeks in that month, and for one week, he reports no earnings at all. He works on call and has no idea when he will be called in. The worker reviews the case and confirms that the recipient had periods of no income in the past.

The worker then carefully documents the basis for being unable to reasonably anticipate any income, and budgets no income for the upcoming SAR Payment Period. The recipient must report income above the IRT in accordance with requirements, but any other mid-period income report is voluntary.

(SAR) Example 2: Using the same employment scenario as above, except that the recipient reports that he expects to earn at least \$150/month. The CWD shall accept this statement, unless there is a reason to find it questionable. The worker must document the basis for using the estimate or document the reason for using a different amount. (For example: Past earning history shows that the recipient has always earned at least that amount, and although there were periods of higher earnings, they were sporadic). The recipient must report income above the IRT in accordance with requirements, but any other mid-period income report is voluntary. The recipient can also report mid-period if his income does not reach \$150 and the grant amount shall be supplemented, as necessary.

For CalFresh:

- Deduct all applicable allowances and deductions from the anticipated gross income; and
- Use the resulting amount to assign the CF allotment based on the family size.

Self-Employment

Quarterly Reporting does not change the current self-employment regulations.

CalWORKs and FSP clients still retain the option of using their actual expenses or 40% of gross earnings as expenses.

Good Cause Determinations for Late SAR7s

If a client provides a complete and correct SAR7 within the first calendar month following discontinuance, the EW will determine "good cause" or "no good cause" for a client's failure to submit a complete, correct and timely SAR7.

Good Cause Defined

"Good Cause" exists only when the client cannot reasonably be expected to fulfill their reporting requirements due to factors outside their control. "Good Cause" exists when:

- The client suffers from a mental or physical condition which prevents timely and complete reporting.
- The client's failure to submit a timely and complete report is directly attributable to county error.
- The county finds other extenuating circumstances which contributed to the client's inability to submit a timely report.

All good cause determinations must be documented in CalWIN case comments.

Good Cause Criteria

Good Cause must be determined within the first calendar month after discontinuance. If good cause exists, the EW will rescind the discontinuance action and restore benefits at the prior level for both CalWORKs and the CF with no break in aid. (This is not a change to the current process.)

Good cause cannot be claimed if a full calendar month has passed after the effective date of discontinuance. The client must reapply for benefits from both programs.

If a client reapplies for aid after the first working day of the SAR Payment Period following discontinuance for failure to submit a SAR7 but reapplies during the calendar month following discontinuance, the EW will determine if the client had good cause for failure to submit a complete and timely SAR7 for the previous SAR period.

Good Cause must be determined for both the CalWORKs and the CF programs.

If "good cause" is determined, the EW will rescind the discontinuance action and determine CalWORKs and FSP eligibility and benefits based on the information provided on the SAR7. The client's SAR cycle does not change.

If information reported on the SAR7 results in a decrease in benefits, but the EW is unable to provide a 10-day notice because good cause has been granted, the EW will issue benefits at the prior level. The EW would review the case for possible OP/OI for cash aid and Food Stamps for the first month of the SAR period. The EW must reduce the benefits for the second and third months of the SAR period.

No Good Cause

If a client provides a SAR7 within the first calendar month after discontinuance and “no good cause” is determined, the EW will take an application to restore benefits with a new beginning date of aid.

- This is not a change to the current process
- This may result in a change in reporting cycles.

Remember:

- The EW will not decrease cash benefits or CalFresh benefits based on information provided on a late SAR 7 without a 10 day notice of decrease.
- For both CalWORKs and CF, if the 10 day noticing requirement prevents the EW from decreasing the benefit amount at the beginning of the upcoming SAR Payment Period, the EW will take action to decrease the benefits in the second month of the SAR Payment Period or as soon as a 10 day notice can be provided. This may result in a mid-period decrease of benefits in the SAR Payment Period based on information reported on the SAR 7.
- If the client does not submit a complete and correct SAR 7 by the end of the first working day of the month following the discontinuance (the “Extended Filing Date”), the discontinuance will not be rescinded. At this point, the EW will do a restoration.

Good cause is to be determined liberally and clearly documented in CalWIN.

Mid-period Adjustments to Incorrectly Processed SAR 7's

There are several types of incorrectly processed SAR 7s:

- Budgets or actions not taken
- Budgets of actions done incorrectly
- Information not reported and found out later that should have been reported on the SAR 7.

In each of these situations, if the incorrectly processed SAR 7 results in an increase, the EW would re-compute the budget and issue it right away. If it results in a decrease, the EW would take action to reduce benefits the first of the month in which a 10-day notice can be sent.

The EW will review the case for Overpayments, Overissuances, Underpayments, and Underissuances.

CalWIN Case comments:

It will be critical that the EW thoroughly document how income was projected in determining benefit calculations.

Case comments should include, but are not limited to, the following:

- Income the client states they expect to receive in future months;
- Whether the anticipated income will be different than the income the client reported receiving for the SAR Data Month;

- Documentation of the reasons for not accepting the client's estimate if the EW questions the estimate;
- Other information used to determine what income will be used in the benefit calculations (verifications, employer's statement's, case history, etc.) if the client's estimate is not used.
- The methodology of how the EW arrived at these figures.

Case comments and other documentation will be particularly critical when documenting new income, income that is expected to change, income that fluctuates, and income that is so unstable that the client cannot make a reasonable estimate of what income to expect in future months (do not budget income that cannot be reasonably anticipated). For CF Quality Control (QC) purposes, reviewers will rely heavily on case documentation when reviewing case files to determine if benefits have been issued in the correct amounts.

- Review the income information that the AU/household reports or estimates on the SAR 7 as being reasonably anticipated for the upcoming SAR payment period.
- Is the information consistent, and is it adequate to be reasonably anticipated? Are they missing paystubs? Does the year-to-date tally?
- If information is incomplete or unclear, the EW must contact the client for additional information to determine what can be reasonably expected.
- If the AU/household is unable to estimate future income with the EW's assistance, the EW may, with the client's authorization, contact the employer or source of income.

If the EW is unable to obtain additional information from the source providing the income, the EW may take into account past income received by the AU/household as an indicator of income that will be received over the next period.

- For **CalWORKs**, the EW may only look back to the prior one or two months for historical income information.
- For **Food Stamps**, if income changes to the extent that a prior SAR period alone cannot help provide an accurate projection of future income, the EW may review the history of the past year if it will provide a more accurate indication of changes in future income.

Tools for Completing CalWORKs and Food Stamps Budgets

Budgeting tools:

- budget worksheet. (Form 4050)
- scratch budget on the IT Intranet page.

Quarterly Reporting - The QR 7

NOTE: This section is no longer applicable but may be needed to issue retro benefits or determine if past issuance was done correctly under QR7 rules:

The QR 7 is the quarterly report that recipients submit in the last month of the Quarter. It is used to determine the amount of cash aid and Food Stamps to be issued in the following Quarter. The following are the questions asked on the QR 7, and the actions the worker needs to take depending on the answers to the questions.

Information Required on QR 7

Clients who are subject to Quarterly Reporting must provide information and answers to all questions and items on the QR7 and declare, under penalty of perjury, that they have truthfully reported all required information.

Each item on the QR7 pertains to CalWORKs and/or FS eligibility. Clients will be required to report all income received in the QR Data Month, any changes in household composition or property since the submission of the last QR7, and any changes in income the client anticipates will occur in the upcoming QR Payment Quarter.

Additionally, all existing required verification must also be submitted with the QR7. Verification rules currently in effect will continue to apply.

A QR 7 Addendum is mailed with every QR 7 that is system-generated. Staff must include the QR7 Addendum any time a QR7 is requested and then mailed to a client.

Completing the QR 7:

Request to Stop Benefits

Client response:

- a. Has the client requested aid to stop?

- b. Has the client requested certain aid programs be stopped?
- c. No notation in this area means the client is not requesting discontinuance.

ES/EW Responsibility:

- a. Get clarification from client.
- b. Discontinue the program(s) per the client's request.
- c. Document in case file.

Part 1: What Happened in the Report Month?

Question #1: Did anyone get money from a job or training program or any other source?

Client Responsibility:

- a. List the name of the person who received the income.
- b. List the name of the employer.
- c. List the gross amount of the check/income received.
- d. List the date the check/income was received.
- e. List the number of days and hours worked or attended training.
- f. Verify income.

ES/EW Responsibility:

- a. Are all pay stubs or other proof of earnings attached?
- b. Has all income received during the Data Month been listed?

NOTE: Only income received in the Data Month is to be reported and verified.

- c. Did the client report income for each pay period in the month?
- d. Is the client reporting tips (if applicable)?
- e. Is the client reporting "gross" income?
- f. Is information sufficient to estimate future income?
- g. Make collateral contacts, if necessary.

Question #2: Did anyone pay for the care of a child, a disabled person or other dependent while working, seeking work, or attending school or training?

NOTE: While CalWORKs will continue to pay for child support through the Children's Council, dependent care deductions, if paid by the Food Stamp household, are an allowable deduction. This situation may come up in mixed households.

Client Responsibility:

- a. If expenses were incurred, list the name of the person(s) who received care and the amount paid.
- b. Provide verification.

ES/EW Responsibility:

- a. If expenses were incurred, verification must be provided. If verification is not provided, the deduction is not allowed. The QR7 is considered complete, but the ES should attempt to obtain verification.
- b. The hours claimed should coincide with the reported number of hours the client worked, sought work or attended school and training, with appropriate travel time allowed.

Question #3: Did anyone, who gets Food Stamps, pay court-ordered child or spousal support?

NOTE: No deduction is allowed if the court order has not been verified. Current and arrearages are allowed for a child in or out of the home

Client Responsibility:

- a. List the name of the person who paid the support.
- b. Report the amount of support paid.

ES/EW Responsibility:

- a. Verify that proof of the court ordered child support is in file.

Part 2: What Has Happened Since Your Last Quarterly Report?

Question #4: Has anyone moved into or out of your home, or did you move in with someone else?

Client Responsibility:

- a. List the name of the person who moved into or out of the home.
- b. List the relationship of that person to the client.
- c. Explain what/why the change occurred.
- d. List the date of the change.

ES/EW Responsibility:

- a. Is there a person who needs to be added to or deleted from the AU/household?
- b. Does the change affect the current deprivation?
- c. Does the change affect the FS household?
- d. Does this change result in in-kind income for the AU?

Question #5: Did anyone buy, get, sell, trade or give away any property?

Client Responsibility:

- a. List the name of the person or people who acquired or disposed of the property.
- b. Indicate the type of property and its value. Evaluate in terms of transfer f property regulations, if appropriate.
- c. Provide verification as needed.

ES/EW Responsibility:

CalWORKs Eligibility Handbook

- a. Determine whether or not the household is still property eligible.
- b. Did the AU receive Fair Market Value for the property if it was disposed?
- c. Use current regulations with regard to property verification.

Question #6: Has anyone in your home been convicted of a drug-related felony for possession, use or distribution of a controlled substance(s) or has anyone been avoiding or running from the law to avoid any felony prosecution, custody, or confinement after conviction, or is anyone in violation of probation or parole? If convicted of a drug-related felony, give date of conviction.

Client Responsibility:

- a. List the full name of the affected person.
- b. Provide the date of the event.

ES/EW Responsibility:

- a. Verify the individual is a member of the cash aid or FS household.
- b. Verify Drug/Fleeing Felon status.
- c. Apply Drug/Fleeing Felon rules and regulations.

Refer to the CalWORKs handbook sections 51-75, "Fleeing Felons and Intentional Program Violators" and Food Stamp Handbook sections 81-1

"Household Concept" and 82-9.3 titled "Excluded Household Members"

Question #7: Have any of the following happened to someone in your household?

- Married, divorced, or separated?
- Became pregnant, had a baby, aborted or miscarried?
- Became disabled or recovered from a disability or major illness?
- Citizenship or immigration status change, got a new card, form, or letter from the INS?
- Started, stopped or changed health, dental or life insurance benefits, including MediCare coverage?
- Student age 16 or older, started or stopped school or college. You may claim costs of tuition, school transportation, etc.
- Started or stopped working, refused a job or training, number of hours worked or in training went up or down, or went out on strike?
- Started or stopped getting In-Home Supportive Services
- For cash aid only: Child(ren) ages 6-17 stopped or started attending school regularly?

Client Responsibility:

- a. List the name and relationship of the person(s) who expects the change.
- b. Provide an explanation of what occurred
- c. If applicable, provide the dollar amount.
- d. List the date of the change or the expected change.
- e. Verify if appropriate.

ES/EW Responsibility:

- a. Does the information provided require the ES/EW to take an action?
- b. Does the reported change effect deprivation, property or income eligibility?
- c. Is there potentially a new source of income?
- d. Review verification.

Part 3: What Changes to Do Expect in the Next Three Months?

Question #8: Do you expect changes in income or expenses (except for housing and utility costs) in the next three months?

Client Responsibility:

- a. List the name and relationship of the person expecting the change.
- b. Provide information on the anticipated expense(s) or source of income.
- c. Provide an explanation as to why a change is anticipated.
- d. List the anticipated dollar amount for the next 3 months.
- e. Verify, if possible.

ES/EW Responsibility:

- a. Does the information provided require the ES/EW to take an action?
- b. Is there a change in deprivation, property or income eligibility?

- c. Is there potentially a new source of income?
- d. Review verification with collateral contacts if possible.

Address Change: Fill in this section ONLY if you have moved or have a new mailing address.

Client Responsibility:

- a. If a move has occurred, has the client provided the new address, phone number, and the date of the move?
- b. Provide proof if necessary. (see FS PIM 00-05 for procedures about verification of shelter)

ES/EW Responsibility:

- a. Has the household composition changed for CalWORKs or Food Stamps?
- b. Contact client for verification, if necessary.
- c. Is verification of rent provided? (necessary only if questionable per FS PIM 00-05)
- d. Contact the client to determine whether to use the actual utilities or Standard Utility Allowance (SUA). If utility bills are not in the client's name, determine the reason.
- e. Is there a potential for in-kind income?
- f. Complete the shared housing form, if necessary (Form 2509)
- g. If the mailing address is different from the physical address, obtain clarification.
- h. Complete form 8035 if post office boxed is being used for mail. (This form requires Section Manager signature.)

Certification/Penalty of Perjury Declaration

Client Responsibility:

- a. Sign and date the QR7.

For CalWORKs, if both parents are in the home, both parents are required to sign and date the QR7, including a parent who is on SSI or is not being aided.

ES/EW Responsibility:

- a. Have all the required persons signed the QR7? (Parents, natural or adoptive, of the aided children, a cash aided spouse of a parent, any other caretaker relative living in the home, an interpreter or other person helping complete the QR7, and/or a witness to a mark.)
- b. Do all signatures have the date signed beside them?

Reminder: The QR 7 will **not** be considered correct if it is dated **prior** to the first day of the Submit Month.

Timeliness

The due dates, county actions for late or incomplete QR7s, and timing of county actions remain unchanged under QR/PB.

The QR7 is:

- Due by the 5th day of the month.

- Considered timely if it is received by the ES/EW by the 11th calendar day of the QR Submit Month
- Reminder: The QR7 will not be accepted prior to the first day of the QR Submit Month.
- The QR 7 is considered late if it is received after the 11th day of the QR Submit Month

The ES/EW is required to make attempts at personal contact with the client to obtain the QR 7. If the QR 7 is not received by the 11th calendar day of the QR Submit Month, or the QR 7 is received but determined to be incomplete, the ES/EW will, on the 12th of the month:

- Send an X letter.
- Send a Balderas notice for X letters.

If the client provides the ES/EW with a complete QR7 after the 11th calendar day of the QR Submit Month, but on or before the first working day of the next month (known as the “extended filing date”), the ES/EW will rescind the cash aid and FS discontinuance and restore benefits. The client’s QR cycle remains unchanged.

If information reported on a late QR7 results in a decrease in benefits, and a 10-day notice cannot be provided, benefits will be restored at the previous higher level. An OP/OI will be established for the first month and action taken to decrease benefits in the second month of the next quarter or as soon as 10-day notice can be provided. This means there will be a mid-quarter decrease of benefits in the QR payment quarter.

EXAMPLE: An AU/household of three is in the quarter designated as May/June/July (the upcoming QR Payment Quarter is August/September/October). The AU’s grant amount is \$704 (the maximum amount allowed for a non-exempt AU of three). The

household's FS allotment is \$200. The QR7 is due by July 5th. When the QR7 is not submitted by July 11th, the ES/EW sends an X letter on the 12th of the month indicating a July 31st discontinuance date, and a Balderas notice at the same time.

MOTHER submits a complete QR7 on July 29th. On the QR7, MOTHER indicates that earnings from her part-time job will increase.

County Action: Based on the new income that the AU/household expects to receive, the ES/EW determines that the cash grant should be reduced to \$500 and FS benefits should be reduced to \$100 per month beginning with the next QR Payment Quarter.

The ES/EW does not have time to provide the AU/household with a 10-day notice of decreased benefits effective August 1st. Therefore, August benefits must be released to the AU/household at the previous quarter's level for cash aid and \$200 for the FS allotment.

The ES/EW will reduce the AU's benefits to \$500 cash aid and \$100 FS effective September 1st. A cash aid O/P and a FS O/I will be established for the amount of August benefits that MOTHER was not entitled to receive

If information reported on the QR7 results in an increase in benefits and the ES/EW cannot increase the benefits by the first day of the first month of the next QR Payment Quarter, a supplement will be issued for that month and benefits increased for the remaining months of the QR Payment Quarter.

The 10-day noticing requirement does not apply to an increase in benefits.

EXAMPLE: The case consists of MOTHER, CH11 and CH12. The designated QR Payment Quarter is January/February/March. (The upcoming QR Payment Quarter is April/May/June.) The AU's grant amount is \$300. The household's FS allotment is \$100.

The QR7 for the current QR Data Month is due by March 5TH. When the QR7 is not submitted by March 11TH, the ES/EW sends an X letter on the 12th of the month indicating a March 31st discontinuance date, and a Balderas notice on the same date.

MOTHER submits a complete QR7 on March 29th. On the QR7, MOTHER indicates that

she has been laid off from her job on March 15th and received her last check the same day.

Due to MOTHER's loss of earnings, the ES/EW determines that the cash grant should be increased to \$704 (the maximum amount allowed for an AU of three) and FS benefits should be increased to \$200 per month beginning with the next QR Payment Quarter. The ES/EW will increase benefits effective April 1. The 10-day noticing requirement does not apply in this example, as it is a positive action. The late QR 7 would also be considered a voluntary mid-quarter report, and a supplemental for March issued, if appropriate.

Benefits will be discontinued effective the last day of the QR Submit Month if the client fails to submit a complete and correct QR7 by the first working day of the next month.

The client must reapply for aid unless good cause is established.

Completeness

The completeness criteria for the QR7 remain unchanged from the CW7/SAWS7 completeness criteria.

If the QR7 is received but determined to be incomplete, the ES/EW will return the incomplete QR7 to the client with a Y hold notice plus a 988 speed letter detailing the information needed.

This is not a change to the current process

What Must Be Reported on the QR 7?

For both CalWORKs and the FSP, the QR 7 will be considered complete if:

- The form is signed and dated no earlier than the first day of the QR Submit Month.
- All questions and items are fully answered and the information on the QR 7 together with the attached documentation provides sufficient information to allow for the determination of eligibility and/or benefit levels; and
- Required verification is provided.
- All income received in the QR Data Month is reported and verified.
- Any change in household composition or property since the submission of the last QR 7 is reported and verified, if appropriate. This includes information the client voluntarily reported in mid-quarter.
- All changes in income the client anticipates will occur in the next 3 months are reported.
- If items pertaining to one program's requirement that are not completed on the QR 7, the QR 7 will be considered incomplete for that program only. It will be considered complete for the other program.

EXAMPLE: Two-parent family receiving both CalWORKs & FS benefits submits a QR7 signed only by MOTHER. The QR7 is considered incomplete for CalWORKs because both parents are required to sign. It is considered complete for Food Stamps because only the Head-of-Household is required to sign.

ESs/EWs must make sure that the changes that are reported in any mid-quarter report are reflected on the next QR7. If the next QR7 submitted by the participant does not contain changes reported mid-quarter, the ES/EW will take action to resolve the discrepancy.

The ES/EW will first attempt to contact the participant for clarification. If the ES/EW is unable to contact the participant, the QR7 will be considered to be incomplete. Staff will take required action for an incomplete report.

Reasonable Anticipation of Income and Expenses Reported on the QR 7

The QR 7 is intended to capture income and eligibility information for the QR Data Month. It is also intended to capture any reasonably anticipated income and expense changes for the next QR Payment Quarter that are known during the QR Data Month.

Therefore, the county shall presume that all income and eligibility information reported on the QR 7 was known by the recipient in the Data Month. However, if other information received by the county indicates that the recipient-reported changes on the QR 7 were not known to the recipient until after the Data Month, the change shall be treated as a voluntary mid-quarter report and acted upon as such.

Determining Reasonably Anticipated Income

If the client refuses to assist in providing the required information (e.g. refuses to sign a release to contact the employer, if necessary) or fails to provide information necessary to determine continuing eligibility, the ES/EW will discontinue benefits at the end of the quarter after providing a 10-day notice.

If the client is attempting to cooperate to best of his/her ability, yet is unable to provide information that would assist the ES/EW in projecting future income with reasonable

certainty, the client will not be considered to have "failed to cooperate" and the case will not be discontinued for that reason.

If the client is able to adequately estimate future income, the ES/EW will look to the QR 7 for the client's monthly expected income totals and use them.

The ES/EW must average the reasonably anticipated income for each of the three months of the upcoming QR Payment Quarter to determine what income to use when calculating the upcoming Quarter's eligibility and benefits.

Again, all applicable disregards for income types of CalWORKs and Food Stamps remain unchanged under QR/PB.

To calculate benefits using reasonably anticipated income provided by the client on the QR 7, the ES/EW will average the income for the upcoming QR Payment Quarter as follows:

For CalWORKs and Food Stamps:

- Add the reasonably anticipated gross earned income for each month of the quarter and divide by three.
- Add the reasonably anticipated disability based unearned income for each month of the quarter and divide by three.
- Add the reasonably anticipated gross unearned income for each month of the quarter and divide by three.

For CalWORKs:

- Apply all applicable disregards for each income type to the averaged income amounts to generate an average net non-exempt income.
- Add the net non-exempt income of each income type together to determine the full net non-exempt income for the AU/household.
- Subtract the total average net non-exempt income from the applicable MAP.
- The result is the benefit amount for the upcoming QR Payment Quarter.

For the FSP:

- Deduct all applicable allowances and deductions from the anticipated gross income; and
- Use the resulting amount to assign the FS allotment based on the family size.

Self-Employment

Quarterly Reporting does not change the current self-employment regulations.

CalWORKs and FSP clients still retain the option of using their actual expenses or 40% of gross earnings as expenses.

Good Cause Determinations for Late QR7s

If a client provides a complete and correct QR7 within the first calendar month following discontinuance, the ES/EW will determine “good cause” or “no good cause” for a client’s failure to submit a complete, correct and timely QR7.

Good Cause Defined

“Good Cause” exists only when the client cannot reasonably be expected to fulfill their reporting requirements due to factors outside their control. “Good Cause” exists when:

- The client suffers from a mental or physical condition which prevents timely and complete reporting.
- The client's failure to submit a timely and complete report is directly attributable to county error.
- The county finds other extenuating circumstances which contributed to the client's inability to submit a timely report.

All good cause determinations must be documented in the case file.

Good Cause Criteria

Good Cause must be determined within the first calendar month after discontinuance. If good cause exists, the ES/EW will rescind the discontinuance action and restore benefits at the prior level for both CalWORKs and the FSP with no break in aid. (This is not a change to the current process.)

Good cause cannot be claimed if a full calendar month has passed after the effective date of discontinuance. The client must reapply for benefits from both programs.

If a client reapplies for aid after the first working day of the QR Payment Quarter following discontinuance for failure to submit a QR7 but reapplies during the calendar

month following discontinuance, the ES/EW will determine if the client had good cause for failure to submit a complete and timely QR7 for the previous quarter.

Good Cause must be determined for both the CalWORKs and the FSP.

If "good cause" is determined, the ES/EW will rescind the discontinuance action and determine CalWORKs and FSP eligibility and benefits based on the information provided on the QR7. The client's QR cycle does not change.

If information reported on the QR7 results in a decrease in benefits, but the ES/EW is unable to provide a 10-day notice because good cause has been granted, the EW/ES will issue benefits at the prior level. The EW/ES would review the case for possible OP/OI for cash aid and Food Stamps for the first month of the quarter. The EW/ES must reduce the benefits for the second and third months of the quarter.

EXAMPLE: A non-exempt AU of three has no income and is receiving the maximum aid payment of \$704 in cash aid and \$200 in FS benefits. In the October/November/December quarter, MOTHER fails to submit her QR7 for the month of November by December 11th. The ES/EW sends an X letter on the 12th of the month discontinuing the case effective December 31st and a Balderas notice at the same time. MOTHER still does not submit a QR7. Benefits are discontinued effective December 31st. MOTHER comes in on January 4th to request restoration of aid. The Continuing ES/EW determines that MOTHER had good cause for not turning in her November QR7. When she submits her November QR7, she reports having been approved for Unemployment Insurance Benefits (UIB) in the amount of \$100 per week.

County Action: The ES/EW will restore aid at the previous level of \$704 cash aid and \$200 FS because of insufficient time to provide a 10-day notice to reduce January's benefits. The ES/EW will make a mid-quarter adjustment for the January/February/March Payment Quarter and reduce benefits effective February 1st. A cash aid O/P and a FS O/I will be set up for the month of January. The ES/EW must document in the case file.

No Good Cause

If a client provides a QR7 within the first calendar month after discontinuance and “no good cause” is determined, the ES/EW will take an application to restore benefits with a new beginning date of aid.

- This is not a change to the current process
- This may result in a change in reporting cycles.

EXAMPLE: An AU/household is in the quarter designated as October/November/December. The QR7 for the current QR Data Month is due by December 5th. The QR7 was not submitted by December 11th. The ES/EW sends a discontinuance notice (X letter) on the 12th of the month indicating the case will be discontinued effective December 31st and a Balderas notice at the same time.

MOTHER does not submit a complete QR7 by January 2nd, but comes in on January 4th. The ES/EW determines that MOTHER did not have good cause for failing to submit the QR7 timely.

County Action: The December 31st discontinuance remains in effect and the Continuing ES/EW must take a new application for both programs. If the client comes in after January 31st, there is no opportunity for the client to claim good cause as one full calendar month has passed since the discontinuance date. The client must reapply for benefits through Intake.

Remember:

- The ES/EW will not decrease cash benefits or Food Stamps benefits based on information provided on a late QR 7 without a 10 day notice of decrease.
- For both CalWORKs and Food Stamps, if the 10 day noticing requirement prevents the ES/EW from decreasing the benefit amount at the beginning of the

upcoming QR Payment Quarter, the ES/EW will take action to decrease the benefits in the second month of the QR Payment Quarter or as soon as a 10 day notice can be provided. This may result in a mid-quarter decrease of benefits in the QR Payment Quarter based on information reported on the QR 7.

- If the client does not submit a complete and correct QR 7 by the end of the first working day of the month following the discontinuance (the "Extended Filing Date"), the discontinuance will not be rescinded. At this point, the ES/EW will do a restoration.

Good cause is to be determined liberally and clearly documented in the case record.

Mid-Quarter Adjustments to Incorrectly Processed QR 7s

There are several types of incorrectly processed QR 7s:

- Budgets or actions not taken
- Budgets of actions done incorrectly
- Information not reported and found out later that should have been reported on the QR 7.

In each of these situations, if the incorrectly processed QR 7 results in an increase, the ES/EW would re-compute the budget and issue it right away. If it results in a decrease, the ES/EW would take action to reduce benefits the first of the month in which a 10-day notice can be sent.

The ES/EW will review the case for Overpayments, Overissuances, Underpayments, and Underissuances.

Prospective Budgeting

The QR/PB system uses an anticipated income/prospective budgeting methodology for determining client benefits.

Prospective budgeting was used prior to March 1, 2004 in the MR/RB system for determining benefit amounts for the first two months of aid for new applicants.

Prospective budgeting under QR/PB required ESs/EWs to use income that the AU/household reasonably anticipates it will receive in a quarter when calculating benefits for that quarter.

Rules for determining initial financial eligibility at the time of Intake remain unchanged. (See page 9 for a discussion of this).

Information reported on the QR7 is used to determine continuing eligibility for the next quarter. ESs/EWs must consider income and household information from the QR Data Month, as well as anticipated changes in income and expenses when determining continuing eligibility and benefit levels.

The prospective budgeting method requires interaction between ESs/EWs and clients to enable the ES/EW to determine the best available information to accurately reflect the household's future income situation.

It will be critical that the ES/EW thoroughly document how income was projected in determining benefit calculations.

Case narratives/contact log entries should include, but are not limited to, the following:

- Income the client states they expect to receive in future months;
- Whether the anticipated income will be different than the income the client reported receiving for the QR Data Month;
- Documentation of the reasons for not accepting the client's estimate if the ES/EW questions the estimate;
- Other information used to determine what income will be used in the benefit calculations (verifications, employer's statement's, case history, etc.) if the client's estimate is not used.
- The methodology of how the ES/EW arrived at these figures.

Case narratives and other documentation will be particularly critical when documenting new income, income that is expected to change, income that fluctuates, and income that is so unstable that the client cannot make a reasonable estimate of what income to expect in future months. For FS Quality Control (QC) purposes, reviewers will rely heavily on case documentation when reviewing case files to determine if benefits have been issued in the correct amounts.

Reasonably Anticipated Income

Income is considered reasonably anticipated when the ES/EW determines it is reasonably certain that the client will receive a specified amount of income during any month of the QR Payment Quarter. This definition applies to all types of income, earned or unearned.

Income will be considered to be reasonably anticipated if the ES/EW determines that:

- The income has been or will be approved or authorized within the upcoming quarter, or the household is otherwise reasonably certain that the income will be received within the quarter; and
- The amount of the income is known.
- If the amount of income or when it will be received is uncertain, e.g. it cannot be reasonably anticipated, then that portion of the AU/household's income that is uncertain will not be counted when determining income eligibility and benefit levels.

ESs/EWs will be required to make a determination of what income is reasonably anticipated when:

- An AU/household first applies for benefits;
- A client AU/household reports new income on the QR7;
- A client AU/household reports on the QR7 that income is expected to change;
- A client AU/household has income that fluctuates; and
- A client makes a mid-quarter report of an income change.
- A client submits a report that the AU/household income will exceed the IRT.

The following guidelines can be helpful to the EW/EW in determining income that is reasonably anticipated by the AU/household. These guidelines include, but are not limited to, the following:

- Is the income reported on the QR 7? Review Question 2 and Question 8.
- Review the income information that the AU/household reports or estimates on the QR 7 as being reasonably anticipated for the upcoming QR payment quarter.
- Is the information consistent, and is it adequate to be reasonably anticipated? Are they missing paystubs? Does the year-to-date tally?
- If information is incomplete or unclear, the EW/ES must contact the client for additional information to determine what can be reasonably expected.
- If the AU/household is unable to estimate future income with the ES/EW's assistance, the ES/EW may, with the client's authorization, contact the employer or source of income.

If the ES/EW is unable to obtain additional information from the source providing the income, the ES/EW may take into account past income received by the AU/household as an indicator of income that will be received over the next quarter.

- For **CalWORKs**, the ES/EW may only look back to the prior quarter for historical income information.
- For **Food Stamps**, if income changes to the extent that a prior quarter alone cannot help provide an accurate projection of future income, the ES/EW may review the history of the past year if it will provide a more accurate indication of changes in future income.

If the household's income changes seasonally, it may be more appropriate to compare the income received from the most recent prior season, rather than the last quarter.

If an AU/household anticipates receipt of income in the upcoming quarter from a new source, such as a new job, but is uncertain when the job will start or what amount the

client will be paid, this income cannot be considered reasonably anticipated and will not be used in the budget for determining benefits for the upcoming QR payment quarter.

NOTE: If the client refuses to assist in providing the required information (e.g. refuses to sign a release to contact the employer, if such contact is necessary), or fails to provide information necessary to determine continuing eligibility, the ES/EW will discontinue benefits at the end of the quarter, after providing a ten day notice.

NOTE: If the client is attempting to cooperate to the best of their ability, yet is unable to provide information that would assist the ES/EW in projecting future income with reasonable certainty, the client will not be considered to have failed to cooperate and the case will not be discontinued for that reason.

EW/ES must make a determination of income that is reasonably anticipated when:

- An AU/household first applies for benefits;
- A client AU/household reports new income on the QR 7;
- A client AU/household reports on the QR 7 that income is expected to change;
- A client AU/household has income that fluctuates; and
- A client makes a mid-quarter report of an income change.

Guidelines regarding the determination of reasonably anticipated income vary depending on the circumstances.

New Income

- If income is new, the ES/EW may have to rely on information provided by an employer or by the source of income to determine what income may be “reasonably anticipated” in benefit calculations.
- If the amount of new income, payment dates, and/or hours of work cannot be estimated with reasonable certainty, the ES/EW will not use the new income in the budget calculation.

Determining if Income will be Different or Continue

The county must determine whether the reasonably anticipated monthly income is expected to be different from the income reported on the QR data month for one or more months during the next QR payment quarter, or whether the monthly income reported for the QR data month is expected to continue during each month of the next QR payment quarter.

If the AU/household has income that has previously been used to determine eligibility and benefit amount, but expects the amount of income to change in the next QR Payment quarter, the ES/EW must attempt to find out the amount of income the AU/household expects to receive.

If the ES/EW is unable to determine how the income will change with the help of the client and/or the source of income, only that portion of income that the AU/household “reasonably anticipates” it will receive can be used in the benefit calculation. The situation must be carefully documented.

Below are two examples that show how a ES/EW will make a determination of what income is reasonably expected to be received by an AU/household.

EXAMPLE 1: A client reports on the QR7 that an AU/household member will start a new job in the upcoming quarter. The AU/household reports that the payday falls

within the new QR Payment Quarter and reports the anticipated wage amount and expected hours. Because the timing and amount of the income is reasonably certain, the ES/EW will consider this income to be “reasonably anticipated” and, therefore, will use it in the benefit calculations for the next QR Payment Quarter.

EXAMPLE 2: An AU/household reports that a member has been verbally approved for State Disability Insurance (SDI). However, the AU/household member has not received an actual award letter or check, and does not know the exact start date or amount. Because the timing and amount of the income is not known, the ES/EW will not prospectively use this income in the calculation for the upcoming QR Payment Quarter.

Tools for Completing CalWORKs and Food Stamps Budgets

Staff will have three tools they can use for budgeting. They are:

- A budget worksheet. (Form 4050)
- A scratch budget on the IT Intranet page.

CalWORKs Eligibility Handbook	Mandatory Reports 55-24
	Effective 3-1-05

55-24 Mandatory Reports

I. Mid-Quarter Changes to Benefits

Benefits will not be decreased or discontinued during the quarter except under limited circumstances. The ES/EW is required to take action on specified changes that occur “mid-quarter” which include changes resulting from client mandatory reports, certain client voluntary reports, and county initiated actions.

II. Mandatory Mid-Quarter Client Reports

Mandatory mid-quarter changes may be reported in writing, verbally or in person to the ES/EW (within 10 calendar days of the date the change becomes known to the AU/household). The ES/EW will document these changes in the case file.

Some mid-quarter changes are required to be reported in the CalWORKs program that are not required to be reported in the Food Stamps Program. When there is a combined CalWORKs/FS case, if the AU reports a change that is required to be reported for CalWORKs, the ES/EW must also review the FS case to determine if the FS benefits must also be adjusted.

For CalWORKs, Mandatory Mid-Quarter Changes Are:

- Address changes
- Drug felony convictions
- Fleeing felon status
- Violation of conditions of probation
- Violation of conditions of parole

When the household income exceeds the Income Reporting Threshold (IRT) The ES/EW will take mid-quarter action to reduce or discontinue benefits, as appropriate, at the end of the month after 10-day notice can be provided. Rules regarding appropriate aid code changes based on household composition and citizenship status remain unchanged under QR/PB.

For PAFS And NAFS, Mandatory Mid-Quarter Changes Are:

- Address changes

For NAFS Only, Mandatory Mid-Quarter Changes Are:

- Clients who are required to meet the Able Bodied Adults Without Dependents (ABAWD) work rule will be required to report:
- Any changes to the number of hours of worked (when hours drop to less than 20 hours a week or 80 hours a month).

NOTE: For both CalWORKs and the FSP, clients are not required to report changes to their household composition at anytime other than on the QR7. If a ES/EW receives a voluntary mid-quarter report about a change in the household's composition, refer to the section titled "Changes in Household Composition."

III. Report in Change of Address

Clients are required to report address changes to their ES/EW within 10 calendar days. The ES/EW will act on address changes that are reported in the same manner under QR/PB as was done under MR/RB.

Move Out of State

If the client reports moving out of state, the ES/EW will discontinue benefits mid-quarter at the end of the month after a 10-day notice can be provided.

Mover Out of County

CalWORKs: When a client reports moving to another county, the ES/EW will continue to follow the CalWORKs Inter-County Transfer (ICT) procedures. This allows the ES/EW to discontinue cash aid in mid-quarter at the end of the ICT transfer period.

FSP: The FSP will continue to follow existing FS rules which require the client to be discontinued from the former county of residence and reapply in the new county, except that the former county will continue to provide FS benefits until the end of the month in which the CalWORKs case is transferred from the former county to the new county. The FS case will be discontinued at the same time as the CalWORKs case so that both the CalWORKs and FS cases can be more easily assigned to the same quarter in the new county.

EXAMPLE:

An AU/household is currently living in County A. On February 5th MOTHER informs County A that she now lives in County B. Due to the CalWORKs transfer period, County A will continue benefits to the AU/household until March 31st. County B will pick up the CalWORKs case on April 1. FS benefits will be discontinued in County A on March 31st to coincide with the transfer period of the CalWORKs case. The household may reapply for FS benefits any time after moving to County B, but will not be eligible to receive FS benefits in County B until April 1st. County A is responsible for ensuring that the household can easily access FS benefits for February and March via the EBT card.

IV. Decreases in Income - Recalculation of Benefits

When a client voluntarily reports a change in income, the ES/EW will act on the report only if it increases benefits. The ES/EW will request verification of the change in income immediately and will not act to increase benefits until the required verification is received. The ES/EW will allow the client 10 days to provide the necessary verification.

To determine whether the change results in increased benefits mid-quarter, the ES/ES must recalculate benefits for the current and remaining months of the quarter using the new income that the AU/household reasonably expects to receive. If the AU/household anticipates that income will be different in each of the remaining months of the quarter and knows with reasonable certainty what the amount would be for each month, the ES/ES will average the new income over the month in which the change is reported and the remaining months of the quarter.

If the change in income is reported for the first time on the QR7 rather than as a voluntary mid-quarter report, the ES/ES will treat the report of decreased income as a voluntary mid-quarter report in order to determine if a supplement should be issued for the month in which the change was reported. The ES/ES will request verification immediately, if it is not included with the QR7, and will also act to determine if a supplemental cash payment is to be issued within 10 days of receiving the verification.

If the voluntarily reported decrease in income does not result in an increase to benefits, the ES/ES will send a No Change Notice of Action to the AU/household informing them that the voluntary report of the decreased income did not increase benefits. The No Change Notice of Action will also remind the client that the decreased income must also be reported on the next QR7 that the AU/household submits to the ES/ES.

V. Increased Medical, Child Support, and Child Care Expenses (FSP only)

If the AU/household voluntarily reports an increase in medical, child care and/or child support expenses mid-quarter, the new expense will be averaged over the current and remaining months of the quarter. A supplement will be issued for the month in which the increased expense(s) was reported and benefits increased for the remaining months of the quarter.

EXAMPLE:

The AU/household is in the designated payment quarter of January/February/March. In February, MOTHER reports a one-time medical expense of \$500. The expense will be averaged over the current and remaining months of the current QR Payment Quarter (February and March.) This will allow for an additional \$250 in medical deductions to be used in the FS budgets for February and March. If the increased deduction results in an increase to benefits, benefits for February would be supplemented and March benefits would also be increased.

Recalculating the Benefits

The ES/EW will recalculate the current quarter's benefits based on reports of decreased or terminated income as follows:

Add

The actual gross monthly earned income for the month in which the decrease or loss of income is reported; and

Any additional gross monthly earned income that the AU/household reasonably anticipates for the current and remaining months of the quarter.

Determine the new average monthly gross earned income for the current quarter by dividing the total of the above amount by the number of months equal to the current and remaining months of the quarter.

Add

The actual disability based unearned income for the month in which the decrease or loss of income is reported; and

Any disability based unearned income that the AU/household reasonably anticipates for the current and remaining months of the quarter.

Determine the new average monthly disability based unearned income for the quarter by dividing the total of the above amount by the number of months equal to the current and remaining months of the quarter.

Add

Actual unearned income for the month in which the decrease or loss of income is reported; and

Any unearned income that the AU/household reasonably anticipates for the current and remaining months of the quarter.

Determine the new average monthly gross unearned income for the quarter by dividing the total of the above amount by the number of months equal to the current and remaining months of the quarter.

Subtract

All applicable CalWORKs income disregards and/or FS allowances for each income type to the new average gross income amounts to generate an average net non-exempt income for each month.

The new averaged net non-exempt income from the applicable MAP amount for CalWORKs.

Apply

The net non-exempt income to the Food Stamp allotment table to determine the correct allotment for the current and remaining months of the current quarter.

If the newly reported income results in an increase to benefits when the benefits have been recalculated, the ES/EW will increase benefits within 10 days of receiving the required verification.

If the benefit recalculation based on the new income results in an increase to benefits, the increase will be effective for the entire month in which the change was reported. The ES/EW will supplement benefits for that month, if applicable, and change the benefit amount for any remaining months of the quarter.

The ES/EW will supplement benefits in the month the change is reported, if applicable, and change the benefit amount for any remaining months in the quarter.

NOTE: (FSP Only) When computing the new FS budget, the EW/ES will take into account any change in the cash aid grant. If a supplement for FS is needed, it will be issued within 10 days. If the FS allotment goes down, no action will be taken until the next quarter. Benefits must be frozen using BIC 138 for the duration of the quarter. A notice indicating the increased CalWORKs benefits would be sent to the participant, and a No Change notice for Food Stamps would be sent as well.

VI. Fluctuating Medical, Child Support, and Child Care Expenses

Some Food Stamps households may have expenses, such as child care or medical expense, that vary from month to month. For QR purposes, if any expense, other than shelter or utility expenses, is reported on the QR 7, the expense(s) will be averaged over the coming QR Payment Quarter. This example would probably only come up in a mixed Non Assistance Food Stamps household where child care is paid by a person not in the CalWORKs household, and who pays child care.

CalWORKs Eligibility Handbook	Voluntary Reports 55-25
	Effective 3-1-05

55-25 Voluntary Reports

I. Voluntary Mid-Quarter Client Reports

CalWORKs Eligibility Handbook

For both CalWORKs and the Food Stamps Program, there is no restriction to what a client may voluntarily report. However, the ES/EW will only take action mid-quarter on reports that result in an increase to benefits.

Benefits cannot be decreased in mid-quarter as a result of a voluntarily reported change or a change that is not required to be reported.

Examples of reported changes that might increase benefits include, but are not limited to the following:

- When the household's income decreases;
- When someone moves into the home;
- When a CalWORKs AU member becomes pregnant;
- When a teen becomes pregnant or gives birth and meets the Cal-Learn requirements; or
- When allowable FSP deductions increase (FS only)

When the voluntary mid-quarter report is of a decrease in income, the ES/EW will request verification immediately.

When the voluntary mid-quarter report is reporting a new household member, the ES/EW will take an application to add the new member.

Once verification and/or the application are received, the ES/EW will only take action on those voluntarily reported changes that increase benefits. The ES/EW will not take any action to decrease benefits. The decrease will be suppressed and "held over" for action until the next quarter using information reported on the next QR7. Thorough documentation is crucial.

In some situations, a voluntarily reported change may result in an increase in benefits for one program, while decreasing benefits for the other program. The ES/EW must take action to increase benefits in one program, while suppressing the decrease to the other program's benefits (e.g.: A CalWORKs grant is increased which may cause a decrease to the Food Stamp benefits).

In the above instance, the Food Stamp allotment decrease cannot be implemented as the information was received in a voluntary mid-quarter report. The change cannot be made until the ES/EW processes the next QR7 for the upcoming QR Payment Quarter.

ES/EW action to increase the grant and/or allotment based on voluntary reports will be based on when the change was reported, not when the change actually occurred. Documentation is essential. The effective date of the increase in benefits is determined differently for increases due to decreased income than for increases due to adding household members and are as follows:

- Increases due to decreased income are effective the first of the month in which the change is reported.
- Increases due to the addition of new AU/household members are effective the first of the month following the report of the change.

If the client voluntarily reports a change in mid-quarter that would decrease benefits or make the AU/household ineligible, the ES/EW will not act on information in the voluntary report during the current quarter.

The ES/EW will send a No Change NOA informing the AU/household that the voluntarily reported information did not increase their benefits and remind the client of their reporting responsibilities for the upcoming QR7. There will be No Change NOAs for both CalWORKs and Food Stamps.

If information reported on the QR7 submitted after the voluntary report is inconsistent with what was previously voluntarily reported earlier in the quarter, the ES/EW will take action to resolve the discrepancy and determine what the actual current AU/household situation is. The ES/EW will first attempt to contact the client to resolve the discrepancy. If the ES/EW is unable to contact the client or obtain resolution from such contact, the QR7 will be considered incomplete. The ES/EW will follow current existing procedures when processing an incomplete QR7. Benefits for the next QR Payment Quarter will be based on the information provided on the QR7, once it has been determined to be complete.

II. Voluntary Request for Discontinuation of Benefits

A client may voluntarily request mid-quarter that:

- Any individual member of the AU/household who is no longer in the home or is an optional member be deleted; or
- The entire AU/household to be discontinued.

ES/EWs will make mid-quarter benefit adjustments based on these requests for deletions/discontinuances.

If the AU/household or the client's request is made verbally, the ES/EW will provide a 10-day notice before decreasing or discontinuing benefits at the end of the month.

ES/EWs will not assume that a voluntary mid-quarter report of someone leaving the home equates to a voluntary request for deletion of that household member. The ES/EW must determine if the voluntary mid-quarter report of someone leaving the home is truly a request of deletion of that household member, since the AU/household is not required to report this change in household composition mid-quarter.

The ES/EW will contact the AU/household to ask if they are requesting that the member be deleted and will inform the AU/household that the deletion will result in decreased benefits to the remaining AU/household members.

The law provides that a client can request their own benefits to be discontinued so that the client can ensure that their CalWORKs time clock will be stopped when the person is no longer receiving cash aid. The person requesting deletion must either be out of the home or an optional AU member who no longer wishes or is no longer eligible to receive cash aid in that AU/household.

If the AU/household decides not to voluntarily report that an AU/household member has left the home during mid-quarter, but the client who has left the home requests deletion, that client's request for deletion will take precedence over the AU/household's decision to not voluntarily report the change in household composition. Benefits to the remaining AU/household members will be reduced mid-quarter to reflect the client's deletion and to ensure that the client's time clock stops.

NOTE: A QR7 submitted out of cycle will be treated as a voluntary report.

CalWORKs Eligibility Handbook	Income Reporting Threshold 55-26
	Effective 11-1-19

55-26 Income Reporting Threshold (IRT)

I. Defining the Income Reporting Threshold

Income Reporting Threshold (IRT) is a mandatory mid-period (SAR & AR/CO) reporting requirement for CalWORKs and CalFresh programs. There are two levels of IRT for CalWORKs cases. There is a separate Income Reporting Threshold (IRT) for the CF

program. The IRT is the level of income that triggers the need for a CalWORKs Assistance Unit (AU) to make a mandatory mid-period report of a change in income.

Under the Semi-Annual Reporting (SAR) and Annual Reporting/Child-Only (AR/CO) reporting systems, CalWORKs recipients are required to report only certain changes in their income or family circumstances mid-period. One such mandatory mid-period report is when the AU's total income reaches the IRT. When any member in the Family MAP has **earned** income, the AU must report when combined gross monthly earned and unearned income ***exceeds the lesser*** of the following two amounts:

The IRT for a household is identified as the lowest of two tiers.

The two tiers include:

- 1) 55 percent of the Federal Poverty Level (FPL) for a family of three, plus the amount of income last used to calculate the AU's monthly grant amount;
- 2) The amount of income likely to render the AU ineligible for CalWORKs benefits; and (CalFresh) 130 percent of the FPL or the level at which a household becomes financially ineligible for federal Supplemental Nutrition Assistance Program (SNAP) benefits;
- 3) and (CalFresh) effective immediately, the County will have a new IRT structure. If households are certified with gross income up to 130% FPL at Intake, RRR, SAR-7, or a mid-period VUR, they will have 130% FPL IRT. If households are certified above 130% FPL and up to 200% FPL, they will have no IRT.

Household Type	Non-Assistance CalFresh (NACF)	Non-Assistance CalFresh (NACF)	NACF CalFresh Sanctioned Individual* Non-MCE	Public Assistance CalFresh (PACF)	Mixed Household	Mixed Household
	Income at or below 130%	Income between 131% and at or below 200%		All members are receiving CalWORKs and CalFresh	Some members receive CalWORKs All members receive CalFresh	Some members receive CalWORKs All members receive CalFresh
CalFresh IRT Level	130%	No IRT	130%	CalWORKs IRT	130%	No IRT

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Note: In accordance with MPP Section 44-316.324(b)(2)(SAR), AUs with either no income or with unearned income only are required to report if they receive new earned income that, when combined with other household income, exceeds the IRT mid-period.

Therefore, AUs with unearned income only are not required to report when that income by itself exceeds the IRT mid-period.

Income that must be reported for IRT purposes is the total combined earned and unearned income for the AU.

If any member of the AU or a person included in the family's Maximum Aid Payment (MAP) has earned income or begins receiving earned income, the AU must report to the CWD within ten days when the family has combined gross income, earned and unearned, that exceeds the lower of the two CalWORKs tiers in the AU's IRT during the SAR or AR/CO payment period.

For PACF cases, if report of income over CW IRT is made, the CF benefits shall also be recalculated.

II. Prospective Budgeting

Once the family receives income that reaches the IRT and reports it to the CWD, the CWD must take action, per MPP Section 44-316.324(c)(1)(SAR), to determine if the reported income is reasonably anticipated to continue.

- If the income at or over the IRT is not reasonably anticipated to continue, the CWD will take no action.
- If the income at or over the IRT will continue but is not at a level that will result in ineligibility, the CWD must use the new reasonably anticipated income to recalculate the grant amount.

After recalculating the AU's grant based on the reported income, if the CWD determines the grant should be decreased, the CWD shall decrease the grant at the end of the month in which timely and adequate notice can be provided.

III. Actions based on reported IRT

After all appropriate income disregards have been applied, if the income reported is reasonably anticipated to continue to exceed the AU's MAP for the remainder of the

payment period, the CWD shall determine the AU financially ineligible and discontinue the AU at the end of the month in which timely and adequate notice can be provided. For complete details on decreasing grants or discontinuing cases due to the IRT please refer to ACL 12-25 for SAR AUs and ACL 12-49 for AR/CO AUs.

IV. Informing Recipients of Their IRT

The informing notice that provides the IRT limits must be individualized for each AU.

CWDs must inform recipients of their IRT no less than at each annual redetermination and recertification, or whenever their IRT changes.

Additionally, the AU must be informed of the new IRT levels any time the IRT chart is updated.

Because the first tier of the IRT is based on the amount of income that was last used to calculate the grant, whenever the AU has reported a change in income that results in the CWD recalculating their grant amount, the CWD shall recalculate the AU's IRT and re-send this information to them within 10 days of the reported change.

Inform the recipient of their IRT levels whenever the MAP size changes and whenever the recipient requests.

Whenever the FPL (federal poverty level) figures are updated all AU's will need to be informed of the new IRT levels.

The CWDs should also remind recipients that in addition to the IRT requirement, they must report all income and property on their SAR 7 or AR 2, SAR 3 and provide relevant verification.

Use the following forms for the IRT requirements: SAR 2, SAR 7, or AR 2 SAR, or on a separate informing notice.

IRT figures should be noticeable so the recipient can easily see the IRT for their AU.

The CWD shall follow notification rules regarding individualized IRT levels in accordance with MPP Section(s) 40-173.8 and 44-316.324 as instructed above. The IRT level in which the recipient was last notified will be used for reporting purposes until the CWD has had an opportunity to update the recipient regarding any applicable IRT change.

Failure to report income that exceeds the IRT can result in an O/P to the AU.

V. Overpayment/Overissuance for an AU over the IRT

If the AU reports increased income that exceeds the IRT, which results in ineligibility, but it is too late to provide 10-day notice of adverse action, the ES/EW will release benefits for the next month at the previous (higher) level.

The ES/EW will make a determination whether an O/P exists.

Effective January 1, 2017, Assembly Bill 2062 prohibits assessing an overpayment for the month following a change in income for a recipient of CalWORKs, or following a change in household composition for a CalWORKs assistance unit that does not include an eligible adult, if the recipient has reported the change and the county was unable, before the first of the month following the change in income or household composition, to provide 10 days' notice of the termination or reduction in benefits.

V. Fiscal Year IRT Table

Federal Fiscal Year (FFY) 2019/2020 CalWORKs Income Reporting Threshold (IRT)

The CalWORKs IRT amount for each AU is the lesser of A or B below

- a. \$978 (55% of the FPL for a family of three) plus the amount of income last used to calculate the AUs monthly benefits or;
- b. The amount of income likely to render the AU of that size ineligible, as shown in the charts below.

Effective October 1, 2019 - May 31, 2020

Region 1		
AU Size	Income Threshold Reporting	
	Exempt	Non-Exempt
0	\$227	\$227
1	\$1,438	\$1326
2	\$1,782	\$1,618
3	\$2,192	\$1,982

4	\$2,588	\$2,346
5	\$2,996	\$2,710
6	\$3,404	\$3,074
7	\$3,810	\$3,438
8	\$4,222	\$3,802
9	\$4,624	\$4,166
10 or more	\$5,038	\$4,530

*Note: The recipient income exit threshold formula is the Maximum Aid Payment (MAP) X 2 + \$225 (Earned Income Disregard (EID)) + \$1 = Amount That Renders AU Ineligible

VI. Refugee Cash Assistance (RCA)/Entrant Cash Assistance (ECA) and Trafficking and Crime Victims Assistance Programs (TCVAP)

The above instructions regarding the IRT also apply to the RCA/ECA Program in accordance with MPP sections 69-201.4 and 69-301, which state that CalWORKs Program regulations relating to financial eligibility and payments apply to RCA/ECA unless specifically superseded by RCA/ECA regulations (i.e., MPP section 69-206), that exempts specific income and resources from the income eligibility determination process. The above instructions regarding the IRT also apply to TCVAP.

REFERENCE: WELFARE AND INSTITUTIONS CODE SECTION 11265.3, MANUAL OF POLICIES AND PROCEDURES (MPP) SECTIONS ACL 13-109, 40-173.8 (SAR), 44-316.321(e), 44-316.324, 44-316.324(SAR)(b)(2), 69-201.4, 69-206, and 69-301, ALL COUNTY LETTER (ACL) Nos. 12-25, 12-49, and 13-80 and ALL COUNTY INFORMATION NOTICE (ACIN) I-52-13

CalWORKs Eligibility Handbook	Electronic Benefits Transfer 55-39
	Effective 07-07-16

55-39 Electronic Benefits Transfer

Overview

EBT stands for Electronic Benefit Transfer and is a process which allows for recipients of CalFresh (formerly called Food Stamps), CalWORKs, Refugee, and General Assistance to receive benefits or cash aid through a system used in California for the delivery, redemption, and reconciliation of issued public assistance benefits.

Recipients of public assistance in California access their issued benefits with the Golden State Advantage EBT card. California EBT cards can be used at more than 15,000 businesses and over 54,000 ATMs in California.

Instead of sending benefits and checks in the mail, those benefits will be put into a special EBT account. Recipients will receive their EBT card, which is similar to a debit or bank card. The EBT card is used to access benefits that are deposited into that account.

Homeless individuals and clients who do not have access to a kitchen can have hot meals included as an option on their EBT cards.

Workers should input "yes" for hot meals in CalWIN when first setting up EBT card if the client chooses that option. For current recipients, workers should consult with the unit supervisor for appropriate input into EEPIC.

The card is protected by a Personal Identification Number (PIN) which reduces the chance of stolen or lost CalFresh benefits.

How clients apply for benefits

For new benefits approval, clients may receive their EBT card via mail by completing the on-line application or when they come into our office and apply for emergency or immediate needs benefits. It is the EWs responsibility to explain the EBT to the applicant/client during the interview/application process.

During the interview/application process, the EW will:

- Explain EBT card usage, protection and replacement
- Inform regarding fees/surcharges
- Provide brochures and wallet card
- Provide list of stores and restaurants that accept EBT
- Explain rights and penalties

If they choose, applicants can be directed to apply for benefits on-line at:

<https://www.mybenefitscalwin.org/#>

The EBT process does not change any eligibility rules. Clients must complete an application to see if they are eligible to receive assistance for household expenses, food, medical costs.

EBT Assistance, Card and PIN Replacement

Replacement cards for lost or stolen cards can be obtained by coming into the office or via mail by calling the toll-free number.

Clients will not be reimbursed for any amounts on stolen EBT cards if they shared their PIN. They will only receive reimbursement for amounts when they have reported the stolen card and we have not taken action to change their card. They should call the 800 number provided below to first report that it was stolen.

Clients can call the Customer Service Toll-Free Number if:

- Card is lost or stolen.

CalWORKs Eligibility Handbook

- Card does not work.
- Need or want to change their Personal Identification Number (PIN)
- Find out how much is in their account
- Been charged for a purchase but didn't get the goods or were charged too much for what was purchased
- Have other questions about EBT or any related problems

The Customer Service Toll-Free number is available 24 hours a day/7 days a week: 1-877-328-9677

WHEN CALLING 1-877-328-9677 FOR LOST, DAMAGED, OR STOLEN EBT CARD, UNAUTHORIZED USE (FRAUD), OR PIN REPLACEMENT, CLIENTS WILL NEED TO:

- Pick Language (Press: 1 = English, 2 = Spanish, 3 = Vietnamese, 6 = Cantonese / Mandarin, 8 = Russian, 9 = Lao)
- Enter card number
- Pick #3 for lost, damaged, or stolen then:
 - A. Pick #1 for lost, damaged, or stolen
 - B. Pick #2 for unauthorized card use / fraud
- Pick #4 for PIN replacement

Availability of Transaction History

EWs must make available to the EBT recipient or their authorized representative, all electronic benefit transaction history details available, within ten business days after a request has been received at no additional cost to the EBT recipient. No formal request process is needed. Transaction history information can be accessed through SAWS or EPPIC.

EWs may also provide additional EBT information via handout or brochure to recipients that includes, but is not limited to, methods of electronic delivery of benefits and applicable fees, and surcharge-free ATMs, as well as consumer and privacy protections. Clients should be informed that if they give others access to use their EBT card for purchases or other transactions, that those amounts will not be reimbursed.

EBT Surcharge Fees

Surcharge fees are service fees that some banks charge the EBT recipient each time cash benefits are withdrawn from an ATM. Almost two-thirds of ATM withdrawals made by EBT recipients incur surcharge fees. In addition, cash withdrawal transactions that exceed four per month cost 80 cents for each additional withdrawal.

Recipients of CalFresh should be made aware of these surcharge fees and EBT recipients can access surcharge-free ATM information by performing a search at the MoneyPass website, <http://www.moneypass.com/> or the US Bank website, <https://www.usbank.com/index.html>.

At intake and/or redetermination, EWs can print out individual address searches for the recipient to locate the closest surcharge-free ATM(s) to their own homes or work places.

Direct Deposit

During the intake application or redetermination process, EWs must notify recipients of the option to receive benefits by direct deposit. Recipients are should be encouraged to participate in direct deposit of EBT benefits.

To meet the notification requirement, EWs can provide the recipient with the [EBT Surcharge-Free/Direct Deposit Handout \(EBT 2216\)](#).

The EBT 2216 must be provided to recipients at the time of application and redetermination.

The EBT 2216 includes, but is not limited to, information regarding direct deposit, how to avoid ATM surcharge fees, liability for electronic theft, and how to change the method and date of benefit delivery.

Request for Benefits or Cash Aid via Mail – EBT Exemption

A recipient must show an inability to use the EBT system to receive a check via mail by:

- having a physical or mental incapacity or
- a medical condition or a permanent or temporary physical or verifiable medical or related condition preventing them from successfully using the EBT system.

Recipients can complete the [“Request for Cash Aid Electronic Benefit Transfer - EBT Exemption” \(Temp 2203\)](#) and provide verification.

REFERENCES: Title 7 Code of Federal Regulations 274.12; 1996 Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA); Assembly Bill (AB) 1614 (Chapter 720, Statutes of 2014) All County Information Notice (ACIN) I-15-14; All County Letter (ACL) NO. 15 – 39; MPP Section 44-302.11; MPP Section 16-325.3; CalFresh County Handbook, Section 35.1.1

CalWORKs Eligibility Handbook	Large Corrective Underpayments 55-40
	Effective 03-29-10

55-40 Large Corrective Underpayments

(Reference ACIN I-80-09)

When issuing corrective underpayments to clients that are over \$1,500, clients should be given the option of receiving the underpayment on their EBT card, as a check, or through direct deposit (if they are set up for it). The EBT card is not the only option for receiving underpayments of this size.

Issuing large underpayments via an EBT card may be a burden to clients. Many banks limit the amount of cash withdrawal and clients have only a limited number of free withdrawals. This can be difficult for clients who must spend down money to remain eligible to CalWORKs.

Clients also have the option of putting the money into a restricted account in order to remain eligible for CalWORKs.

There is a form, [CW 2203](#) that staff may use to inform clients of their options when these large underpayments are established. This gives clients 15 days to request that their supplemental payment by check, direct deposit, or to their EBT account. It also reminds them of the restricted account option. This form may be sent to clients either prior to the issuance of the underpayment notice, or with the notice of action informing them of the establishment of the underpayment.

CalWORKs Eligibility Handbook	Direct Deposit 55-41
	Effective 7-15-05

55-41 Direct Deposit

I. State law mandates that counties offer Direct Deposit of benefits to all recipients of cash assistance.

CalWORKs currently offers Direct Deposit, and staff must review an informational flyer about it an Intake and during Reinvestigation. The flyer is included in Intake and RV packets. It is available in all appropriate languages.

Participants must have an active checking or savings account to enroll. They may choose to enroll in Direct Deposit at any time.

CalWORKs Eligibility Handbook	Native TANF Program 55-42
	Effective 11-01-08

55-42 Native TANF Program

The Washoe Tribe of Nevada and California is administering a Native TANF Program (NTP) in San Francisco County. Native TANF is the tribal version of TANF. The NTP provides cash aid and employment services to TANF-eligible families with federally recognized American Indian members.

The following incentives are offered to clients by the NTP:

- NTP cash aid exceeds the State Maximum Aid Payment (MAP) amount by up to \$100 per household.
- Flexibility to require less work participation hours and to include many culturally relevant workshops as work activities.

CalWORKs in San Francisco County is responsible for the following for American Indian families:

- Identifying families potentially eligible for the Native TANF Program.
- Providing American Indian families with the option of choosing between the Native TANF Program or CalWORKs benefits.
- Transitioning CalWORKs families to the Native TANF Program upon request from the NTP Coordinator.

CalWORKs in San Francisco will continue to provide Food Stamps and Medi-Cal services to NTP families who are eligible.

Eligibility for Native TANF is determined by the NTP case worker located at 1663 Mission, Suite 200.

The NTP case worker will look at many factors, including but not limited to having at least one member of the family enrolled as a member of a federally recognized tribe or a descendent of the California Judgement Roll. Eligibility to Native TANF will not be determined by CalWORKs staff.

Intake

When there is an American Indian in the family, the Intake worker will:

- Explain the option of receiving Native TANF or CalWORKs benefits
- Complete the CalWORKs application, and
- Make a CalWORKs eligibility determination.

If the family is interested in applying for the NTP, the Intake worker will refer the family to the NTP office to apply. Meanwhile the Intake worker will continue to process the

CalWORKs application to ensure that there is no delay in benefits. In addition, the Intake worker will process the Food Stamps and Medi-Cal applications as usual.

Carrying

A specialized worker will carry CalWORKs /Native TANF common cases that will include the Native TANF-issued cash aid, and the CalWORKs issued Food Stamps and Medi-Cal. The specialized worker is C227.

This worker acts as a liaison between CalWORKs and the NTP. This worker will communicate the NTP staff to ensure the Food Stamps and Medi-Cal budgets are adjusted appropriately based on the NTP grant.

Switching from CalWORKs to Native TANF

If a CalWORKs client has already applied for and has been found eligible to NTP, the NTP staff will contact the CalWORKs/Native TANF Coordinator (E201). The NTP staff will send the "Notice of Cash Aid (Pending)", plus the "Important Notice for Native Americans" documents to the CalWORKs/Native TANF Coordinator. The Coordinator will then contact the CalWORKs worker who has the case, instructing him or her to make the appropriate CalWIN entries to process the transfer.

After the CalWIN process is complete, the CalWORKs worker will transfer the case to the specialized carrying worker, C227, who will carry the Food Stamps and Med-Cal programs for the case.

If a CalWORKs client tells his/her worker that he/she wishes to transfer to the Native TANF Program, the CalWORKs worker will refer the client to the NTP office to apply. As stated above, all eligibility determination for the NTP program is done by NTP staff, not CalWORKs staff.

CalWORKs Eligibility Handbook	Provider Requests 55-43
	Effective 08-10-10

55-43 Provider Requests

If an Eligibility Worker needs to add a provider for a landlord or any other purpose, the EW will need to submit a "Request for provider" from to one of the staff authorized to add providers in CalWIN.

Be sure to search the providers already in CalWIN to see if the provider is already in the system before making a new request.

The following are authorized to add a provider: CX40, CX43, C440, C630.

To access the form, go to the HSA Intranet Home Page/DHS/CalWORKs. The form is located under the "CalWIN" heading, titled "Provider Request for Ancillary and Housing Payments".

CalWORKs Eligibility Handbook	MAP/MBSAC Tables 1971-2016 55-44
	Effective 6-30-20

55-44 MAP/MBSAC Tables from 1971 to Present

Use the link below to connect to a document on the State Department of Social Services website with MAP and MBSAC values back to 1971.

NOTE: As of 1997, California counties are divided into region 1 and Region 2 for MAP and MBSAC amounts. San Francisco is in Region 1.

<http://www.cdss.ca.gov/research/res/pdf/calreports/MAP-MBSAC.pdf>

MAP Region 1 (Effective October 1, 2019)

The MAP levels for all cash aid families will be increased effective **October 1, 2019**.

See link to ACL 19-73 below for more information.

http://www.cdss.ca.gov/Portals/9/ACL/2019/19-73_ES.pdf

Assistance Unit Size	Maximum Aid Payment Exempt	Maximum Aid Payment Non-Exempt
1	\$606	\$550
2	\$778	\$696
3	\$983	\$878
4	\$1,181	\$1,060
5	\$1,385	\$1,242
6	\$1,589	\$1,424
7	\$1,792	\$1,606
8	\$1,998	\$1,788
9	\$2,199	\$1,970
10 or more	\$2,406	\$2,152

MBSAC Payment Standards Chart

July 1, 2020 thru June 30, 2021

<https://cdss.ca.gov/Portals/9/Additional-Resources/Letters-and-Notices/ACLs/2020/20-60.pdf>

Assistance Unit Size	MBSAC	Housing	Utilities	Food	Clothing
2020-2021 CNI 3.72%					
1	\$741	336	71	184	56
2	\$1216	447	81	393	110
3	\$1507	489	84	503	163
4	\$1788	514	88	623	216
5	\$2040	514	88	755	275
6	\$2295	514	88	873	330
7	\$2522	514	88	972	386
8	\$2744	514	88	1062	428
9	\$2978	514	88	1168	493
10	\$3232	514	88	1263	540

More than 10	Add \$29 for each extra person
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For 2019-2020 MBSAC Chart, go to:

<http://www.cdss.ca.gov/Portals/9/ACL/2019/19-47.pdf?ver=2019-05-15-133708-453>

CalFresh Maximum Allotment and Standards

The CalFresh Maximum Allotment for FY October 2019 - September 2020:

FFY 2019 - 2020 Maximum Allotment by Household Size								+ Each additional person
1	2	3	4	5	6	7	8	
\$194	\$355	\$509	\$646	\$768	\$921	\$1018	\$1164	\$144

Standard Deductions for FY October 2019 - September 2020:

Household Size	Standard Deduction
1 to 3 persons	\$167
4 persons	\$178
5 persons	\$209
6 or more persons	\$240

Additionally, the maximum excess shelter deduction has increased from \$552.00 to \$569 and;

- the homeless shelter allowance is \$152.06.
- the Standard Utility Allowance (SUA) is 432.00
- the Limited Utility Allowance (LUA) is \$135.00
- the Telephone Utility Allowance (TUA) of \$18 remains unchanged.

For more information please refer to: [All County Information Notice 54-19, CalFresh COLA Adjustment, Effective October 1, 2019](#)

NOTE: The previous fiscal year CalFresh Maximum Allotment for Oct. 2018 - Sept. 2019 can be found here:

http://www.cdss.ca.gov/Portals/9/ACIN/2018/I-54_18.pdf?ver=2018-08-21-134023-997

CalWORKs Eligibility Handbook	The Diaper Bank
	Effective 11/15/18

55-45 The Diaper Bank

The Diaper Bank is a partnership between CalWORKs, the Office of Early Care and Education, Help a Mother Out, and family resource centers.

The Diaper Bank serves CalWORKs families, with children under 3 years old. Eligible families may receive up to 6 packages of FREE DIAPERS per month by visiting designated Family Resource Centers.

All active CalWORKs cases (SAR & ARCO) with children under the age of 3 will be eligible for free diapers but not other ineligible children, including SSI.

Eligible clients will be able to pick up free diapers at participating Family Resource Centers (FRC's). There are 13 FRC sites. (see below) Diaper pick-up is also at 170 Otis Street and in the lobby at the Children's Council desk, and 3120 Mission Street. For diaper distribution (refer to the list of sites below for times and locations in this section. Clients will be referred to Service Center for questions regarding access to free diaper service and this document consists of talking points for you to respond to their questions.

You can access the Diaper Bank spreadsheet for list of clients on the HSA intranet by going to the site and;

- Click on the **CalWIN** container (in the upper left hand corner)
- Click on **County Management Reports**
- Click on **CalWORKs**
- Scroll down to "**Diaper Bank**", click on link and open spreadsheet)

The emergency diaper service provided by the CW Social Work unit will continue as a separate service.

Who is eligible?

Active CW cases (SAR & ARCO) that include children under the age of 3, except for children on SSI. CalLearn clients will also be eligible for their children under 3. The county will create lists of active CW cases with children under the age of 3 once a month (4th Monday/ month).

This list will be shared with "Help a Mother Out" (HAMO), who in turn will provide the data base to participating FRC's (Go to spreadsheet of eligible clients for the current month on the HSA intranet).

Every month, only newly eligible clients will receive a letter of their eligibility. Once deemed eligible a family remains eligible for 90 days regardless of CW status, except if the child reaches age 3 or moves to another case, including FC.

How do clients find out they are eligible?

1. Clients will be informed by mail that they are eligible. They will receive a letter describing the program as well as a brochure that will indicate which FRC's are participating and the hours of operation for each FRC.
2. Clients will be informed during CW orientations at intake and RRR of the diaper program. A flyer will be included in the intake packet and intake worker will inform clients of the program.
3. Clients may call Service Center to inquire about their eligibility to this program.

How do clients pick up diapers?

- Clients will go to a participating FRC during the FRC's diaper distribution hours.
- Client will use their EBT card and an ID to pick up diapers.
- CalLearn clients will pick up the diapers by providing only their letter of eligibility to the FRC. They do not need an EBT card or ID to pick up diapers.
- Clients who do not have an ID need to show a piece of mail with their name as addressee that matches the name on the EBT card.
- In 2-parent families, either parent can pick up the diapers showing their EBT card and ID.
- Parent may designate an alternate in writing to pick up diapers.

How many packs of diapers can each child under 3 get?

Eligible child/ren will receive 6 packs of diapers per month. If there is more than one child under 3 in the home, each will receive 6 packs of diapers per month. There is no rollover from month to month. Clients can get the diapers at any of the participating FRC's during the days/times listed above.

What FRC's are participating in the pilot and when can clients pick up diapers?

See brochure posted on the O-drive under CalWORKs/Diaper Project for participating FRC's and their address and days/hours when client can pick up diapers.

NOTE: Clients can pick up diapers at 170 Otis St, lobby at the Children's Council desk. As of 8/1/16 clients will be able to pick up diapers at 3120 Mission St. as well.

Who do the Eligibility Workers contact with questions?

Contact the CalWORKs Eligibility Manager.

NOTE: The list of new eligible clients is created on the 4th Monday of each month. Children not approved at that date will have to wait for the next month's list, to be approved the following month.

Example: List created 3/27/17, child not active yet, child active and approved on list created 7/25/17. Child eligible for diapers starting in August.

Can anyone else pick up the diapers for the child(ren)?

Yes, the only person eligible to pick up diapers has to be named on the EBT card, unless they designate an alternate in writing. In 2-parent families either parent with an EBT card can pick up the diapers. The CalLearn parent can pick up diapers for their child by showing the letter of eligibility.

The parent/care taker can designate another person to pick up the diapers. They must fill out the Diaper Bank Alternate Designation Form and the designated alternate has to bring that form with them to pick up diapers and show an ID.

What if the client has lost their EBT card?

Client needs to request a replacement EBT card to bring to the FRC to receive diapers.

What about other children in my family?

All children under 3 years are eligible, except for children on SSI. Children older than 3 years are not eligible for diapers, even if they are still in diapers.

Family Resource Centers Issuing Free Diapers – Address and Pick-Up Times

1. APA FAMILY SUPPORT SERVICES - CHINATOWN

9:00 am to 3:30 pm, Mon

10 Nottingham Place • (415) 617-0061

MUNI: 8 Bayshore, 10 Townsend, 12 Folsom/Pacific, 30 Stockton, 45 Union

2. APA FAMILY SUPPORT SERVICES - SUNNYDALE

9:30 am to 5:00 pm, Mon

1704 Sunnydale Ave. • (415) 802-8568

MUNI: 8 Bayshore, 9 San Bruno, 56 Rutland

3. APA FAMILY SUPPORT SERVICES - VISITATION VALLEY

9:30 am to 5:00 pm, Mon

50 Raymond Ave. • (415) 578-9310

MUNI: 8 Bayshore, 9 San Bruno, 54 Felton, T-Third Street

4. BAY VIEW HUNTERS POINT YMCA

10:00 am to 3:00 pm, Mon

10:00 am to 7:00 pm, Tues, Wed, Thur

1601 Lane Street • (415) 822-9404

MUNI: 23 Monterey, 44 O'Shaughnessy, 54 Felton, T-Third Street

5. COMPASS CONNECTING POINT: A FAMILY RESOURCE CENTER

1:30 pm to 3:30 pm, Mon & Fri

995 Market Street, 5th Floor • (855) 234-2667

MUNI: Powell Street Station, F Market,

J Church, K Ingleside, M Ocean View, N Judah,

T Third Street, 5 Fulton, 6 Haight/Parnassus, 7 Haight/Noriega

6. GOOD SAMARITAN FAMILY RESOURCE CENTER

4:00 pm to 6:00 pm, Tues & Thur

1294 Potrero Ave. • (415) 401-4253

MUNI: 9 San Bruno, 33 Ashbury/18th, 48 Quintara

7. FAMILY SERVICE AGENCY-YOUNG FAMILY RESOURCE CENTER

10:00 am to 3:00 pm, Thur

2730 Bryant Street, 2nd Floor • (415) 695-8300

MUNI: 9 San Bruno, 33 Ashbury/18th, 48 Quintara

8. LA CASA DE LA MADRES

(415) 503-0500 - 9:00 am to 5:00 pm, Monday through Friday
1663 Mission Street, Suite 225
(Between South Van Ness and Division/Duboce)
San Francisco, CA 94103

9. OMI FAMILY RESOURCE CENTER

10:00 am to 12:00 pm, Mon, Wed, Thur
1:00 pm to 3:00 pm, Mon, Wed, Thur
156 Broad Street • (415) 406-1370
MUNI: M Ocean View, 54 Felton

10. SAN FRANCISCO CHILD ABUSE PREVENTION CENTER

4:00 pm to 6:00 pm, Mon & Thur
1757 Waller Street • (415) 668-0494
MUNI: 7 Haight, 33 Ashbury, 37 Corbett, 43 Masonic, N-Judah

11. SOUTH OF MARKET FAMILY RESOURCE CENTER

9:00 am to 12:00 pm, 1st Wed
1:00 pm to 4:00 pm, 2nd, 3rd & 4th Wed
(At Yerba Buena Gardens, between bowling alley & Children's Creativity Museum)
790 Folsom Street • (415) 820-3508
MUNI: Powell Street Station, 8 Bayshore, 12 Folsom, 30 Stockton, 45 Union/Stockton

12. MISSION WORKFORCE DEVELOPMENT CENTER

9:30am-11:30am and 1:30-4:30pm Mon-Fri
3120 Mission Street • (415) 401-4800
MUNI: 14 Mission, 27 Bryant, 49 Van Ness/ Mission, 67 Bernal Heights

13. SAN FRANCISCO HUMAN SERVICES AGENCY

@ Child Care Resource Desk
9am-12pm & 1pm-4pm, Mon, Tues, Wed, Thur
9am-12pm, Fri
170 Otis Street • (415) 557-5100
MUNI: 14-Mission, 49-Mission/Van Ness, and 9-San Bruno

CalWORKs Eligibility Handbook	Deceased Child 55-46
	Effective 11-14-16

55-46 Deceased Child

Effective January 1, 2016, Assembly Bill (AB) 433 requires that a deceased child continue to be considered a member of the AU for the month in which the death occurred, and the following month. AB 433 also prohibits sanctions being applied or overpayments established on grieving CalWORKs recipients who fail or refuse to participate in WTW activities in the month, and following month of the child's death.

Receiving Notification of Deceased Child

- If EW finds out first about deceased child, EW will e-mail assigned ES to take appropriate action as/if needed.
- If ES finds out first, ES will request a task by e-mail to CWClericalTMT@sfgov.org. EW will extend eligibility to deceased child for same and next month and run EDBC for good cause if applicable.
- EW and ES will include name of deceased child and date of death in their communication.
- EW will refer to MH Services and SWU if client is open to it.
- ES will refer to MH Services, SWU and to FSP as appropriate and with client agreement.

Mid-Period Voluntary Reporting

SAR

Under SAR, the AU is does not have to report the death of a child until the reporting month. Reporting the death of a child under SAR is **voluntary** and if a client reports

that a child in the AU is deceased prior to the reporting month, the EW will initiate mid-period county action on the case to re-determine eligibility and benefits. Benefits shall not be decreased in the month of the death or the following month.

Example: If the case is in the January through June SAR payment period. A child in the AU dies in February. The AU is under no obligation to report the death until their semi-annual report is due in June, at which point benefits would be decreased beginning in July and no overpayment would be assessed. However, if the AU reports the death in February, the EW shall not decrease the AU's benefits based on this death until April 1st, with timely and adequate notice.

-

AR/CO

Under AR/CO, reporting the death of a child in the AU is **mandatory** within 10 days of the death. This means that clients are required to report the death of an AU member within 10 days and the EW is required to redetermine benefits based on the change in household effective the 1st of the month following the change.

Example: The case is in the January through December payment period. A child in the AU dies on February 26th. The AU is required to report this death within 10 days (by March 8th) and the EW will remove the deceased AU member effective April 1st. If the AU does not report the change in time for the EW to decrease benefits by the 1st of the month following, an overpayment will be assessed for any benefits they were not entitled to receive.

If the child is the only eligible child in the AU, the case shall be discontinued, at the end of the following month of the child's death.

Things to Remember: Redetermination of benefits for SAR and ARCO is based on the month of death not month of reporting.

Click on this link for more information on this subject: [ACL 16-90 AB 433 SAR and AR/CO Reporting; death of a child](#)

SAR7 and ARCO Reporting

Client must report death of the child, at SAR7/RRR in the report month of the reporting cycle for SAR/ARCO cases.

EW will initiate mid-period action on the case to re-determine eligibility and benefits at the end of the following month in which the death has occurred.

- If the child is the only eligible child in the AU, the case shall be discontinued, at the end of the following month of the child's death.
- If the death is not reported at SAR7 and RRR, good cause must be determined.
- If good cause is found, record reason in the case comments.
- If good cause is not found, determine potential OP/OI.

	##
CalWORKs Eligibility Handbook	Family General Relief 55-47
	Effective: 11-29-16

55-47 Family General Relief

NOTE: Maximum Family Grant (MFG) will end December 31, 2016 and cases with MFG children are required to cooperate with Child Support Services (CSS) starting 1/1/17, except for aid codes K1 and 3F.

Overview

Family General Relief (FGR) provides interim assistance to families with child(ren), 18 years or under who would otherwise be eligible for CalWORKs, had it not been for the "12 month indigent sponsored non-citizen" regulations outlined in EAS Manual 01-09, Section 43-119; effective 10/10/01.

Only children in the AU that lose CW eligibility under this criteria are eligible for this relief and grant calculation is based on number of children but available to the entire family.

I. Eligibility

CalWORKs eligibility will need to be determined before FGR is considered.

a) Application Process

- CalWORKs application forms and processing standards apply to determine eligibility for FGR, regardless if it's for one or more members of the AU.
- CalWORKs eligibility will be determined first, then FGR for CW eligibility. CW ineligibility needs to be due to indigent sponsored non-citizen requirement as outlined in EAS Manual 01-09, Section 43-119; effective 10/10/01.

b) Income and Resources, Deductions, Issuance and Benefit Level

- CalWORKs eligibility rules apply for FGR

c) Continuing Eligibility

- Upon approval of FGR, the AU is required to submit a monthly report, CW1, to maintain on-going eligibility. The report is due by the 5th of each month for changes in the prior month.
- Benefit amount is determined based on CW 1 Monthly Earned Income and Asset Report.
- The monthly report is due by the 5th working day of the month and cannot be signed and submitted prior to the 1st day of the month.
- Timely submission of the report is required for benefits to be available by the 15th day of the month.

d) Termination of FGR

The following conditions will result in termination of FGR benefits:

- Client becomes eligible for CalWORKs
- Reported income exceeds the CalWORKs Income Reporting Threshold (IRT)
- Client request termination
- Loss of FGR eligibility
- Failure to submit monthly report

II. Issuance and Aid Code

Issuance of FGR by designated EW supervisor will be under aid code A1.

III. FGR Noticing

- FGR Notice will be sent to prospective eligible families per loss of CW eligibility based on the "12-month indigent sponsored non-citizen" regulations described in EAS 43-119.
- FGR Notice of Eligibility will be issued by the 15th of the month. This will occur after determination of eligibility and will be based on the prior month's report that is due by the 5th of the current month.

IV. FGR Welfare-to-Work

- Job Search assistance will be provided to adult member in the AU, unless eligible for CalWORKs and Welfare-to-Work services. Includes ancillary services such as; child care stage 2 and transportation.

V. Appeals and Overpayments

- HSA Appeals and Overpayments Division will handle the standard appeal process. OP unit will not count ACF as OP nor create a claim for ACF issuances.
- Appeals on FGR termination will be processed at the program level and final decisions will be made by the Program Manager.

- Clients will have 30 days to appeal termination by contacting the FGR liaison or by timely submitting the form to request an appeal.

Zero Grant MFG effective up to 12/31/16

CalWORKs families with MFG child(ren) and Zero CalWORKs grants are aided with All County Funds (ACF) cash benefits and support services are treated as if MFG is repealed. Cash aid will be funded with county funds. All other CW eligibility and WtW regulations will apply.

The CalWORKs eligible parent(s) of MFG child(ren) will be aided with ACF cash aid only to the extent that they have time remaining on the clock. MFG child(ren) will continue to be eligible for ACF cash aid if the parent(s) time out.

MFG child(ren) receiving ACF cash aid will be re-evaluated after 2 years for CW eligibility. ACF cash issuance counts toward two-year break in aid.

HSA Appeals and Overpayments Division will handle the standard appeal process. OP unit will not count ACF as OP and will create a claim for ACF issuances.

56 - Case Records

CalWORKs Eligibility Handbook	Voter Registration : Section 56-5
	Effective 4/2/18

56-5 Voter Registration

I. Overview

Under the Federal National Registration Act of 1993, whenever an individual applies for any "agency based" need such as cash aid, Medi-Cal, or CalFresh, they shall have access and assistance with voter registration. The public assistance programs include: CalFresh, California Work Opportunity and Responsibility to Kids (CalWORKs), Medi-Cal, Women, Infants and Children (WIC) nutrition program, and In-Home Supportive Services (IHSS).

Under federal law, the NVRA requires states to provide voter registration opportunities at all offices that provide public assistance and all offices that provide state-funded programs primarily engaged in providing services to person(s) with disabilities. All applicants and recipients must be given a VRC and a NVRA Voter Preference Form, regardless of whether they indicate they want to register to vote or not. This policy replaces the former policy in [ACIN I-09-09](#) to "offer" voter registration materials. If counties fail to comply with the NVRA, the county and state can be subject to a civil action by the United States Department of Justice or a private party.

NOTE: Issued April 2, 2018, ACL 18-39 outlined Secretary of State/NVRA changes for eligible 16 and 17 year old minors and the new 3 day time frame for sending NVRA VRCs.

II. References:

All County Letter:	ACIN	CalWORKs PIMs / How-To's:	Handbook Sections:	EAS:
ACL 95-26 , ACL 96-21 , ACL 96-01 , Medi-Cal All County Welfare Director's Letter (ACWDL) No. 94-85 , 95-36 , 95-78 , 96-01 , ACL 18-39	ACIN I-46-94 , ACIN I-56-95 , ACIN I-17-96 , ACIN I-09-09 , I-04-13 , I-01-12	CW PIM 96-7, CW PIM 06-09 , CW PIM 11-15	CW HB 57-1 Reinvestigation Process	

NRVA References:

- I. **Secretary of State's NVRA Webpage:**
<http://www.sos.ca.gov/elections/nvra/>
- II. **Secretary of State NVRA Coordinator:**
Phone: (916) 657-2166
Fax: (916) 653-3214
E-mail: nvra@sos.ca.gov
- III. **Secretary of State California NVRA Manual:**
<http://www.sos.ca.gov/elections/elections-pub-res.htm>

- IV. **NRVA Voter Preference Forms:**
<http://www.sos.ca.gov/elections/nvra/training/voter-preference-forms.htm>
 Languages: English, Spanish, Chinese, Hindi, Japanese, Khmer, Korean, Tagalog, Thai, Vietnamese
- V. **Secretary of State's NVRA Training Webpage for Public Assistance Agencies:**<http://www.sos.ca.gov/elections/nvra/training/>
- VI. **United States Department of Justice Civil Rights Division Voting Section**
Website:http://www.justice.gov/crt/about/vot/nvra/activ_nvra.php
- VII. **Voter Information:**<http://www.sos.ca.gov/>
- VIII. **County Elections Office**
Roster:http://www.sos.ca.gov/elections/elections_d.htm

III. Definitions:

- A. **NVRA** - The National Voter Registration Act of 1993, also known as The Motor Voter Act, was signed into effect by United States President Bill Clinton on May 20, 1993, however, compliance did not become mandatory until 1995. The legislation required state governments to allow for registration when a qualifying voter applied for or renewed their driver's license or applied for social services.
- B. **VRC** - Voter Registration Card
- C. **Voter Preference Form**- formerly entitled VoterRegistration Interest/Declination Form
- D. **SOS** - Secretary of State

IV. Policy & Procedure:

The National Voter Registration Act requires workers to provide all applicants and recipients with a VRC and a NVRA Voter Preference Form regardless of whether they indicate they want to register to voter or not.

- A. **Under Federal law EW's must provide the following services:**

INTAKE:

1. Provide in clients language, and collect a VRC at Intake or Group Informing Session;
2. Provide in clients language, and collect a NVRA Voter Preference Form at Intake or Group Informing Session;
3. Provide assistance in completing these forms, if requested;
4. Provide the same degree of assistance to all applicants, including persons with disabilities, when completing VRCs either in their home or in person as offered when completing the agency's own application forms;
5. Inform clients that receipt of benefits is not linked in any way to the client's decision to register or not register to vote;
6. Ensure that workers do not seek to influence the client's decision to register or not register to vote, or the client's political party preference;
7. **If a client declines** to indicate whether they wish to register or that he/she will complete the VRC at a later time, the **Voter Preference Form should still be completed.**
8. Provide all eligible 16 and 17-year-old clients with a Voter Registration Card (VRC) at the time of application, recertification, or when the agency is notified of an address change, regardless of whether or not the client indicates they want to register to vote or not.

CARRYING:

1. Provide in clients language, and collect a VRC at Annual Redetermination & Change of Address;
2. Provide in clients language and collect a NVRA Voter Preference Form at Annual Redetermination & Change of Address;
3. Provide assistance in completing these forms, if requested;
4. Provide the same degree of assistance to all applicants, including persons with disabilities, when completing VRCs either in their home or in person as offered when completing the agency's own application forms;
5. Inform clients that receipt of benefits is not linked in any way to the client's decision to register or not register to vote;
6. Ensure that workers do not seek to influence the client's decision to register or not register to vote, or the client's political party preference;
7. **If a client declines** to indicate whether they wish to register or that he/she will complete the VRC at a later time, the **Voter Preference Form should still be completed.**
8. Provide all eligible 16 and 17-year-old clients with a Voter Registration Card (VRC) at the time of application, recertification, or when the agency is

notified of an address change, regardless of whether or not the client indicates they want to register to vote or not.

B. Collection of Voter Preference Forms:

- The NVRA Voter Preference Form will not be scanned into i-files, they are retained in a cabinet by reception staff.
- For NVRA preference forms distributed at Group Informing, the facilitator will collect, and distribute Voter Registration Forms to **all** applicants regardless of whether they indicate on preference form they want to register to vote or not.
- For individual intakes, annual redeterminations, or cards that are received by mail, workers will need to submit NVRA Preference Forms, or completed Voter Registration Cards to bin in designated reception area.

NOTE: There is no longer a "voluntary reporting requirement" regarding the total number of VRC's and NVRA Preference Forms received. Voter Preference Forms must be kept on file for 24 months.

C. Influencing Applicants and Recipients:

There are restrictions that have been placed by the NVRA on how workers may interact with applicants and recipients when providing the opportunity to register to vote. Workers shall not:

- Influence applicants or recipients political preference or party registration in any way;
- Display any political preference or party allegiance;
- Make any statement to an applicant or recipient, or take any action to the purpose or effect of which is to discourage the applicant or recipient from registering to vote, or;
- Make any statement to an applicant or recipient, or take any action to the purpose or effect of which is to lead the applicant or recipient to believe that a decision to register or not to register has any bearing on the availability of services or benefits.

V. Instructions for Completing the NVRA Preference Form:

The NVRA Preference Form was recently redesigned and simplified to 1.) allow clients and agency staff to complete the form more quickly; and 2.) to allow agencies to use an electronic form and encourage online vote registration whenever possible.

- a. **In Person-** Workers *must* ask the client to complete the **Voter Preference Form**. If the client chooses not to register at the agency, but still takes a blank **Voter Registration Card** home, the worker should ask the client to complete the Vote Preference Form and check the "No" box, since the applicant is choosing not to register at that time.
- b. **Mail Transactions** - If the **client fails to complete and return** the Voter Preference Form, workers should attempt to follow up once with the client to find out whether the client would like to register to vote or if assistance is needed. Workers are not required to complete Voter Preference Forms on behalf of clients who choose not to return the Voter Preference Form in a transaction. In such instances, after following up with the client, **workers should include a blank Voter Preference Form with the client's name, and send it to i-files for indexing and scanning, NO TMT. Be sure to place the case number on the document.**
- c. **Phone Transactions** - Workers must ask the following question for all clients who are applying for benefits, renewing, or changing address: "If you are not registered to vote where you live now, would you like to register to vote?" The client's response must be documented on a preference form, and if the client indicates "yes", the EW shall provide the client with the opportunity to vote by sending the client the VRC.
 - If the applicant/recipient fails to respond to the question, the EW shall mail the VRC.
- d. **Internet Transactions** - All applicants that have access to apply for benefits through my Benefits CalWIN, must be able to submit a voter preference form online and be able to vote on the Secretary of State's California Online Voter Registration (COVR) website. At this time, this functionality is not available however CalWIN, in coordination with the Secretary of State in the process of updating the online benefits enrollment website to ensure that we are in compliance with this requirement.
 - Until this option is available applicant will still be offered the VRC at the time of application.

VI. Client Assistance:

A. Workers are required to assist applicants and recipients with filling out the VRC:

- Every individual must be provided with the same degree of assistance in completing the voter registration application as they are provided in completing any other agency form or application, unless the applicant/recipient declines assistance.
- When making a home visit, or providing services in an applicant's home, workers must provide voter registrations services at the persons home.
- Workers shall advise each applicant and recipient that assistance with filling out the VRC will be provided if the applicant or recipient wishes, however the applicant/recipient has the right to complete the VRC without assistance.

B. Language Requirements:

- Workers must take steps to ensure that clients are offered voter preference forms and voter registration cards in all languages that are required by Section 203 of the Federal Voting Rights Act. (Languages are listed above)

VII. Agency Responsibility:

- A. Accept and transmit completed VRCs to the appropriate county elections officials within 3 days; however, as a best practice, the California Secretary of State advises county welfare agencies to forward NVRA VRCs on a daily basis;
- B. Obtain VRCs from the county elections office to ensure proper tracking of NVRA VRCs;
- C. County offices must retain the Voter Preference Form for 24 months. Counties may determine the manner for filing and retaining the forms (e.g., with the client's case file or filed separately). An electronic record of the form or the individual's response (Yes/No/Already registered) may be kept in lieu of retaining paper forms; and

- D. Provide staff training annually on the NVRA requirements and how to assist clients with voter registration.

Voter Registration Cards:

The NVRA requires Counties to give applicants applying for benefits, renewal, or a change of address a **Voter Preference Form** and a **VRC** so that the applicant may register to vote. The NVRA also requires all states to accept the **National Mail Voter Registration Form**, but allows each state to develop its own voter registration form, as long as it is equivalent to the federal form. Public assistance agencies should make every effort to distribute the California VRC, rather than the National Mail Voter Registration Form, in order to ensure county election officials can properly track and report the number of registrations coming from public assistance agencies.

Procedures for Ordering VRC's:

In California, the SOS supplies VRCs to county elections officials. The SOS prints county-specific VRCs including a postage-paid envelope and the county elections office address in the county where the agency office is located. In turn, county elections officials distribute supplies of VRCs to public assistance agencies within the county. County election officials record the serial number ranges of VRCs distributed to public assistance agencies in order to track the number of completed VRCs returned and attribute new registrations to the public assistance agencies providing voter registration services under the NVRA. Therefore, in order to ensure proper tracking and reporting of NVRA voter registrations, Counties must obtain supplies of VRCs exclusively from their county elections office. When ordering VRCs, it is important that County staff identify themselves as a NVRA public assistance agency.

Retention of Voter Preference Form:

Counties must retain the completed Voter Preference Form for two years. However, federal and state laws do not state the manner in which the forms are to be filed within the agency. The SOS office recommends CWDs store the Voter Preference Form in a central, chronological file (e.g. case file), so that CWD staff can easily determine how many Voter Preference Forms are received in a given month, which can help demonstrate NVRA compliance. Voter Preference Forms and responses may be stored electronically.

NVRA Coordinator:

Counties should appoint one staff person at each agency office to be in charge of NVRA compliance, which includes arranging staff training, ordering supplies of VRCs from the county elections office, and ensuring VRCs are submitted in a timely manner to the county elections office.

SOS and CDSS Quarterly NVRA Meetings:

Quarterly NVRA meetings will be arranged for Counties who are identified as potentially out of compliance under the NVRA. The identified county/counties director(s), SOS, CDSS, and County Welfare Director’s Association (CWDA) representatives will be invited to these quarterly meetings to identify and resolve any issues regarding NVRA compliance. Counties that are identified as fully complying with the NVRA requirements will also be invited to attend to share best practices in regard to NVRA compliance.

CalWORKs Eligibility Handbook	Case Records - General 56-1
	Effective 12-11-19

56-1 Case Records - General

I. Background

1. 1. Policy

The California Department of Social Services regulations require the county to maintain a case record for each person receiving aid or services, or for whom application is made, and specifies its contents. The record must identify each child and their parents, their addresses and household composition. An adequately maintained record serves several purposes:

- a. Establishes that public funds have been and are provided on the basis of established eligibility, or that funds were denied or discontinued on the basis of facts establishing ineligibility.
- b. Provides a basis for periodic review and evaluation of eligibility and grant factors.
- c. Conserves agency effort by preserving information already gathered, and facilitates uninterrupted service regardless of changes in personnel.

- d. Eliminates dependence upon memory of guess work when misunderstandings or controversies arise.
- e. Serves as a tool in supervision in that it is one of the supervisor's main sources of information for evaluating workers and for identifying areas where help or training is needed. It also serves for teaching purposes when inducting new staff.
- f. Reflects the effect of policy, and may serve to identify the need for change in policy.

2. References

- [ACL 16-02](#)
- [California Evidence Code \(EC\) Section 1040](#)
- MPP 19-005, 19-006, [22-001\(a\)\(6\)](#), [22-051.1 - 22-051.31](#), & [22-073.232\(c\)](#)
- [WIC 10850](#) & [11206](#)

II. Case Record Content

The case record should only contain facts relevant to the applicant or recipient's case.

1. CDSS requires that the case record include:

- a. Mandated and appropriate forms, including the client's application(s) for aid;
- b. All evidence obtained to support linking and non-linking factors of eligibility;
- c. The original or a copy of pertinent forms completed during the determination or redetermination of eligibility;
- d. The basis for worker action granting, denying, changing, withholding, canceling or discontinuing aid;
- e. The computation of any overpayment and the basis for conclusion that the overpayment is or is not subject to adjustment or repayment;
- f. The worker's evaluation of the applicant's ability or inability to understand their program rights and responsibilities;
- g. Records of any intra-program status change;

- h. For recipients who are patients in a public/private medical institution, all information pertinent to determination of eligibility or ineligibility;
- i. Record of certification (or recertification) of the recipient for medical care under Medi-Cal;
- j. Entries and notations made in the case record (the case narrative).

2. Components of the Case Record

The case record is made up of the following parts:

- a. The client's record in the State Automated Welfare System (SAWS), including case comments and notices and letters stored in SAWS;
- b. All scanned case-related documents pertaining to eligibility and case management that are stored in i-Files, including information received from external sources (i.e. IEVS reports, employment information, etc.);
- c. Documents maintained in a confidential paper file outside of SAWS and i-Files that have not migrated into an electronic format, such as:
 - Domestic Violence Sworn Statements
 - Learning needs assessments
 - Court documents and court orders related to sexual, physical, or mental abuse
 - Restraining orders
 - Documents or statements regarding criminal background

3. Confidentiality of Records

The entire case record is confidential, and not open to review for any purpose not directly connected with the administration of the program.

a. Exceptions That Allow Case Record Access

Under certain limited circumstances, case records may be inspected. These include:

- i. Client review of their own case record, including in conjunction with a state hearing or administrative disqualification hearing (ADH).
 - ii. Review of the client's case record by an individual or group approved by the client (an authorized representative [AR]).
 - iii. Review of a minor's case by that minor's parent or guardian (with the exceptions noted below related to confidential and privileged information).
 - iv. Access by Special Investigations Unit (SIU) to files and records that may be relevant to an investigation.
- b. Privileged and Confidential Information:

Access to some information within the case record is restricted further, and not open to review even under circumstances which normally allow for inspection (such as review by the client themselves). This information is considered privileged or confidential.

- i. Privileged information/documents include:

Those considered privileged communications under California Evidence Code, including:

- Information/documents covered by attorney-client privilege (Pursuant to Evidence Code 954)
- Informant information (if the information relates to law enforcement or an investigation, pursuant to Evidence Code 1041).
- Medical records and related information (physician-patient privilege, pursuant to Evidence Code 990).

- ii. Confidential information/records may include:
 - (1) Information and records related to another adult or head of the household (whether that adult is in or out of the home at the time of the request)
 - (2) Records related to a minor when a professional, such as a health care provider, determines that review of the documents would have a detrimental effect on their professional relationship with the minor or on the minor's physical safety or psychological well-being.

(3) Information related to medical services received by minors who can legally consent to the treatment/services provided (i.e. Minor Consent Medi-Cal services).

(4) Documents/information related to:

- Mental health or substance abuse treatment
- Learning disabilities
- Domestic violence
- Criminal background

(5) Whereabouts of an absent parent.

(6) Information regarding the status or whereabouts of child(ren) removed from the home by Family and Children's Services.

(7) Information from a third party that was not obtained through a client request.

(8) Any information or reference to an SIU referral or investigation.

iii. Exceptions that allow access to Confidential or Privileged Information:

There are some exceptions that allow access to information considered confidential or privileged within the case record:

(1) If another adult who is the subject of the information provides written authorization for their records to be reviewed.

- - Records for 2-parent households should be carefully reviewed to determine the subject(s) of the information/documents.

(2) If the records can be appropriately redacted of the privileged or confidential information.

- „ - If a document contains entirely privileged or confidential information and cannot be redacted, the document would not be made available for review.

(3) If the individual requesting access to the record/information is the holder of the privilege or the subject of the confidential record, then privilege/confidentiality does not apply.

- „ In most cases, the holder of the privilege will be the client.
- „ - Cases involving current or past domestic violence must be carefully reviewed to ensure the privacy and safety of individuals involved.

Note: Any questions related to confidentiality/privilege, and whether information or documents within the case record can be shared, can be referred to a supervisor.

III. Access to Case Records

Case record review may be conducted by the client themselves and/or their AR. Access may be in the form of a request for specific information or documents, or access to the entire case record.

1.

Authorized Representatives

An authorized representative (AR) is a person or group that has been granted permission by the client to:

- a. Act for/on behalf of the client during the state hearing or administrative disqualification hearing process, and/or
 - b. Review their case record.
- An AR may be legal counsel (including Bay Area Legal Aid staff), a family member, another service provider or advocate working with the client, or any other individual given permission by the client.
 - The AR requesting access to the case record does not have to be the same individual acting as the AR on behalf of a client at a hearing.

- CDSS policy provides the AR the same level of access to the case record as the client themselves.

2. Documentation Required for an AR

In order for an AR to be granted access to a client's case record, the county must have documented permission from that client. This authorization can be provided in writing, by phone, or verbally, and must be obtained prior to access being granted.

a. Written Authorization:

- Must include the name of the AR, and be signed and dated by the client.
 - Written authorization expires one year from the date it is granted and signed by the client, unless:
 - i. The client limits access to a shorter time period and the specific end date is documented; or
 - ii. The client informs the county that the authorization has been revoked; or
 - iii. The written authorization and review request relates to a pending hearing, in which case the time period (if not limited or revoked by the client) will extend to the final disposition of the hearing.
- Form 1015 CalWORKs Case Record Request Form will be used to document written authorization.

b. Telephone Authorization:

- Accepted in place of written authorization if the client's identity has been verified.
- Duration will be limited to one day, and should be followed by a written authorization.
- Client must call in advance to notify staff of the identity of the AR.
- Information should not be given by phone to any individuals representing themselves as ARs.

c. Verbal Authorization:

- May only be accepted when the AR is accompanied by the client in person, and is only valid for that occasion.

- May be accepted when a parent or guardian is present with an aided child and wishes to review the child's case record.
- Written authorization should also be obtained if possible.

3. Case Record Requests

The client/AR may request access to the case record, or specific documents from their case record, at any point in time. The client/AR is not required to give a reason for their request. Documentation or case record access provided to the client/AR must accommodate any identified ADA needs.

a. Approval of Request

A request for documents or access to the case record can be made to any CW staff. All requests will be forwarded to the Supervisor for review and approval by the Section Manager.

- i. If request is identified as related to a pending hearing, note this in the information provided to the Supervisor.
- ii. If the request is made by Bay Legal staff on behalf of a client, the CW Bay Legal Liaison Manager will review and assist in coordinating.

b. Required Forms

- i. Form 1015 CW Case Record Request Form
 - Use to document the client's request and/or to provide written authorization for an AR, whether the AR is acting on behalf of the client one time or providing ongoing assistance.
- ii. Form CW 2213 Response to Request to Inspect Case Record
 - Use to identify the document(s) the client/AR has requested, the documents provided, and what, if anything, was redacted or withheld due to confidentiality or privilege.
 - Completed form will be provided along with any documents given to the client/AR, or at the time of a case record review.

c. Document Request (hard copy or electronic version)

A client/AR may request copies of specific documents in the place of conducting an in-person case review.

Documents requested that are non-privileged and non-confidential will be provided as soon as practically possible, while allowing staff time to gather, review and redact the requested information.

The Manager(s) will identify the appropriate staff person to assist with fulfilling a record request. Review and redaction will be completed by a subject matter expert:

- For WtW-related requests, or eligibility related to WtW, the ES or SWS assigned to the case will assist in redacting records.
- For eligibility-related requests on cases assigned to the Service Center, the Eligibility Section Manager will assign an EW to assist, or the task will be assigned on rotation as needed.

d. Vital Records and Verification Provided by the Client

If a client requests a copy of a vital record or other verification that they previously submitted, the client is not required to complete a formal record request, and approval from the Section Manager is not needed. Bypassing this process should only be done when the client's need is specific and limited in scope (i.e. client needs a copy of their ID) and pertains to their current case. Staff must verify the client's identity and determine that the information requested is not confidential and/or privileged before providing any copies.

e. In-Person Review Request

Case review will be scheduled as soon as practically possible once a client/AR has made the request, while still allowing staff time to gather, review, and redact any case records.

In cases where there is a pending state hearing or administrative disqualification hearing (ADH), coordinate with the Appeals officer to combine the same records request submitted to the Program and Appeals into one, and let Appeals take the lead in handling the case record requests. If there is only a Program record request, then the client/AR has a right to review the

non-privileged and non-confidential information that was the basis for the action being appealed prior to and during the hearing.

The Case Review Coordinator and clerical staff will assist in scheduling the case review. The Coordinator will confirm when possible the type of issue(s) the client/AR wishes to review, and work with the Manager(s) to identify the appropriate staff to assist the client/AR.

- For WtW-related requests, or eligibility related to WtW, the ES or SWS assigned to the case will assist the client/AR during the case review. If the assigned ES is not available, the Unit Supervisor will identify another ES to assist.
- For eligibility-related requests on cases assigned to the Service Center, clerical will create an appointment in q-flow for the day of the scheduled case review. The case review task will be completed by the Duty Worker on that day.

NOTE: The client/AR may request specific records in advance as well as in-person access to the case record.

IV. Case Record Review

1. Preparing the Case Record:

All documents and information requested by the client/AR will be reviewed for confidential or privileged information and redacted as needed.

Clerical staff will save all components of the case record (identified in Part II, Section 2) in an appropriate electronic file format. Review and redaction will be completed by an appropriate staff person as assigned by the Section Manager(s).

If the request is related to a pending hearing, the program must coordinate with Appeals to assist in providing necessary materials for the hearing. This includes providing, in hard copy or electronic version, the regulations and other policy materials necessary for a client/AR to

prepare for the hearing. Appeals will then work directly with the client/AR about requested information needed for a hearing.

a. Case Records Outside of SAWS:

- Once all documents are saved, assigned staff will review for confidential or privileged information and redact as needed.
- The client/AR will not have any direct access into the i-Files system.

b. SAWS Records:

- SAWS record access is limited to documentation that can be printed from SAWS; screenshots are not considered documentation that can be provided.
- Case comments will be reviewed for confidential or privileged information and redacted as needed prior to the appointment day.

c. Confidential File:

- The client/AR may only access the confidential file documents if they are the subject of the records, and privileged information if they are the holder of the privilege (refer to Part II, Section 3b for more information).

d. Redaction:

If redaction is required, the documents may be printed and manually redacted. Hard copies printed for redaction should be securely stored.

- If a document contains entirely privileged or confidential information and redaction is not possible, the document should be withheld from review by the client/AR.
- The CW 2213 Response to Request to Inspect Case Record will be used to detail which documents were withheld or redacted.
- Redaction will be reviewed by the Supervisor before documents are provided to the client/AR, or made available for in-person review.

e. Document Requests:

- Specific documents requested by the client/AR may be provided by mail or for in-person pick up if the client/AR does not wish to review the case records in the office.
- Documents can be provided as hard copies or in an approved electronic file.
- The CW 2213 Response to Request to Inspect Case Record will be provided along with the requested documents.

2. Staff Responsibilities During Case Review

- a. Verify the identity of the client/AR and ensure appropriate authorization is on file if needed.
 - Obtain authorization if it is not already in file.
 - Written authorization should be obtained whenever possible.
- b. Provide the client/AR with an overview of the case record as needed.
 - Explain the types of information and documents contained in the case record.
- c. Provide the CW 2213 Response to Request to Inspect Case Record.
 - The completed form will be given to the client/AR at the time they review the requested documents.
- d. Remain with the client/AR throughout the entire case review.
 - The client/AR should never be left alone while accessing the computer or while reviewing printed documents.
 - Staff are the subject matter experts and should be available to assist the client/AR as needed.
- e. Assist the client/AR in identifying the documents or information they need.
 - Client/AR does not have to give a reason for their case review, but staff can ask questions that help identify the information the client/AR may be looking for.

- Client/AR may access all non-confidential, non-privileged information in the case record, but staff may assist the client/AR in identifying documents that would provide the most relevant information.
- f. Answer questions and clarify documents
- Answer any questions asked by the client/AR related to non-confidential, non-privileged information of the case record.
 - Clarify or explain the use or content of documents as needed.
- g. Navigate the SAWS system.
- SAWS will be available in read-only access.
 - Ensure information made available to the client/AR is limited to the case, program, and duration of the period under review.
- h. Provide Copies of Requested Information
- Printed hard copies or electronic versions of non-confidential, non-privileged documents will be provided upon request.
 - If needed based on coordination with Appeals, provide copies of regulations and evidence relevant to a pending hearing.
- i. Wrap Up Case Review
- Confirm that the client/AR has received all requested copies.
 - Ensure that any printed documents made available for review that are not taken by the client/AR are placed in confidential recycling bins.
 - Close all files and log off SAWS.
 - Document in case comments details of the case review, including the name of the client/AR who completed the review, details of the AR's authorization (if applicable), documents provided, and any other relevant details.

V. SIU Investigative Files:

SIU creates and maintains their own investigative files separate from the case record created and maintained by CW program staff. SIU files are also confidential, and similar to the program's case record, access to the SIU file is restricted.

1. SIU File Access

SIU files are not open to general review, even to the client who is the subject of the records and/or their AR. Any information concerning a referral to SIU, or even the fact of the referral itself, cannot be disclosed.

2. Exceptions for SIU File Access

If the information in the SIU file has been used by the program to take administrative action on a case, and a hearing has been requested or an ADH has been initiated as a result of that action, information from the SIU file can be disclosed under limited circumstances to:

- a. Prosecuting authorities involved in civil or criminal prosecutions in connection with administration of the program;
- b. Other program staff, when information in the SIU file is necessary for administration of the program;
- c. The client themselves, when a hearing has been requested and records in the SIU file are relevant to the issues of the pending hearing. Under these circumstances, the client may review non-privileged, non-confidential records and information that was used by program staff to make the decision that is the subject of the hearing.

3. Review of the SIU File

If a client/AR requests access to SIU files, request should be forwarded to the Supervisor. SIU will be notified of the request and client/AR will be referred to SIU to follow up.

CalWORKs Eligibility Handbook	Confidentiality 56-2
	Effective 12-01-08

56-2 Confidentiality

All records are confidential and are not open to examination for any purpose not directly connected with the administration of public assistance.

All personal documents supplied by the client in establishing his eligibility are his property and must be returned to him after the information is recorded or photocopied.

With the exception of "privileged communication" which should be kept separate from other material in the case record and easily removable (See Part II below), the client may examine his own case record and upon his written consent, his authorized representative may read it (See Part VI below for the procedure).

General information, not identifiable to any particular individual or family, is not subject to restrictions, although permission may be needed to communicate with the media (See Part VII of this section). Such questions as maximum aid payments, procedures for exchange of information between county and the Social Security Administration, general eligibility requirements, etc., may be answered, unless these questions apply to certain individuals. An acknowledgement that a person is receiving assistance is not general information. Since it identifies a specific individual, it is considered confidential information and caution should be used in its disclosure.

The basic purpose of the regulations on confidentiality is to protect applicants and recipients against identification, exploitation or embarrassment that could result from the release of information identifying them as having applied for, or received, public assistance. Violation of the Welfare and Institutions Code, Section 10850, by a county employee may be punished by fine or imprisonment. Therefore, the safest course of action if asked to release information from the case is to release it only after reading this material and the Division 19 regulations of the State manual. If questions still exist whether to release, request direction from supervisory staff.

NOTE: All papers that contain person information, including photocopies of CalWIN screen shots that contain personally identifiable information such as names or social security numbers must be put into the "Confidential" bins and not in the regular trash containers when discarded.

I. Penalties for Unauthorized Disclosure of Confidential Information

Employees or former employees who violate the rules in Division 19 of the Manual of Policies and Procedures regarding the release and possession of confidential information can be charged with a misdemeanor. In addition, if the unauthorized disclosure involves information obtained from a state or federal agency (e.g., IEVS), then other criminal or civil action may be taken.

A. Tax Information

"Tax information " is defined as any information supplied by the Internal Revenue Service or the Franchise Tax Board such as a taxpayer's identity, the nature, source, or amount of his earned income, unearned income, interest income, etc.

1. Internal Revenue Service

Unauthorized disclosure of federal tax information is a felony punishable by a fine in any amount not exceeding \$5,000, or imprisonment of not more than 5 years, or both, together with the cost of prosecution.

2. Franchise Tax Board

According to the California Revenue and Tax Code Section 19282, unauthorized disclosure of state tax information is a misdemeanor.

B. Employment Development Department (EDD)

According to the California Unemployment Insurance Code, Section 2111, unauthorized disclosure of information from EDD is a misdemeanor. This information includes not only the unemployment and disability insurance benefit claim records but also the wage data.

C. Any Confidential Information

According to state and federal law, the person who intentionally discloses personal information, not otherwise public, is subject to a civil action for invasion of privacy by the individual to whom the information pertains. The minimum award would be \$2500 in exemplary damages plus attorney's fees and other litigation costs.

II. Privileged Communication

Certain information is considered "privileged" and belongs to the owner of the privilege. In SFDHS case records, information therein is owned by the data subject, the client. SFDHS does not own the privilege but is mandated by law to assert it on behalf of the client to protect the client against embarrassment, identification, or exploitation. In addition, all "privileged" communications in the case record as identified below should be kept in a manila envelope labeled with the case number and name, marked "Privileged Communication" and filed in the case record under Section 1. Also see Part VI below, Case Record Access by the Client or Authorized Representative.

Privileged communication includes:

A. Informant information only if the information relates to law enforcement or investigation.

In such instances this material should be given to SIU to be held in a special folder as under certain circumstances SIU investigatory information is subject to review even by the data subject.

B. Medical, psychological, or psychiatric examination results belong to the data subject: the client, not to the doctor.

However, if the release of this type of information to the client is deemed detrimental to the physical or mental health of the client or the children, then the worker must contact the author of the report and let the author, the physician, psychiatric or psychological health professional make the determination. This type of situation will rarely arise, but an example would be if there was a psychiatric report with the finding that the client is extremely disturbed, and the client wishes to see the report. Contact the author of the report, let us say, a psychiatrist, and ask the psychiatrist whether you should release the report to the client. Record the psychiatrist's answer in the case record and act according to the psychiatrist's decision. Another example might be that a report on a teen-age child might cause emotional disturbance by the parent if the parent were to read it. In this case also, ask the author, and act accordingly.

III. Release of Information

Generally, information from the case record should only be released to a person other than the client with a written, dated, signed authorization by the client (use Form 8014 Authorization to Release Information). Such an authorization expires one year from the date it is given, unless specified otherwise. In the case of Fair Hearings the authorizations normally expire upon the final disposition of the Fair Hearings, unless expressly limited to a shorter period.

A. To Applicants/Recipients

Case information may be released to the client with the exception of reports which may be detrimental to the physical or mental well-being of the client, as outlined in Part II above. Often the client only needs verification of the benefits that are being received. This can be furnished by completing a Form 8023 Assistance Verification and presenting it to the client. Also, see Part VI in this section for the procedure to allow the client access to the case record itself.

In a potentially fraudulent situation regarding identity of the actual caretaker relative, caution does need to be exercised, and treatment of the situation should

be based on the details of the specific case. However, until the true situation can be established, the applicant's rights must be respected.

B. To Authorized Representatives (including "Advocates," "Supporters," "Champions" of the client)

Authorized representatives may be given information, provided they have a signed release by the client. The laws on confidentiality apply to releasing information to them also. (See Part VI of this section for the procedure to allow access to the case record itself.)

An exception to this requirement for a written release is that telephone authorizations may be accepted if the recipient has identified himself adequately over the phone to the worker by means of date of birth, mother's maiden name, case number, and driver's license number. In such cases the recipient must first phone and notify the worker of the identity of the person or persons who will be calling on his/her behalf. A telephone authorization is good only for one day - it is temporary - and must be followed by a written authorization. Do not give out any information by telephone to any persons who represent themselves as acting for the recipient, or needing the information, such as friends, relatives, landlords.

If the authorized representative is present with the client, a signed release is not required, but at least a notation should be made that the client gave verbal authorization. However, in that situation, a written authorization should also be obtained if there is any possibility that the authorized representative may contact the worker later without the client being present.

Regardless of the difficulty of the situation, always adhere to the policy on Authorized Representatives. For example, if the client is non-English speaking, the procedure for telephone authorizations should still be followed even though it may be inconvenient to do so.

C. CalWORKs Service Providers

Although certain community-based organizations that provide services for the CalWORKs Program, such as the Children's Council, may already have provisions in their contracts which cover confidentiality, it is good practice to always obtain a written authorization from the client for every service provider.

In the written authorization for the provider of an activity that is part of the employment plan, specify the anticipated length of time for the activity and the information to be shared, which reflects the language in the WTW Employment Plan - Activity Assignment.

Example:

"For monitoring of attendance and progress in the CNA program from March 1, 1998 to May 15, 1998."

Since verification of participation, enrollment, attendance, and/or progress in a WTW activity is required, the client must either provide acceptable proof or give authorization for direct communication with the activity provider; otherwise, the client would not be in compliance with the WTW program. This parallels the need for collateral contacts in eligibility determination (see Part V in this section).

D. To Absent Parents

Absent parents may not be given any information without a signed release by the client. If the absent parent alleges that the aided parent has kidnapped, abused, or neglected the children, simply take complete notes and refer the situation immediately to our Children's Emergency Services (CES) unit.

E. To Schools

Information may be released to schools without the client's authorization for the administration of certain federally assisted programs providing assistance in cash, in-kind, or services directly to clients on the basis of need. The school officials must be warned of the confidential nature of such information and prohibition against the use or disclosure of such information for any purpose other than for which it was obtained.

F. To Hospitals

Information should not be released to hospitals, public or private, without the client's written authorization. With the Automated Eligibility Verification System, all providers have access to MEDS data through the Point-of-Service devices.

G. To Representatives of Public Agencies and Offices

Case information may be released to public agencies or offices, but only for purposes directly connected with the administration of public social services. Some agencies may be given information without the consent of the client. If the request for information is by telephone, the worker should ask for the caller's name, phone number, the name of the agency they claim to be representing, and indicate that the call will be returned. This gives the worker the opportunity to verify that the caller represents the agency specified and that the agency is one with whom we can exchange information.

1. Other Workers in the Department

Information that is limited to eligibility and services may be released without specific client authorization to workers in Food Stamps, Medi-Cal, General Assistance, Homeless, Adult Services, Foster Care, Family & Children's, Appeals, Overpayments, Collections, FRED, and SIU.

2. Other County Welfare Departments

Information may be provided without the client's authorization in situations such as Inter-County Transfers and routine eligibility verification.

3. Federal, State and County Auditors

Auditors normally have the authority to examine records as necessary to perform fiscal audits and/or procedural reviews without authorization from the clients.

4. The Social Security Administration

On occasion SSA may need information from the case in order to determine eligibility to SSI. Such specific information may be given to SSA without the client's authorization if relevant to such a determination.

5. The San Francisco Housing Authority

Information should only be released to SFHA with a signed authorization from the client. Whenever clients apply for public housing or are redetermined for eligibility, they are given a form by SFHA which requests specific case information. This form contains an authorizing statement which should be signed by the client prior to the form being completed.

6. Legislators and Other Elected Officials

No information which specifies any client by name or address should be disclosed to federal, state, or local legislators or other elected officials without the client's consent. Specific written authorization from the client should be obtained before releasing information, but with two exceptions:

- a. If the situation is urgent, telephone authorizations may be accepted temporarily, as long as the procedure for them, described in Item III B., is followed.

- b. If the official has received a written inquiry from the client, a copy of the letter signed by the client may be accepted since authorization is implied. However, information should be disclosed only to the extent that it sufficiently answers the client's inquiry.

7. The Court System

The City Attorney and District Attorney's offices may be given information without a written release only when acting on behalf of SFDHS. They may be conducting investigations, prosecutions, criminal or civil proceedings directly connected to public social services such as child support services and the location of families in which the caretaker has abducted or kidnapped the aided children. Without authorization, Adult Probation may be given information only in welfare fraud cases, as well as Juvenile Court, when acting on dependency or parental determination cases - not on criminal ones. Also see in this section Part IV, Subpoenas.

8. Law Enforcement Agencies

As stated previously, confidential information should not be released for a purpose not connected with the administration of public social services. For example, normally information should not be given out for traffic violations, tax fraud investigations, and criminal investigations not related to welfare. However, there is an exception to this rule. Law enforcement officials may be given otherwise confidential information under two situations:

1. the client is deceased, or
2. a felony arrest warrant has been issued for the client.
 - a. Information may be released only upon written request from the law enforcement agency which specifies either (1) that the client is deceased and that the agency is otherwise unable to adequately identify the deceased or (2) a warrant of arrest for the commission of a felony has been issued.
 - b. The written request can be made only by the head of the law enforcement agency, or by an employee of the agency who has been identified by name and title in writing by the head of the agency.

- c. When an appropriate request is received, the information released is limited to NAME, ADDRESS, TELEPHONE NUMBER, BIRTHDATE, SOCIAL SECURITY NUMBER, and PHYSICAL DESCRIPTION.
- d. Any requests which are received from law enforcement representatives should be referred through the supervisory chain to the Deputy Director of the program in order to ensure that the requirements for release of information have been met.
- e. It is not appropriate to hold client's checks or other benefits at the request of law enforcement representatives. Action such as this should be done only when it is necessary for the administration of the program and is subject to the approval of the Deputy Director or a designee.

9. Immigration and Naturalization Service

According to the **City of Refuge Ordinance** which was signed by the Mayor on October 24, 1989, employees are prohibited from assisting or cooperating with any Immigration and Naturalization Service (INS) investigation, detention, or arrest procedures relating to alleged violations of the civil provisions of federal immigration law. If a request for information is received from INS, it should be referred through the supervisory chain to the Deputy Director of the program.

IV. Subpoenas

Sometimes workers will receive Subpoenas Duces Tecum (of records), of which there are two types. One type is the Administrative Subpoena which normally is from the California Department of Social Services or Department of Health Services. The second type is the Court Subpoena which may involve civil litigation or criminal proceedings. All subpoenas must be brought to the attention of the unit supervisor immediately. The supervisor should notify the Program Manager. The Program Manager should forward the subpoena to the Deputy Director and request instructions on how to proceed. The advice of the Deputy Director and the City Attorney's office should be followed by all staff concerned.

V. Collateral Contacts

Occasionally, in order to determine eligibility, the worker may have to contact a third party in writing or by phone. Clients must sign an authorization (use Form 8014 Authorization to Release Information) for each collateral contact to be made, except in the case of SIU investigations. For similar information regarding CalWORKs service providers, see Item III.C above.

A. If the client does not wish the worker to contact the third party to determine eligibility, the client must be given the opportunity to bring in the required verification.

B. If the information or verification provided by the client is unacceptable to the worker, and the client then refuses to grant permission to the worker to collect the information, the client shall be given the opportunity to withdraw the application; or the application shall be denied or discontinued for non-cooperation, whichever is appropriate.

NOTE: None of the restrictions above prevents our SIU from carrying out its own investigation into the client's eligibility status.

VI. Case Record Access by the Client or Authorized Representative

A. When the client, or a duly authorized representative (a person with a signed, dated and time-limited authorization) requests access to the client's case record, the envelope of privileged material as specified in Part II (if there is such) must be removed.

All other material must be left in the file.

B. If the client is alone, there are no complications.

However, if the client appears with someone, he must be informed that he has the right to read his record without any other person present (aside from the worker), and to discuss it with the worker in private if he so desires.

C. Do NOT leave the client or authorized representative alone with the case record.

The worker must always be present. The person may make notes, but may not remove anything from the case record. Photocopies of documents may be made by SFDHS at a cost of 10¢ per page, payable to the San Francisco Department of Human Services.

VII. Contacts with the Media

All employees must have permission of the Executive Director or Deputy Directory before communicating with the media as a representative of the Department (not as a private citizen during off work hours). This permission is necessary even for general

information about the department's programs and operations. For confidential information, of course, specific client authorization would also be necessary.

CalWORKs Eligibility Handbook*	Language Access 56-3
	Effective 04-01-15

56-3 Language Access

I. OVERVIEW:

All counties are required to have qualified and certified bilingual public contact staff who speak languages spoken by a "substantial number" of clients who serve those non- or limited-English speaking clients, including clients who use American or other sign language.

II. REFERENCES:

All County Letters	All County Notices	CalWORKs PIMs	EAS	Cross References to Other Sections of CW Handbook
ACL 06-20, 03-56	ACIN 1-09-06		MPP Division 21	CW HB 56-3 Language Access, CW HB 50-41 ADA Procedures

III. LANGUAGE ACCESS IN THE CalWORKS PROGRAM:

A. "Substantial Number" of clients - A substantial number is five percent of the clients served in a program at an office. ([MPP 21-115.1](#))

Example: In the local office of a county where clients are applying for and/or receiving CalWORKs and seven percent of those clients speak Tagalog, seven percent of the public contact staff in each job classification in the CalWORKs Program in that office must be certified Tagalog-speaking staff to serve the Tagalog speaking clients.

- B. In San Francisco County, the CalWORKs Program serves clients in five required working languages. These languages are English, Spanish, Chinese, Vietnamese, and Russian.
- There are certified bilingual staff in all of the languages listed above.

IV. FORMS & NOTICES:

- A. **Translated Documents:** When a worker uses a form, notice or other written material that is required by the California Department of Social Services (CDSS) to use in the delivery of services, benefits and programs, and that **translated form**, notice or other written material **has been provided** by CDSS, the **worker must use this translated form**, notice or material when serving a non- or limited-English speaking client. ([MPP 21-115.2](#))
- B. **Availability of Documents:** A translated document must be provided regardless of the number of non- or limited-English speaking clients who are served by the county. For example, if a translated document is available on the State Web Site for a language that is not considered one of the county's "threshold" languages, the translated document is still a required form, and workers must provide the translated document.
- If an applicant or recipient makes a request for a form in a language other than the five working languages that are provided by San Francisco County, workers must go to the following web site to see if forms are available in the requested language:
- C. **Added Information:** If a worker is using a translated document, any information that is added to the document that is unique to the recipient of the notice, must be translated into the language of the client. In addition, if the notice of action is translated to a non-English language, then the informing notice on the reverse side, the NA Back, must also be in the translated language.

- If workers are using forms in a language that he/she is unable to read or understand, an interpreter must be requested. See Section V below for Requesting an Interpreter.
- D. **Form 8072:** Form 8072, Language Services Needs, is given to every applicant when they enter reception to apply. On this form, individuals will select their preferred language for written and oral communication. *Applicants or recipients may prefer a different language for oral and written communications.*
- **INTAKE:** Intake workers will identify clients preferred language to receive forms by reviewing Form 8072
 - CalWIN entries must be made regarding clients preferred language and preferred language for receiving written communication. See CalWIN Entries below
 - If client is illiterate in his /her own language, intake staff will need to inquire which language the applicant wishes to receive forms and assist the client in completing Form 8072
 - **CARRYING:** Renewals are conducted in the five working languages by bilingual staff. When an individual speak a language other than one of the five working languages, there are still several ways to work with this individual. (**See Section V, below**)

V. REQUESTING AN INTERPRETER:

- A. There are several ways in which an applicant or recipient can be served when they do not speak one of the five working languages:
- Assistance through another worker who speaks the clients language
 - With a physically present interpreter
 - Language Line, (**See Section VI, below**)
 - With a client provided interpreter, (**See Section VII, below**)
- B. **Language Duty Workers:** If a client speaks one of the five working languages, workers should always go to the Duty Worker Schedule to see if a worker is available to speak to the client in their language.
- If you are assisting a client that is not your client, every contact you have with a non- or limited-English speaking client must be documented in cases comments regarding the services that were provided. Comments must

include the appropriate language that was provided and who provided the interpretive services.

- C. **Requesting and Interpreter:** For brief interactions with clients who speak less common languages such as to schedule an appointment, or when bilingual staff is not available, use the language line. (**See Section VI, below**) For lengthier or more complex interactions such as intake or redeterminations, and interpreter must be requested.
- Interpreters for Intake interviews will be scheduled by the reception staff
 - For all other appointments, including redeterminations, or rescheduling of appointments, the procedure is as follows:
 - For threshold languages, (Spanish, Chinese, Russian, and Vietnamese), before using a contracted interpreter, certified bilingual staff should be used whenever possible.
 - Provide 48 hours notice, if possible
 - Complete the "Request for Interpreter Form", which is available on the intranet under the "References", link at the top of the home page.
 - E-mail the form to: HSA.EmployeeRelations@sfgov.org, with a CC to Lisa Ma
 - A confirmation e-mail will be sent back to you

NOTE: When requesting an interpreter, please include on the form any additional special requests that may not be part of the "Request for and Interpreter" form, such as "client prefers a woman interpreter".

VI. CLIENT PROVIDED INTERPRETER:

- A. An applicant or recipient may *choose* to use their own interpreters.
- An individual should not feel compelled to use their own interpreter or encouraged to do so. ([MPP 21-115.16](#))
 - Workers are required to advise applicants or recipients at intake and redetermination of their right to free interpretive services.
 - Workers must also discuss the potential risk of problems associated with clients using their own interpreter, including the possibility of ineffective communication, and the need to disclose private information to the interpreter.

- Workers must also discuss that an interpreter is available regardless of whether a client has provided his/her own interpreter.
 - If a client has chosen to provide his/her own interpreter, however at any time informs the county that he/she wishes to utilize the county provided interpreter, the worker must provide free interpretive services without undue delay.
- B. **Minors as interpreters:** Minors may not serve as interpreters under usual circumstances.
- Workers may allow a minor to temporarily act as an interpreter only at the request of the applicant or recipient, or under extenuating circumstances.
 - If a minor was used for interpretive services, workers must document the use of a minor and the reasons for it in the case record. Examples of extenuating circumstances warranting the temporary use of a minor as an interpreter include, but are not limited to:
 - If a worker telephones or conducts a home visit and finds a non-English or limited-English speaking client, while the minor in the home speaks English. Under these circumstances the worker may use the minor as an interpreter only to determine the language of the client and to schedule a date and time to return with a county provided interpreter.
 - When a worker encounters a health or safety issue such as a car accident, where immediate communication is imperative, a minor may temporarily be used to communicate until a qualified interpreter arrives.
- C. **Documentation:** In addition to providing free interpretive services, workers must also document the following in the case record ([MPP 21-115-6;116.11 through .24](#)):
- Free interpretive services were offered to the client
 - Who provided the interpretive services
 - Client was informed of potential problems for ineffective communication when using the applicant's/recipients own interpreter
 - Worker offered county-provided interpretive services if the applicant/recipient provided interpreter is not available
 - A minor temporarily acting as an interpreter did so at a specific request of the applicant/recipient or that there were other extenuating circumstances, with an explanation of those circumstances
 - Applicant/recipient signed a consent for the release of information when using his/her own interpreter
 - Worker informed the applicant/recipient of his/her right to accept the county provided interpretive services at any time, even when a client provided interpreter is present

VII. LANGUAGE LINE:

- A. Whenever possible it is preferable to use in-person interpretation services. telephone interpreting services are not intended to replace bilingual staff interactions, or in person interpreters.
- B. HSA maintains a Language Line for over-the-phone translation services. Translators on the Language Line are available in most languages.
- C. The language line can be accessed using any phone to contact a client, or by using a dual handset phone when the client is present in the office.
 - 170 Otis Office has phones on the first floor with dual handsets. One is located in the reception area, and the other is located in a locked interview area. Staff must obtain key to gain access to confidential interview area.
 - Whenever using a phone to communicate with a client in an open area, make sure that the content of the conversation is brief, and that you are not disclosing, or asking any confidential information of the client.

D. How to access an Interpreter

From any phone follow the instructions below, if you have conference calling features be sure to use it before you place your call.

1. Dial **1-888-419-0164**
2. Select the language you need
 - a. Press 1 for Spanish
 - b. Press 2 for all other languages and state the name of the language you need
 - c. Press 0 for assistance if you do not know the language
3. Provide your 3 digit access code: **159**
4. Provide your worker number to the agent
5. You will be connected to an interpreter who will provide his/her name and ID number

Brief the Interpreter. Summarize what you wish to accomplish and give any special instructions.

ADD THE CLIENT to the line.

Say "End of Call" to the Interpreter when the call is completed.

* If you are asked for your Client ID # please provide **501641**

IMPORTANT INFORMATION:

INTERPRETER IDENTIFICATION - Interpreters identify themselves by name and ID number. Feel free to note this information for future reference if your organization requires it for their records or to comply with regulatory requirements.

WORKING WITH AN INTERPRETER – At the beginning of the call, briefly tell the interpreter the nature of the call. Speak directly to the limited English speaking speaker, not to the interpreter, and pause at the end of a complete thought. Please note, to ensure accuracy, your interpreter may sometimes ask for clarification or repetition.

CUSTOMER SERVICE– To provide feedback, commend an interpreter, or report any service concerns, please contact the Office of Civil Rights at (415) 557-5576.

For the complete HSA Quick Reference Language Line instructions, go to the HSA Intranet, look under "Resources" and select Language Line from the list

VIII. CALWIN ENTRIES:

- A. The **Collect Case Summary Detail Window** allows for workers to enter the clients preferred language , under the **Language Box, Primary Language**. This box must be the language the client has indicated to be their primary language.

Clients may also choose to have their forms and notices sent in another language other than their designated spoken language; this language should be indicated in the **Form/NOA** box, regardless of whether the language is available in CalWIN.

CalWORKs Eligibility Handbook	Documentation of Language Services 56-3.1
	Effective 04-02-12

56-3.1 Documentation of Language Services

I. OVERVIEW:

The California Department of Social Services requires documentation of workers to ask clients their preferred language for oral and written communication and also to document the preferred language in the clients file.

II. REFERENCES:

All County Letters	All County Notices	CalWORKs PIMs	EAS	Cross References to Other Sections of CW Handbook
ACL03-56, 06-20, 08-65	ACIN 1-09-06, 1-02-08		MPP Division 21	CW HB 56-3 Language Access, CW HB 50-41 ADA Procedures

III. REQUIRED DOCUMENTATION:

- A. Documentation must be done at the following times ([MPP 21-116.2](#)):

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- At initial client contact, when the application is received, or at intake
- At Annual Redetermination
- At any time a client requests a change in either his/her oral or written language preference

B. Documentation must include ([MPP 21-115](#)):

- Client's acceptance or refusal of written material in his/her language after asking the client's preference
 - How the bilingual services are provided to the client. (**Example:** If bilingual staff is provided for a client, this must be documented in case comments.)
- Any temporary use of a minor as an interpreter must be documented in case comments, along with the circumstances under which the minor was needed to be used as an interpreter.
- That free interpretive services were offered, and who provided the services.
- If the client requests to use his/her own interpreter, worker must case comment that they informed the client that in providing their own interpreter, there is potential for problems arising from ineffective communication.
 - Workers must also case comment the consent to the release of information to the interpreter if the county uses an interpreter other than the county employee.

C. The applicant/recipients preferred language shall be documented in every case file such as:

- Eligibility case folder
- Welfare to Work folder

This includes whether the case file is paper or automated so that workers are aware of the clients language preference and are able to provide effective language services. [Form 8072](#) is used to ask clients their preferred language for oral and written communications.

NOTE: Applicant or recipients may prefer a different language for oral or written communications.

D. At annual redeterminations, any language information that was documented at intake must be re-verified and updated.

- Case comments should reflect the clients language information that has been reverified or updated.

E. CalWIN Entries:

- The **Collect Case Summary Detail Window** allows for workers to enter the clients preferred language, under the **Language Box, Primary Language**. This box must be the language the client has indicated to be their primary language.
- Clients may also choose to have their forms and notices sent in another language other than their designated spoken language; this language should be indicated in the **Form/NOA** box, regardless of whether the language is available in CalWIN.

IV. REQUIRED DOCUMENTATION for use of CONTRACTED SERVICE PROVIDERS

A. If a client chooses to provide his/her own interpreter, workers are *required* to inform the client at intake and also at redetermination, in his/her primary language and *document in the case record*, that the client was informed of the following:

- The right to free interpretive services without undue delay
- Potential problems of using the client's own interpreter, including the possibility of ineffective communication, conflict of interest, or inaccurate interpretation.
- The need to disclose private/confidential information to the interpreter.
- The availability of county-provided interpretive services when the client's interpreter is not available, and
- The right of the client to switch from a client-provided interpreter to a county-provided interpreter at any time.

NOTE: Once the client has been informed of the above and case comments have been documented, workers do not have to inform the client again until reverification.

B. If a client elects to use his/her own interpreter or when individuals other than county employees are used as interpreters, workers must obtain a release of information from the client.

- The signed release of information must be kept in the case file.
- If the client uses the same client provided interpreter during subsequent contacts a new release of information is not needed.

- If the client uses another client provided interpreter, a new release of information must be obtained and maintained in the case file.
- C. The documentation of case comments does not require a lengthy entry. As long as the required information is there, a case comment can state short phrases such as: " client prefers Spanish for written and oral communications", "interview conducted in Russian, by EW 1234," "client declined, or free interpretive services/accepted."

Language Duty Workers: If a client speaks one of the five working languages, workers should always go to the Duty Worker Schedule to see if a worker is available to speak to the client in their language.

- If you are assisting a client that is not your client, every contact you have with a non- or limited-English speaking client must be documented in cases comments regarding the services that were provided. Comments must include the appropriate language that was provided and who provided the interpretive services.
- D. There are some "best practices" to keep in mind when clients have provided their own interpreter:
- Workers should take reasonable steps to be certain that self-provided interpreters are not only competent in the circumstances, but are also appropriate in light of the circumstances and subject matter.
 - That if, at any time a self-provided interpreter is used, a department interpreter should ensure they are capable of interpreting the information.
 - If a worker is uncertain that the client provided interpreter is accurately and effectively translating the conversation, or is an appropriate interpreter, given the circumstances of the interview, the worker should arrange for a departmental interpreter to assist.
 - Workers must advise clients of their **right to free interpretive services** even when a client provided interpreter is present.

NOTE: When the county contracts with a language services provider for interpretative and/or translation services, consent for release of information or confidentiality are not required.

V. DOCUMENTATION of ACCEPTANCE or REFUSAL OF WRITTEN MATERIAL OR FORMS

- A. Staff must document the client's acceptance or refusal of forms or other written material offered in the individual's primary language at Intake and at yearly recertification.
 - Staff must record in CalWIN case comments if the client refused written translation of materials in the identified language, along with the reason given by the client for the refusal.
 - In the event that a Limited English Proficiency client refuses written translations in the client's primary language, staff must determine and document the reason to ensure that the client is aware of the availability of the county to interpret notices for clients who are unable to read or who may need an accommodation.

VI. STAFF RESPONSIBILITY

- A. If a client is a Limited English Proficiency client, and forms are not available in the clients preferred language, workers have the following responsibility:
 - Upon any change that negatively effects a clients benefits, contact the client in their preferred language to explain the changes in their benefits.
 - Workers **must be proactive** in contacting the client. As soon as the change is made on the case, workers should contact the client, do not wait for the client to contact worker.

Example: Client has indicated that he/she would like all forms/NOA's be given in Arabic, and that this is also his/her preferred spoken language. EW has taken an action to discontinue client's case with proper 10 day NOA. An Arabic NOA is not available in CalWIN, or on the State Web site, so the NOA is sent out by the worker in English. It is the workers responsibility to call the client, using the language line with an Arabic speaking interpreter, to explain to them that they will be receiving a negative notice of action in the mail, in English, and explain to them the action that were taken on their case.

CalWORKs Eligibility Handbook	Case Comments 56-4
	Effective 1-6-20

56-4 Case Comments

Purpose of Thorough Documentation

The case narrative is an on-line written record, which fully documents an individual's participation in CalWORKs from the point of enrollment to termination from the program. The documentation should include clear factual details that tell the story of the participation of the client and case actions taken.

The following information, NOT FOUND ELSEWHERE IN THE CASE, must be documented in the **Maintain Case Comments** window of CalWIN:

- Details as to why childcare payments were made at an amount other than requested;
- Details on mileage payments, including amounts subtracted that was advanced to client in the previous month;
- Transportation payments that include payments for children;
- Documentation how paycheck stub hours were processed to verify actual or projected hours of paid employment activity;
- Tracking the young child exemptions: 0-3 months, 0-6 months and 0-23 months once in a lifetime exemption;
- The method of the intake interview (face-to-face, telephone, or telephonic signature);
- Any contacts, either written or by phone, indicating a change or a potential change in the case, (i.e., household composition, income or property change). Explain all the decisions made based on anticipated circumstances where an alternate action could have been taken. For example:
- Seventeen (17) year-old child is exempted from work registration during the summer because of plans to resume full-time school attendance in the fall;
- Someone is discontinued from the AU effective the first of the following month when they request it in anticipation of them leaving the household;
- Any justification for unusual or special actions taken by the CalWORKs staff;

- Eligibility for all programs explored and explained if potentially eligible and the client's decision to apply or not to apply for the other benefits;
- Any information from Social Security including the SSN or any possible benefit information;
- The scheduling of appointments;
- Any additional or questionable information that would be helpful to an EW newly assigned the case.

These are important details that not only assist to tell the story, but also provide a source location for other Agency staff to identify information for "Work Participation Rate" (WPR) information, fair hearings and incoming "Officer of the Day" (OD) phone calls. This also enables other CalWORKs staff to provide appropriate and timely customer service.

Since the primary intent is to document relevant information in an objective and concise manner, Case Comments does not lend itself to individualistic creative writing styles. For our purposes, the narrative must focus on facts rather than on feelings or opinions. The CalWORKs worker may state professional judgment as long as the judgment can be adequately substantiated.

CalWORKs Eligibility Handbook	Voter Registration : Section 56-5
	Effective 4/2/18

56-5 Voter Registration

I. Overview

Under the Federal National Registration Act of 1993, whenever an individual applies for any "agency based" need such as cash aid, Medi-Cal, or CalFresh, they shall have access and assistance with voter registration. The public assistance

programs include: CalFresh, California Work Opportunity and Responsibility to Kids (CalWORKs), Medi-Cal, Women, Infants and Children (WIC) nutrition program, and In-Home Supportive Services (IHSS).

Under federal law, the NVRA requires states to provide voter registration opportunities at all offices that provide public assistance and all offices that provide state-funded programs primarily engaged in providing services to person(s) with disabilities. All applicants and recipients must be given a VRC and a NVRA Voter Preference Form, regardless of whether they indicate they want to register to vote or not. This policy replaces the former policy in [ACIN I-09-09](#) to "offer" voter registration materials. If counties fail to comply with the NVRA, the county and state can be subject to a civil action by the United States Department of Justice or a private party.

NOTE: Issued April 2, 2018, ACL 18-39 outlined Secretary of State/NVRA changes for eligible 16 and 17 year old minors and the new 3 day time frame for sending NVRA VRCs.

II. References:

All County Letter:	ACIN	CalWORKs PIMs / How-To's:	Handbook Sections:	EAS:
ACL 95-26 , ACL 96-21 , ACL 96-01 , Medi-Cal All County Welfare Director's Letter (ACWDL) No. 94-85 , 95-36 , 95-78 , 96-01 , ACL 18-39	ACIN I-46-94 , ACIN I-56-95 , ACIN I-17-96 , ACIN I-09-09 , I-04-13 , I-01-12	CW PIM 96-7, CW PIM 06-09 , CW PIM 11-15	CW HB 57-1 Reinvestigation Process	

NRVA References:

- I. **Secretary of State's NVRA Webpage:**
<http://www.sos.ca.gov/elections/nvra/>
- II. **Secretary of State NVRA Coordinator:**
Phone: (916) 657-2166

Fax: (916) 653-3214
E-mail: nvra@sos.ca.gov

- III. **Secretary of State California NVRA Manual:**
<http://www.sos.ca.gov/elections/elections-pub-res.htm>
- IV. **NRVA Voter Preference Forms:**
<http://www.sos.ca.gov/elections/nvra/training/voter-preference-forms.htm>
Languages: English, Spanish, Chinese, Hindi, Japanese, Khmer, Korean, Tagalog, Thai, Vietnamese
- V. **Secretary of State's NVRA Training Webpage for Public Assistance Agencies:**<http://www.sos.ca.gov/elections/nvra/training/>
- VI. **United States Department of Justice Civil Rights Division Voting Section**
Website:http://www.justice.gov/crt/about/vot/nvra/activ_nvra.php
- VII. **Voter Information:**<http://www.sos.ca.gov/>
- VIII. **County Elections Office**
Roster:http://www.sos.ca.gov/elections/elections_d.htm

III. Definitions:

- A. **NVRA** - The National Voter Registration Act of 1993, also known as The Motor Voter Act, was signed into effect by United States President Bill Clinton on May 20, 1993, however, compliance did not become mandatory until 1995. The legislation required state governments to allow for registration when a qualifying voter applied for or renewed their driver's license or applied for social services.
- B. **VRC** - Voter Registration Card
- C. **Voter Preference Form**- formerly entitled VoterRegistration Interest/Declination Form
- D. **SOS** - Secretary of State

IV. Policy & Procedure:

The National Voter Registration Act requires workers to provide all applicants and recipients with a VRC and a NVRA Voter Preference Form regardless of whether they indicate they want to register to voter or not.

A. Under Federal law EW's must provide the following services:

INTAKE:

1. Provide in clients language, and collect a VRC at Intake or Group Informing Session;
2. Provide in clients language, and collect a NVRA Voter Preference Form at Intake or Group Informing Session;
3. Provide assistance in completing these forms, if requested;
4. Provide the same degree of assistance to all applicants, including persons with disabilities, when completing VRCs either in their home or in person as offered when completing the agency's own application forms;
5. Inform clients that receipt of benefits is not linked in any way to the client's decision to register or not register to vote;
6. Ensure that workers do not seek to influence the client's decision to register or not register to vote, or the client's political party preference;
7. **If a client declines** to indicate whether they wish to register or that he/she will complete the VRC at a later time, the **Voter Preference Form should still be completed.**
8. **Provide all eligible 16 and 17-year-old clients with a Voter Registration Card (VRC) at the time of application, recertification, or when the agency is notified of an address change, regardless of whether or not the client indicates they want to register to vote or not.**

CARRYING:

1. Provide in clients language, and collect a VRC at Annual Redetermination & Change of Address;
2. Provide in clients language and collect a NVRA Voter Preference Form at Annual Redetermination & Change of Address;
3. Provide assistance in completing these forms, if requested;
4. Provide the same degree of assistance to all applicants, including persons with disabilities, when completing VRCs either in their home or in person as offered when completing the agency's own application forms;
5. Inform clients that receipt of benefits is not linked in any way to the client's decision to register or not register to vote;
6. Ensure that workers do not seek to influence the client's decision to register or not register to vote, or the client's political party preference;

7. **If a client declines** to indicate whether they wish to register or that he/she will complete the VRC at a later time, the **Voter Preference Form should still be completed.**
8. Provide all eligible 16 and 17-year-old clients with a Voter Registration Card (VRC) at the time of application, recertification, or when the agency is notified of an address change, regardless of whether or not the client indicates they want to register to vote or not.

B. Collection of Voter Preference Forms:

- The NVRA Voter Preference Form will not be scanned into i-files, they are retained in a cabinet by reception staff.
- For NVRA preference forms distributed at Group Informing, the facilitator will collect, and distribute Voter Registration Forms to **all** applicants regardless of whether they indicate on preference form they want to register to vote or not.
- For individual intakes, annual redeterminations, or cards that are received by mail, workers will need to submit NVRA Preference Forms, or completed Voter Registration Cards to bin in designated reception area.

NOTE: There is no longer a "voluntary reporting requirement" regarding the total number of VRC's and NVRA Preference Forms received. Voter Preference Forms must be kept on file for 24 months.

C. Influencing Applicants and Recipients:

There are restrictions that have been placed by the NVRA on how workers may interact with applicants and recipients when providing the opportunity to register to vote. Workers shall not:

- Influence applicants or recipients political preference or party registration in any way;
- Display any political preference or party allegiance;
- Make any statement to an applicant or recipient, or take any action to the purpose or effect of which is to discourage the applicant or recipient from registering to vote, or;
- Make any statement to an applicant or recipient, or take any action to the purpose or effect of which is to lead the applicant or recipient to believe that a decision to register or not to register has any bearing on the availability of services or benefits.

V. Instructions for Completing the NVRA Preference Form:

The NVRA Preference Form was recently redesigned and simplified to 1.) allow clients and agency staff to complete the form more quickly; and 2.) to allow agencies to use an electronic form and encourage online vote registration whenever possible.

- a. **In Person-** Workers *must* ask the client to complete the **Voter Preference Form**. If the client chooses not to register at the agency, but still takes a blank **Voter Registration Card** home, the worker should ask the client to complete the Vote Preference Form and check the "No" box, since the applicant is choosing not to register at that time.
- b. **Mail Transactions** - If the **client fails to complete and return** the Voter Preference Form, workers should attempt to follow up once with the client to find out whether the client would like to register to vote or if assistance is needed. Workers are not required to complete Voter Preference Forms on behalf of clients who choose not to return the Voter Preference Form in a transaction. In such instances, after following up with the client, **workers should include a blank Voter Preference Form with the client's name, and send it to i-files for indexing and scanning, NO TMT. Be sure to place the case number on the document.**
- c. **Phone Transactions** - Workers must ask the following question for all clients who are applying for benefits, renewing, or changing address: "If you are not registered to vote where you live now, would you like to register to vote?" The client's response must be documented on a preference form, and if the client indicates "yes", the EW shall provide the client with the opportunity to vote by sending the client the VRC.
 - . If the applicant/recipient fails to respond to the question, the EW shall mail the VRC.
- d. **Internet Transactions** - All applicants that have access to apply for benefits through my Benefits CalWIN, must be able to submit a voter preference form online and be able to vote on the Secretary of State's California Online Voter Registration (COVR) website. At this time, this functionality is not available however CalWIN, in coordination with the Secretary of State in the process of updating the online benefits enrollment website to ensure that we are in compliance with this requirement.

- Until this option is available applicant will still be offered the VRC at the time of application.

VI. Client Assistance:

A. Workers are required to assist applicants and recipients with filling out the VRC:

- Every individual must be provided with the same degree of assistance in completing the voter registration application as they are provided in completing any other agency form or application, unless the applicant/recipient declines assistance.
- When making a home visit, or providing services in an applicant's home, workers must provide voter registrations services at the persons home.
- Workers shall advise each applicant and recipient that assistance with filling out the VRC will be provided if the applicant or recipient wishes, however the applicant/recipient has the right to complete the VRC without assistance.

B. Language Requirements:

- Workers must take steps to ensure that clients are offered voter preference forms and voter registration cards in all languages that are required by Section 203 of the Federal Voting Rights Act. (Languages are listed above)

VII. Agency Responsibility:

- A. Accept and transmit completed VRCs to the appropriate county elections officials within 3 days; however, as a best practice, the California Secretary of State advises county welfare agencies to forward NVRA VRCs on a daily basis;
- B. Obtain VRCs from the county elections office to ensure proper tracking of NVRA VRCs;
- C. County offices must retain the Voter Preference Form for 24 months. Counties may determine the manner for filing and retaining the forms

(e.g., with the client's case file or filed separately). An electronic record of the form or the individual's response (Yes/No/Already registered) may be kept in lieu of retaining paper forms; and

- D. Provide staff training annually on the NVRA requirements and how to assist clients with voter registration.

Voter Registration Cards:

The NVRA requires Counties to give applicants applying for benefits, renewal, or a change of address a **Voter Preference Form** and a **VRC** so that the applicant may register to vote. The NVRA also requires all states to accept the **National Mail Voter Registration Form**, but allows each state to develop its own voter registration form, as long as it is equivalent to the federal form. Public assistance agencies should make every effort to distribute the California VRC, rather than the National Mail Voter Registration Form, in order to ensure county election officials can properly track and report the number of registrations coming from public assistance agencies.

Procedures for Ordering VRC's:

In California, the SOS supplies VRCs to county elections officials. The SOS prints county-specific VRCs including a postage-paid envelope and the county elections office address in the county where the agency office is located. In turn, county elections officials distribute supplies of VRCs to public assistance agencies within the county. County election officials record the serial number ranges of VRCs distributed to public assistance agencies in order to track the number of completed VRCs returned and attribute new registrations to the public assistance agencies providing voter registration services under the NVRA. Therefore, in order to ensure proper tracking and reporting of NVRA voter registrations, Counties must obtain supplies of VRCs exclusively from their county elections office. When ordering VRCs, it is important that County staff identify themselves as a NVRA public assistance agency.

Retention of Voter Preference Form:

Counties must retain the completed Voter Preference Form for two years. However, federal and state laws do not state the manner in which the forms are to be filed within the agency. The SOS office recommends CWDs store the Voter Preference Form in a central, chronological file (e.g. case file), so that CWD staff can easily determine how many Voter Preference Forms are received in a given month, which can help demonstrate NVRA compliance. Voter Preference Forms and responses may be stored electronically.

NVRA Coordinator:

Counties should appoint one staff person at each agency office to be in charge of NVRA compliance, which includes arranging staff training, ordering supplies of VRCs from the county elections office, and ensuring VRCs are submitted in a timely manner to the county elections office.

SOS and CDSS Quarterly NVRA Meetings:

Quarterly NVRA meetings will be arranged for Counties who are identified as potentially out of compliance under the NVRA. The identified county/counties director(s), SOS, CDSS, and County Welfare Director’s Association (CWDA) representatives will be invited to these quarterly meetings to identify and resolve any issues regarding NVRA compliance. Counties that are identified as fully complying with the NVRA requirements will also be invited to attend to share best practices in regard to NVRA compliance.

CalWORKs Eligibility Handbook	Welfare-to-Work Client Advocacy Project Communication Guidelines 56-6
	Effective 7/30/18

56-6 Welfare-to-Work Client Advocacy Project Communication Guidelines

Overview

Bay Legal CalWORKs Client Advocacy Project assists clients to address their complaints and concerns regarding receipt of CalWORKs Welfare-to-Work services. The goal of the client advocacy project is to resolve concerns and complaints at the program level by working with Bay Legal to address them timely and adequately and by providing program information to Bay Legal to facilitate the resolution of client concerns. Client advocacy services may include assisting the clients through the formal grievance process, if necessary, to adequately address their complaints.

Request Procedures

1. Assigned Bay Legal Client Advocates will contact program by sending an email requests/concerns to CW WtW.BL@sfgov.org and copy the CW Section Managers. This includes tasks and case review requests for cases that falls under

the WtW Advocacy Project. CalWORKs requests that are outside of the Client Advocacy Project will be handled through the Service Center process.

2. Upon receipt of request from Bay Legal, the assigned CW Liaison Manager will review and determine appropriate course of action. Program will respond to the request within 48 business hours upon receipt of the e-mail. The case review contact person will respond to arrange for the case review (time, space, assigned worker, etc.).

3. Only supervisors and managers will respond to Bay Legal directly about submitted requests and the status thereof. If Bay Legal has had no response from CalWORKs after 48 business hours, Bay Legal can escalate by following up with the section managers while copying the program manager.

NOTE: For DV waiver requests of TOA extender & WTW requirements, BL is to refer client to assigned ES and client will be referred the current DV provider and a DV service plan is needed for waiver to be approved. Retro Time on Aid DV wavier requests are to be made via BL Liaison and Section Manager.

Staff Referral to Bay Legal Services

Line staff and supervisors will make every effort to resolve issues brought up by clients. However, upon request and if necessary, staff will refer clients to Bay Legal.

CalWORKs Eligibility Handbook	Companion Cases 56-12
	Effective 11-01-05

NOTE: THIS SECTION IS OBSOLETE.

56-12 Companion Cases

I. Defined

Companion cases exist only when the situation between two or more open cases is such that close coordination is required to ensure:

- A. Correct budgeting, and/or
- B. Correct determination of eligibility.

II. Companion Case Situations

Companion cases exist when:

- A. Members of different AU's are related by blood or marriage and:
 - 1. There is a history or probability of the child(ren)'s being shifted from one AU to the other, and/or
 - 2. The related AU's occupy the same living quarters (same apartment or house).
- B. Two or more AU's not related by blood or marriage occupy and share the same living quarters.

III. Case Assignment Policies

A. Companion cases are to be assigned to the same carrying unit, but need not have the same worker.

Units are never closed to receipt of companion cases.

B. When companion status is discovered among currently open cases, all go to the case with the earliest state number, except a Foster Care companion case goes to the Foster Care unit.

C. When an application relates to an existing open case or to one still in the restoration period:

- 1. If it is Foster Care case related, the Foster Care unit takes the application.
- 2. If application for a separate case is made by or for a person who, in that month, is budgeted in an existing AU, the carrying unit with the open case processes the application and splits the case. The new application would not go through Intake even though the person has already left the home.

3. If two cases are "merged", it is the case which has been continuously active the longest that should have the persons from the other case added to it. Therefore, it is the earliest application date rather than the case number which determines the assignment.
4. An Intake unit processes the application in all other instances, including those in which application is made for a person who was budgeted in a currently open case or in a case now discontinued, but still in the unit. A new case goes to the unit carrying its companion(s) if its companion case is active or in the restoration period.

D. The preceding policies are modified if:

1. The unit not designated to receive the companion case requests this responsibility and there is mutual agreement, or
2. There is a conflict of interest, e.g., the worker is related to or is a friend of the client.

E. Transfer Requirements

Case identified as companion cases should be transferred when discovered. The following transfer requirements must be met:

1. There must be no renewal overdue or due in the transfer month.
2. There must be no pending case action to be processed or in progress.
3. The case record must be up to date and intact correctly filed in a six part case folder.

57 - Continuing Activities

CalWORKs Eligibility Handbook	Reinvestigation, Redetermination and Recertification Process 57-1
	Effective: 9-1-19

57-1 Reinvestigation, Redetermination and Recertification Process (RRR)

A primary function of EWs in Carrying is to reinvestigate cases due for an RRR to determine whether eligibility for CalWORKs, CalFresh and Medi-Cal continues to exist and whether the benefit amounts are correct and determined eligible.

The process of redetermination and recertification of eligibility is as important as the initial evaluation. EWs should review case material, including ADA or language needs, as thoroughly as though it were an initial request for assistance. The process is also called reinvestigation, redetermination and recertification (RRR) and it assists in reducing program errors by correcting benefit amounts and eliminating those cases not eligible.

CalWORKs cases must be reinvestigated at least once every 12 months. The first mandatory annual RRR for a case usually occurs 12 months after the date of granting assistance and then every 12 months thereafter. However, this time period may be interrupted when circumstances create a potential change in eligibility for benefits and it becomes necessary to re-evaluate continuing eligibility.

If this occurs, and all the other procedures and forms for an RRR are completed, then the next RRR due date can be adjusted accordingly.

The RRR process begins when the unit clerk identifies a list of cases that are due and mails out an appointment letter, CSC35 A-2, to the client. The appointments are input in Q-Flow. EW's assigned to do phone RRR's will process the appointments for RRR in Q-Flow.

As part of processing the RRR, the EW will go through the queue in CalWIN and contact the client and update any changes client reports by interview over the phone. The EW at this time will inform client of all verifications needed to verify the changes.

The EW will schedule client for an RRR group orientation in the month the RRR is due and mail the appointment letter, CSC35 A-1. . The EW will also send the CW 2200 to the client, marking verifications client needs to submit for the appropriate Program (CW, CF or MC)EW will send the CW 2200 with some additional forms to WDD. WDD includes the forms sent by EW in the total packet of RRR packet. The EW asks client to bring any outstanding verifications to the RRR group orientation.

CW 2200, CSC35 A-1, A-2 are indexed and scanned.

Face-to-Face Interview with Parent(s) or Caretaker Relative

A face-to-face interview with the parent(s) or caretaker relative must be conducted only if necessary due to ADA or language reasons.

During the interview, the completed forms are reviewed and changes in income, resources, and needs are discussed with the client. The client's statements regarding the family's circumstances and changes since the last investigation, considered with all facts previously known, determine the scope of the RV.

Out of the Country when RRR Due

If the client is out of the county or the state at the time an RRR is due, a letter should be written to the agency in the county or state where the client is staying, requesting that they conduct the interview, secure a signed Statement of Facts, and return it with the client's plan regarding residence, living arrangements, income and need. If it is not possible to obtain the form and report from the agency, a direct request should be made to the client. If an RRR is due during an inter-county transfer period, the county currently paying aid is responsible for requesting that the receiving county make the redetermination of eligibility.

The RRR process can be divided into three phases:

1. Sending out an appointment letter for the phone RRR and entering the assigned appointment in QFlow
2. Conducting the phone RRR and scheduling client for RRR group orientation
3. Receiving a task with completed packet from RRR group orientation and determining ongoing eligibility and authorizing approval or discontinuance of case

I. Preparing for RRR's

A. Determine which cases are due for RRR (clerks)

1. In CalWIN, open the RRR Subsystem. Go to the "View RRR Load" screen to see which cases are coming up for RRR.
2. Clerks will send out appointment letters, CSC35 A-2, to all clients due for RRR the following month with appointments for phone RRR in the month

prior to the RRR being due. If both parents are in the home, specify clearly that they must both participate in the phone interview.

3. Clerks will enter all RRR appointments in QFlow, index and scan CSC35 A-2.
4. Clerks will create an RRR Phone Appointment task

This is not a clerk function.

B. Phone RRR (EW's)

- EW will review MEDS
- EW will request IEVS in CalWIN
- EW will go through the queue in CalWIN and do an interactive interview with client over the phone. EW will enter all updates to income, resources and family composition into CalWIN. EW will check other systems to corroborate information, such as MEDS, IEVS, work number.
- EW will schedule client for RRR group orientation and request for client to bring any missing verifications to the group orientation.
- EW will send CW2200, indicating required verifications to the client and CSC35 A-1, group orientation appointment.
- EW will send CW2200 and other forms to WDD to be included in the RRR packet.
- Client will attend RRR group orientation and will sign all forms needed
- If client cannot be reached for a phone RRR, the case is discontinued at the end of RRR cycle.
- EW's assigned to process phone RRR's will do so by using QFlow and making three attempts to reach client

C. Determine On-going Eligibility (as much as possible review as part of the phone interview the following information)

The case review may cover several areas:

- Permanent documents

- Deprivation verification
- Last determination of eligibility
- Changes since last determination
- Computer searches
- IEVS reports
- Miscellaneous eligibility factors

1. Permanent Documents

For the persons who are active, check whether all birth, alien status, and social security number verifications are in i-files.

If the caretaker relative is a non-parent, check if the relationship has been proven with all the connecting birth and/or marriage verifications. If there are any verifications missing, you can request it in the RRR phone interview and by sending the CW 2200 indicating what is missing.

2. Deprivation Verification

Determine what the applicable deprivation is for each CalWORKs child.

If the deprivation is absence, determine the name of the absent parent(s) for each child. Look for the latest CW-371 Referral to Local Child Support Agency to see if the client has cooperated with the child support process for each absent parent. A new CW-2.1 Notice and Agreement will need to be signed during the interview. However, see if the client has claimed Good Cause for refusing to cooperate and what the outcome was (Form CW-51).

If the deprivation is death, look for the death verification. For a U-parent case, review the initial Statement of Facts to see if the PWE and unemployment determinations were made correctly. If the deprivation is incapacity, look for the latest CW-61 Medical Report and determine whether a new one needs to be completed, or if the deprivation needs to be changed to unemployment.

3. Last determination of eligibility

Review the last determination of eligibility, Statement of Facts, and look for significant case information, such as other income; ownership of property, motor vehicles, bank accounts or other resources; special needs. Request any needed verification in the appointment letter. Also, review the verifications which had been requested previously to see whether any issues were left unresolved.

4. Changes since last determination of eligibility

To bring your knowledge of the case up-to-date, review the rest of the case. Review all the previous SAR7 or mid period reports since the last determination of eligibility, and see whether there are errors or omissions.

Also, look for other changes which may have not been recorded on the SAR-7s and/or were not acted on properly. For example: read through the narratives in Case Comments; look for recent forms such as the CW8 Statement of Facts for Additional Persons or the 4020 Pregnancy Report; then do a quick review of documents to see if the changes were made and/or to find any other changes in the case not recorded elsewhere

5. IEVS reports

When doing the phone RRR, request an IEVS printout before calling the client. Staff will need to review the printout before approving the RRR.

Review any IEVS printouts since the last determination of eligibility. These may be PVSs (Payment Verification System reports, ECSs (Earnings Clearance System reports), Asset Matches, NHRs (New Hire Registry reports), or full "abstracts" from the IEVS Applicant System (which may have been automatically generated when a new person was added). See if all discrepancies were acted on properly.

6. Miscellaneous eligibility factors

There may be other important aspects to the case which need to be considered while you are reviewing the case and preparing for the interview. Again, there may be verification that needs to be requested or a form that needs to be completed which could be included with the CW2200 and client should be asked to bring these to the RRR group orientation.

For any pre-school age children, review Form 4019 and note whether immunization verification was obtained in the past and whether a penalty was imposed or an exemption was approved. See Section 51-23.

II. Verifying Shelter Cost and Excess Deduction

Effective September 1, 2019, CWDs must accept shelter costs reported by a CalFresh applicant or recipient on a signed initial application, periodic report, or recertification application as sufficient to claim the excess shelter cost deduction, and cannot require additional verification absent certain circumstances.

With implementation of AB 494, the WIC section 18901.15 requires that CWDs accept reports of shelter costs made by a CalFresh recipient or applicant on a signed CalFresh initial application, periodic report, or recertification application as sufficient for determining the excess shelter cost deduction.

The excess shelter costs deduction cannot be more than the current maximum, unless the household includes at least one elderly and/or disabled member. CalFresh households with at least one elderly and/or disabled member are eligible to claim the uncapped excess shelter costs deduction and can have the full amount of their allowed shelter costs deducted.

The EW must not request additional verification of shelter costs, whether documentary or through a collateral contact, unless the expenses reported are questionable.

Once it is determined that a reported shelter cost is questionable, the cost must be verified before the deduction can be allowed. Types of verification include, but are not limited to, documents, such as a lease agreement, and collateral contact with appropriate third parties. The EW must not require a specific verification type or document to verify shelter expenses since multiple types of verification are acceptable.

If the family lives in a shared housing and receives CF, Form 2509 Shared Housing Statement will need to be obtained. Also, if there are persons who are only in the CalFresh household (and not on CalWORKs), see if additional verification may be needed for them.

If the case has Modified Payments for rent, look for the latest Form 4114 or 4071 Recipient's Request for Modified Payments to see if an updated one is needed. Some less common situations which will need additional verification and/or forms are those that involve Unrelated Adult Males (CW-71) Sponsored Aliens (CW22, 24), and Senior Parents (CW23). See Sections 52-6, 52-7, 52-15, 53-13.

If the case has a CSS good cause claim, interview the client for another possible CSS good cause claim. This needs to be reviewed every 12 months.

- D. WDD creates packets for each client attending RRR group orientation. The packet will include the forms sent by EW to WDD.

The packet contains the following:

1. CW2.1 Notice & Agreement - 2 copies (absence deprivation)
2. CW101 Immunization Requirements Notice (if pre-school)
3. SFIS Appointment Letter
4. 2509 Shared Housing Statement (if Food Stamps)
5. Any other forms which the client needs to have completed before the interview, such as the CW51, CW71, CW22, CW24, CW23, CW61, or any missing QR7s.

Note that there is another packet of forms which should be prepared to hand to the client during the interview. This packet contains all the "information-only" material. See Item II.C below.

III. Conducting the Phone Interview

Before calling the client check if ADA accommodation is needed and the preferred language client had requested. Follow ADA accommodation plan at bottom of form OCR2 in iFiles.

The main purpose of the RV interview is to collect and/or clarify current information in order to establish the family's continuing eligibility and need for CalWORKs, CalFresh and Medi-Cal. Continuing eligibility and the correct amount of the benefits are re-determined based on the post-interview review and new information gathered during the interview.

The interview is interactive in CalWIN. Clients are responsible for completing or participating in the completion of all forms required for the RV, and making available to the EW all documents that are pertinent to eligibility. Also, they are responsible for reporting all facts relevant to the redetermination of their eligibility.

There are several things which should be included in an RV interview. The specific order may be dependent on a number of things. Primarily, it will be dependent on the

personal preference of the EW, who will have determined from experience the order that is the most efficient or convenient. Also, it may be dependent on factors unique to the particular case, or even the client's behavior during the interview itself. Whatever the order, you should take measures to ensure that all the following things are eventually included.

- Introduction and Identification
- Child Support Assignment and Cooperation (for absence)
- Rights, Responsibilities, and Other Important Information
- Reviewing the Statement of Facts
- Requesting Verification and Completing Other Forms

A. Introduction and Identification

Introduce yourself by giving your first name and explain that you are the EW doing the annual redetermination. Don't assume that the client already knows this. Also, if the client has only been on aid for a year, briefly explain the purpose of the interview. It may be the client's first experience with an RV.

Another important aspect of this segment is to ensure that you are about to interview and obtain signatures from the correct person. Always establish client's identity at the onset of the phone RRR.

B. Child Support Assignment and Cooperation part of RRR group orientation process

If the deprivation for any child is absence, go over the CW-2.1 Child/Spousal and Medical Support Notice and Agreement (NA) with the client during the phone interview, answering any questions the client may have about it. At group orientation the client will put a check mark in the box under "Agreement" on the bottom of the CW 2.1 NA. In most cases, the client will check the first one, indicating full cooperation.

Group orientation will go over Form 4125 DV informing notice. After WDD sends the completed RRR packet and you determine eligibility check whether the client has claimed Good Cause in the past.

The client should have signed/dated the CW 2.1 NA on the bottom and WDD should have signed/dated it as well..

Ask client about the current status of the absent parent(s). Make notes of any new information or discrepancies with previously reported information that you want to forward to FSB on the CA 371 Referral to Family Support Division.

C. Rights, Responsibilities, and Other Important Information at RRR group orientation

- § CHDP Brochure (on yellow or goldenrod paper)
- § Family Planning Brochure (PUB 275)
- § WTW-5 Welfare-to-Work Program Notice
- § "Stop Lead Poisoning" brochure (in full color)
- § TEMP 2166 Work Pays Notice
- § Form 4101 RAMS Counseling Services
- § Form 7305 Cal-Learn informing notice
- § Form 7009 Counseling Resource List for CalWORKs Clients
- § Voter registration form (card stock) & "declination form"
- § Domestic Violence (DV) informing material:
 - § "Are you in an Abusive Relationship?" (on blue paper) OR "Exit Instructions" (in various languages).
 - § "Abuse Survivors & CalWORKs" (blue paper)
 - § Form 4125 DV as good cause for FSB non-coop (pink paper)
 - § Form 4126 DV Informing Notice - 2 copies
- § For cases with Food Stamps:
 - § FS-8 "Important Information About Verifications in FS"
 - § FS-9 "Food Stamps - Important Information"
 - § OCR 2 - ADA Invitation to Disclose

Complete the Case Comment Tool

Miscellaneous

The following items are not associated with any particular question on the Statement of Facts, but should also be handled during the phone interview.

Immunization: If the client has pre-school age children, ask the client for the immunization verification. Also, if there is not already one on file, send form 4019 to client to sign the authorization on the bottom. If the client is requesting an exemption due to personal belief, explain the process for self declaration.

Modified Payments: If the client has Modified Payments and it is for a private landlord, an updated Form 4114 may be needed. SFHA usually sends a renewal form automatically, but if they have not, request an updated Form 4071 and include it when sending the CW 2200.

SAR-7s: When the completed RRR Orientation packet is assigned to you as a task, look through the past year's SARR-7 and spot ones that were not filled out completely or correctly. Instruct client of proper way to fill out SAR7. Send any incomplete SAR-7's to client and explain what had been missing. Ask them to bring it in to RRR Orientation.

Pending verification: Finally, one additional form that you may want to complete during the interview is the Form 4309, on which you can list any verifications that need to be obtained or forms that need to be completed in order to complete the RV. You should go over the list with the client at the end of the interview, indicate the deadline that they are due, and give the client a copy. You may also want to provide the client with a return envelope.

IV. Concluding the RRR

After the phone interview and RRR Orientation have been completed, a determination should be made on whether or not there is continuing eligibility for all members of the family. However, if there is crucial information or verification pending, then a final determination cannot be made until it is received, unless a 10 day NOA is not timely stating the missing information or verifications.

If it is for adding a person and verifications are not received, then an optional person may be deleted or the entire AU or CF HH may be discontinued.

A. Completing the RRR Forms

Once again, review all the forms from the interview for completeness. Make sure the client has answered all the questions on the Statement of Facts and that the client's signature has been secured on all forms where it is required. If you have not completed the county use sections during the interview, do so now. There may be additional information which you acquired after the interview which you will want to add to your notations. Check for all client and staff signatures to appear on all the required spaces.

B. Non-citizen Eligibility

If any member of the AU or CF HH is a non-citizen, review the case in relation to eligibility and/or categorization in Federal FS/CFAP and Federal/State-only CalWORKs. For FS/CFAP, use the Form 6130 FS/CFAP Eligibility Worksheet.

C. Number of Parents in AU

Review the case in relation to the number of parents in the AU and the appropriate Aid Codes that must be used for Zero-, "One-", and Two-parent AUs. Use the latest CalWORKs Aid Code Table for reference.

D. School Attendance

No verification needed

E. Case Comment

Complete the Case Comment Tool including changes reported during RRR process. Include verifications submitted and verifications still pending.

V. Discontinuance at Time of RRR

Clients will receive an additional 5 months of Transitional CalFresh (TCF) unless discontinued for not completing the RRR, then both CalWORKs (CW) and CalFresh (CF) are discontinued at the end of the certification period.

If client did not show for RRR Orientation they may still be eligible for CF benefits. Review if they met CF RRR requirements (only phone interview is needed, signatures on SOF and R&R and applicable verifications) as long as they meet all other CF eligibility requirements.

Even though the case is not eligible for TCF if client fails to complete RRR, CalFresh and MediCal must be re-determined.

If client is discontinued from CalWORKs, but remains eligible client must be sent Form CF 37 – Recertification Application – CalFresh Only Households.

Clients must receive written notice at least 10 days before their CalFresh benefits are lowered or stopped.

If the CalFresh case has at least one CalWORKs member of the household receiving a CalWORKs grant or is considered aided for the purpose of CalWORKs, then the household must use the SAW 2 Plus for redetermination

CalWORKs Eligibility Handbook	Inter-County Transfers - Outgoing 57-2
	Effective 6-1-17

57-2 Inter-County Transfers - Outgoing

Inter-County Transfers - Outgoing: MPP 40-187 through 40-191, 40-197

See also 50-27 Inter-County Transfers - Incoming and 50-34.3 DV and the Inter-County Transfer Process for more information.

I. Inter-County Transfer Defined

An Inter-County Transfer (ICT) is a transfer of responsibility for determination of eligibility and for provision of public social services from one county to another. It must be done at the proper time to assure no duplication of aid or lag in payment of aid to the eligible recipients or households who move from one county to another.

The counties concerned can fulfill their responsibility for timely processing on an ICT only when the family properly reports a move from one county to another. It is every family's responsibility to inform the county of its whereabouts or plans.

Informing staff of a contemplated move or temporary absence from the county will help prevent misunderstandings and assure continuity of payment. Recipients must notify the sending county or receiving county of a change in residence within 10 days of their actual move.

II. Initiating an ICT

- An ICT is initiated when a recipient notifies the county that they are moving from one county to another to make his or her home. Recipients must notify the sending county (where the recipient(s) lives or is physically present and receiving CW or CF assistance and/or benefits) OR receiving county (county where the recipient is moving or relocating) of a change in residence within 10 days of their actual move.
- Notification can be made in-person, mail, by phone or online (if available).
- **Whichever county the recipient notifies of the move (sending or receiving), that county must initiate the ICT within 7 business days of receiving the notification.**
- The sending (outgoing) county will initiate the ICT with the CW 215 form via a written or electronic process.
- The receiving county will initiate the ICT by requesting, either electronically or by written request, the sending county to transfer the recipient's case.
- If the recipient notifies the receiving county of a change in residence, the recipient shall not be required to also notify the sending county and request the sending county to transfer the case. The receiving county is responsible for contacting the sending (outgoing) county and coordinating this process.
- The recipient is no longer required to go to the nearest welfare office in the new county and be interviewed, complete additional verification requests or have a redetermination of eligibility. (An exception would be if the recipient's annual recertification or other periodic reports are due).
- Receiving counties are allowed to interview incoming ICT recipients regarding participation in the Welfare-to-Work program.
- Sending counties must provide copies of documents necessary to verify current benefits and grant amount to the receiving counties within 7 business days. Recipients must not be asked to provide copies of documents that were previously provided.
- If a move is from Region 1 to a Region 2 county, or vice versa, the receiving county will adjust the AU's grant at the end of the transfer period.

- The ICT process cited above also applies to NACF and TCF cases.
- To ensure uninterrupted childcare, it may be appropriate to complete the Child Care Request Form (CCP 7) as part of the ICT process. However, it's the recipient's responsibility to apply for child care in the receiving county.

[Also see [All County Letter 17-58](#), "Changes to the Intercounty Transfer Process...", dated June 23, 2017; [Senate Bill 1339](#).]

III. Transfer Period

The 30-day transfer period begins with the postmarked date or the date of the electronic transfer of the CW 215, Notification of Inter-County Transfer. The transfer period may also depend on the date the CW 215 is postmarked.

Example: if the CW 215 is postmarked April 1, the end of the transfer period is April 30. The worker will discontinue the case April 30 and the new county will assume responsibility on May 1. However, if the CW 215 is postmarked April 2, the end of the transfer period is May 1. In this case, the worker will hold the case and discontinue May 31. The new county will assume responsibility on June 1.

NOTE: If the recipient moves out of the county during the last two months of the Semi-Annual cycle, the receiving county is responsible for completing the SAR7. The sending county may process recertification if both the sending and receiving counties agree it's in the best interest of the recipient.

IV. Outgoing ICT – Staff Responsibilities

1. Complete Form CW 215 Notification of Inter-County Transfer (ICT) and fax or electronically mail to the new county. If the client is homeless, staff should write "homeless" in the address box or provide a mailing address.
2. Mail the ICT Packet (the CW 215 and documents listed below) to the new county within seven (7) working days from the time of notification to the new county of the ICT.
3. Provide a copy of the most recent SAWS 1 (Application for Cash Aid, Food Stamps, and/or Medical Assistance).
4. Provide copies of 278F and 278 LMO.

5. Provide form 4019, verification of immunization for children less than six years old.
6. If the AU is receiving exempt MAP, provide verification of status.
9. Provide WtW 2 and WtW 2A (Employment Plan).
10. If the WtW 2 does not exist, send page 6 (work history) from the SAWS2.
11. Provide copy of the latest 60 Month Time Clock NOA.
12. If the individual has a learning disability, have the client sign WtW 20 (Permission to Release Learning Disabilities Information) and forward the written LD evaluation to the new county.
13. If the individual has a disability, provide CW 61 (Medical Report) and any relevant information so that benefits and services can continue in the new county.
14. Provide verification of any other exemptions.
15. Provide relevant information on any sanctions imposed.
16. If there any changes in eligibility or payment level send a copy of the NOA.
17. Send copy of the latest QR 7.
19. Send copies of any QR 3 submitted during the current quarter, whether for a mandatory or voluntary report.
20. Discontinue Food Stamps at the of the 30 day transfer period, using the Food Stamps Negative Action Code 681 (Discontinuance - Moved Out of County).
21. Discontinue the CalWORKs case at the end of the 30 day transfer period.

V. ICT and Special Procedures for Welfare to Work/Employment Plans

The State requires that a county receiving an ICT from another county to continue cash assistance and/or benefits for a family that has moved into the receiving county within

30 days. Within this 30 day period, the State requires that counties cooperate with each other to make the family's transition as smooth as possible.

If the Welfare to Work or Employment Plan is in place in the sending county, the receiving county should establish a CalWORKs Welfare to Work case and assure that the transferred individual is engaged in Welfare to Work activities as soon as possible.

As stated above in IV, the sending county must include WtW2 and WtW2A as part of the ICT packet that is sent to the receiving county. The receiving county will use this information to determine Welfare to Work /Employment Plan for the client in the new county.

When individuals transfer to another county, but do not have a completed WtW plan, the receiving county can complete a WtW interview and should place them in the activity in which they are eligible or were participating in the sending county. This will assure that they resume participation from where they were in the CalWORKs WtW program flow in the sending county.

References:

SENATE BILL (SB) 1339; INTER-COUNTY TRANSFERS - OUTGOING: MPP 40-187 THROUGH 40-191, 40-197; ALL COUNTY LETTER 17-58, DATED 6/23/2017; WELFARE AND INSTITUTION CODE (WIC) 10003, 11052.6, 11053, 11053.2 AND 11102; CW ELIGIBILITY HANDBOOK 50-27 INTER-COUNTY TRANSFERS – INCOMING.

CalWORKs Eligibility Handbook	CalWORKs and FCS Coordination/Fast Passes 57-3
	Effective 01-02-09

57-3 CalWORKs and FCS Coordination/Fast Passes

Beginning in July 2008, Family and Children's Services (FCS) introduced a new policy regarding the issuance of Fast Passes to parents with open cases in the Child Welfare Division.

This policy requires FCS Protective Service Workers (PSWs) to check with CalWORKs staff to see if the parent or legal guardian in families with open cases in FCS are eligible for Fast Passes from CalWORKs.

If the parent or guardian is eligible for a Fast Pass from CalWORKs, but for some reason does not have a current Fast Pass, FCS will provide the parent or guardian with a Fast Pass for one month. After that first month, the Fast Pass will be issued by the CalWORKs worker assigned to the case. This will allow a reasonable amount of time for CalWORKs and FCS staff to initiate contact and coordination between programs.

If the parent or guardian are currently receiving or are eligible for a Fast Pass, CalWORKs staff must inform the FCS worker so that the issuance of the Fast Pass can be coordinated between the two programs.

If the parent or guardian is not enrolled in Welfare-to-Work, or is otherwise ineligible for a Fast Pass, CalWORKs staff must notify the FCS worker so that initial and subsequent Fast Passes can be issued by FCS staff.

CalWORKs staff may receive emails or phone calls from FCS staff inquiring about the mutual client's eligibility for a Fast Pass from CalWORKs. CalWORKs staff will check to see if the parent or guardian is enrolled in Welfare-to-Work activities that qualify for a transportation benefit.

CalWORKs staff may need to explain to the FCS worker that in some cases, even though a client is participating in Welfare-to-Work, he or she may not be eligible for a Fast Pass due to insufficient hours, etc.

If FCS staff contact an Eligibility Worker assigned to the case, the EW will use the "Inquiry" screen in CalWIN to determine if there is a Welfare-to-Work ES assigned to the case. If there is, the EW will refer the FCS worker to the WtW ES for information on the client's eligibility for a Fast Pass.

Although not every request for a Fast Pass requires the scheduling of a Linkages/MDT meeting, staff in both FCS and CalWORKs are encouraged to set Linkages MDT meetings when it is determined by staff in both programs that requests for a Fast Pass reflect larger family self-sufficiency issues.

CalWORKs Eligibility Handbook	Communication and Collaboration Between CalWORKs and FCS on Linkages Cases 57-4
	Effective 02-09-09

57-4 Communication and Collaboration Between CalWORKs and FCS on Linkages Cases

HSA Policy

Communication, collaboration and coordination between CalWORKs staff and Family and Children's Services (FCS) staff shall occur as appropriate and necessary when children and families are involved with the San Francisco Human Services Agency (HSA).

Activities of FCS and CalWORKs staff, that require strong communication and collaboration include:

- Prevention (pre-FCS involvement e.g., DR Path 1-Community Response)
- Early intervention (Non-Court)
- Placement decisions
- Identification of mutual (common) cases
- Case staffing (CDU, FSU)
- Development & coordination of a common case plan
- Joint case management efforts
- Joint home visits
- Joint resource & needs identification
- Kin caregiver support
- Foster care

Linkages Meetings/ Multi Disciplinary Team Meetings (MDTs)

Listed below are some examples of MDTs where communication, collaboration and coordination between FCS and CalWORKs staff (as well as other partner agencies/community-based organizations) may occur.

- ⇒ Differential Response (DR)
- ⇒ Team Decision-making Meetings (TDM)
- ⇒ Linkages meeting
- ⇒ Family Conferencing

Form 8032, Inter-Program Release of Information no longer needed

Pursuant to W&IC 10850 (c) All FCS and CalWORKs staff can share information concerning case activities and requirements on a need-to-know basis, for the purposes of case planning and/or case conferencing.

Meetings with Family Inclusion

Although a release is not necessary to identify and discuss common cases between programs, a release of information from the parent(s) should be obtained to continue

the meeting if the family is present. Out of respect for the families, if the family is present at a meeting, the meeting facilitator should outline:

- The purpose of the meeting
- Attendees who may be present at the meeting
- The value and importance of the family's voice at the meeting.

Examples: It **may not** be necessary to disclose an old conviction of a parent for a crime unrelated to the current service need. It **may not** be necessary to disclose a molest history of a child when providing current substance abuse services for the parent.

Communication and Information Sharing

In most cases, the Protective Service Worker (PSW) will take the lead in communicating, acquiring and disseminating information to the family and MDT members, although sometimes the CalWORKs worker or other MDT member may request a meeting through the PSW. The important point is that FCS and/or CalWORKs staff initiates communication and collaboration as soon as a common case (or potentially common case) is identified. The ideal mode of communication is in person or by telephone.

Discretion must be used with regard to the information that can be shared, and under what circumstances. Families may disclose personal and sensitive information not previously known to CalWORKs, and vice versa. It is important to be mindful of the potential impact of CalWORKs, CAAP and other related programs on FCS outcomes affecting child safety, well-being and permanency.

Guidelines for Child abuse reporting

1) CalWORKs worker reports on CalWORKs-only applicant or case:

If a CalWORKs worker suspects child abuse or neglect on a CalWORKs- only applicant or case, he/she should be instructed to follow the standard mandated reporter/SCAR (Suspected Child Abuse Report) procedures. (Children Abuse Reporting Hotline: 800-856-5553 or 415-558-2650).

2) Pre-existing Common FCS & CalWORKs cases:

CalWORKs staff who feel that they should file a child abuse report on a pre-existing common case should first consult with the case-assigned PSW. The CalWORKs worker and PSW should agree on who will call the FCS Hotline with the report, following standard mandated reporter procedures.

3) During an Emergency Response investigation:

When a case is assigned for investigation, an assigned FCS ER PSW will investigate the allegations without consulting the CalWORKs worker. If, however, the PSW believes it is necessary to consult with the CalWORKs worker, the PSW will consult with his/her supervisor who will consult with the CalWORKs supervisor.

The aforementioned guidelines do not substitute CalWORKs specific guidelines on how to report child abuse and neglect or the need to consult with your supervisor, Linkages Coordinator or CalWORKs management when unclear on how to proceed on a specific case that appears not be covered by this policy.

Goals

The goals of effective communication, collaboration and coordination between FCS and CalWORKs are to:

- Streamline communication
- Meet common and individual agency outcomes
- Unify decision-making, coordinate case plans
- Monitor and enhance completion of time-specific family & agency goals
- Coordinate supportive services
- Enhance successful service delivery
- Model best practices: Family-centered, strengths-based, needs-driven, solution-focused, community-based.

CalWORKs Eligibility Handbook	Transitional CalFresh and WINS Program 57-11
	Effective 10-1-19

57-11 Transitional CalFresh (TCF) and WINS Program

I. Transitional CalFresh (TCF) continues benefits for households (HH) terminating their CalWORKs cash aid without the need to re-establish CalFresh eligibility. Households that lose their CalWORKs cash aid benefits receive five months of TCF benefits.

Who Gets Transitional CalFresh?

A. With some exceptions, households (HH) terminated from CalWORKs cash aid are entitled to receive Transitional CalFresh (TCF), without having to apply for the benefits.

Enter the number of hours worked for all HH discontinuing from CalWORKs – see information on WINS and how to enter number of hours worked below.

Exceptions to TCF eligibility: ACL 13-88 made cash aid discontinuances due to not completing SAR7's or CW RRR's ineligible for TCF.

Grant TCF for all HH's losing cash aid except:

1. HH fails to complete and submit the SAR7 timely. (note: if HH submits SAR7 and fails CW, but remains eligible for CF, convert PACF to NACF and retain the certification period, remove the CW grant for CF budgeting)
2. HH fails to complete the annual redetermination/recertification (RRR). CF benefits will be stopped, unless client only failed the group informing part of the CW RRR process, but complied with all CF recertification requirements. If client meets CF eligibility requirements, but fails to complete CW RRR requirements then convert the HH to NACF with a new certification period.
3. HH's moving out of state.
4. HH's that specifically request not to receive TCF (this must be carefully documented)
5. HH's that were not eligible for CF in their last month of cash aid.
6. HH's that lose cash aid and/or CF benefits due to a CalWORKs or FS sanction.
7. Individuals discontinued and/or sanctioned for Intentional Program Violation (IPV) are not entitled to TCF.

B. Issue TCF regardless of the reason the HH was discontinued except for not completing SAR7 or RRR process and other exceptions above, (i.e. Loss of

Contact/Whereabouts Unknown, Excess Income, only eligible child turns 18, etc.), or how long the HH received cash aid, which could be as little as one month.

C. Grant TCF based on the HH composition at the time of the CalWORKs discontinuance, disregarding anticipated or subsequent changes, except in the case of an IPV conviction.

D. Even if it is known that a HH will be residing in another county after the CalWORKs discontinuance, but with no Inter County Transfer (ICT), the county that last issued CalWORKs must issue the TCF.

E. Timeframes: do not certify for TCF before the effective date of the CalWORKs discontinuance. Approve TCF within 10 days of the cash aid discontinuance whenever possible; TCF must be granted within 30 days.

F. Grant TCF based on the last month of Aid Paid Pending for HH's that are discontinued at the end of the APP period.

II. WINS is a mandatory food benefit which applies to CalFresh only Non-Assistance (NACF) households, with no eligible member(s) CalWORKs benefits, who meet the work participation hours through work, and have at least one child in the household who is under 18 years old. WINS provides a ten (\$10.-) per month additional food supplement benefit to CalFresh HH's meeting required WPR hours.

Who Gets WINS?

- A. Must be a household receiving CalFresh, but not CalWORKs or Tribal TANF;
- B. Must have a child in the home under age 18, or a child attending high school or vocational training full-time with expected completion before age 19;
- C. Must have at least one parent or caretaker relative in the CalFresh household that meets the "work eligible individual" (WEI) requirements

When discontinuing CalWORKs enter average weekly hours worked in CalWIN. By entering the actual hours worked, CalWIN will determine and issue additional WINS benefit as appropriate. WINS recipient are considered meeting WPR requirements and helps us meet the mandated 50% WPR (Work Participation Rate).

Note: Always enter the number of hours worked when discontinuing cash aid and client has employment information available.

III. WINS and TCF:

TCF recipients are issued additional WINS benefits when WINS criteria are met. WINS is evaluated at the beginning of the TCF period: WINS should be issued for the duration of five months unless the household reports and verifies a change in status which renders them ineligible for WINS. Mid -TCF WINS discontinuance is permissible because WINS program is state funded.

A TCF recipient request to add WINS to their benefits: CDW must inform the recipient to wait until the TCF period is over and then recertify for CF, or recertify at the time of the request so that they may be enrolled in CalFresh for regular benefits.

A. Aid codes for WINS:

Most of the WINS-eligible households will be coded either R4 (single-parent) or R5 (two-parent). The other aid codes pertain to households receiving CFAP (R6), Transitional CalFresh (R7 single-parent; R8 two-parent), and Transitional CFAP (R9). The new aid codes are effective the month following the reported change.

Note: Transitional CalFresh households can be evaluated for WINS when a mid-period VUR change is reported. Should the household request to end the TCF period with the reported change, the County shall recertify the case at that time for enrollment into regular CalFresh.

CW staff will enter in CalWIN the average weekly number of hours worked when client reporting income information and when discontinuing CalWORKs.

NACF program staff follow regulations and procedures for WINS determination and redetermination. Since client is not eligible for WINS when receiving CalWORKs CW EW's will only input average weekly hours worked, but do not determine WINS.

Follow these steps to enter the number of hours worked:

1. Check in the ES subsystem for number of hours worked – see link below for CalWIN how-to.
2. If no hours are recorded in the ES subsystem, check income related verifications in iFiles for the number of hours worked and the reported income –pay stubs, SAR7, etc.
3. If hours cannot be attained in step 1 or 2, check IEVS and/or check the work number at www.theworknumber.com or by calling 1-800-367-5690

4. If you cannot verify the work hours with the steps above, call the client and ask how many hours they are working and how many hours they reasonably expect to continue to work. Ask for the name of the employer and the phone number for the employer.
5. If work hours cannot be verified through steps 1 -4, but earned income information is available (in the Collect Income Received Detail window), and the hourly wage is known, then divide the monthly income by the hourly wage and divide the resulting balance by 4.33 to get the average weekly hours worked.
6. Record the number of average weekly hours worked in CalWIN in the "Collect Employment History Detail" window – see link to CalWIN how-to below
7. Case comment the following information in CalWIN to the extent possible: Client name, name of employer, phone number of employer, number of hours worked and reasonably expected to continue, source of information for hours worked (ES sub system, SAR7, pay stub, client, etc).

IV. TCF Benefit Determination

A. Base TCF benefits on the circumstances in the last month of eligibility for CalWORKs cash aid. Use the budget and persons count in effect in the last month of CalWORKs eligibility, minus the cash grant.

B. Categorical Benefits

HH's receiving \$10 per month because of categorical eligibility must continue to receive at least that amount for the TCF period.

Example: A HH is receiving a very small cash grant in the last month of eligibility for cash aid. Other income that must be budgeted for TCF is over the excess income limit. The HH must continue to receive \$10 per month for the TCF period regardless of the excess income.

V. Certification Period

A. Certify TCF HH's for five months. Shorten or lengthen the FS certification period in effect at the time CalWORKs ends to equal five months. The termination of the TCF certification cannot be appealed; the HH must apply for regular FS benefits if they wish to continue receiving FS. TCF cannot be issued beyond five months.

VI. Changes During TCF Period

A. TCF benefits do not change during the five-month certification period, unless:

1. A member of the TCF HH starts receiving regular FS as part of another HH. In this case, reduce the persons count accordingly. If the removed person has income, it is also removed from the TCF budget. The TCF budget must then be recomputed without the person and without his or her income, if any.
 - a. CalWIN will recalculate the TCF budget based on the number of people remaining in the TCF household. Staff will need to manually compute the new budget, removing the person's income from the equation.
2. TCF was computed incorrectly; corrections may change the benefit level.
3. When an on-going OI collection is completed, benefits are adjusted accordingly.

B. HH's may apply for NAFS or reapply for CalWORKs any time during the TCF period. If timely notice of the TCF discontinuance can't be provided, continue TCF until timely notice of the TCF discontinuance can be provided. Do not issue regular FS and TCF at the same time; regular FS starts when TCF stops.

VII. Reporting Requirements

HH's receiving TCF are not required to report anything. We may discontinue TCF if we have reliable information that the HH has left the state.

VIII. Notification

A. After worker action in CalWIN, Client Correspondence notifies households when TCF begins, and if their certification period has been lengthened or shortened.

B. Client Correspondence sends a notice 30 days before the end of TCF; this informs households that TCF is ending and where they may submit a new application if they want to continue receiving FS benefits.

C. Discontinue TCF when the HH is approved for CalWORKs or NAFS during the TCF period.

IX. Inter County Transfer (ICT)

Do not issue TCF on ICT cases, unless the HH fails to apply or is denied in the receiving county. If this occurs, issue TCF. If a HH receiving TCF moves to another county, the original county continues to issue TCF, unless the HH starts receiving CF elsewhere.

X. Overissuances

If a CF OI is being collected in the last month of CalWORKs eligibility, continue the collection during the TCF period. As noted, (see III. A. 3. above), if the OI collection is completed during the TCF period, adjust TCF benefits accordingly. If TCF benefits are erroneously increased during the TCF period, establish an OI and collect the applicable percentage.

XI. Links to Other Relevant or Related Documents

CalFresh PIM 14-05

NACF CalWIN guide and WINS aid codes

How to enter hours worked in CalWIN

For more information, please refer to [ACIN I-54-19, COLA EFFECTIVE, OCTOBER 1, 2019](#)

CalWORKs Eligibility Handbook	Transitional Medi-Cal 57-12
	Effective 03-22-10

57-12 Transitional Medi-Cal

I. Eligibility

When CalWORKs cash aid is discontinued, the former recipient continues to be eligible for Transitional Medi-Cal (TMC). The period of eligibility for TMC varies by circumstances, and may range from one month to one year.

(NOTE: A client must be aided for at least three months in order to be eligible to TMC with no share-of-cost. Clients discontinued from cash aid before being aided for three months will have a share-of-cost for MC.

When CalWORKs is terminated, CalWIN will make a Medi-Cal 1931(b) eligibility determination to see if the household continues to be eligible under 1931 (b) only. If the household is not eligible under 1931(b), CalWIN will evaluate the family/individuals for all other Medi-Cal programs.

The EW must hold the discontinued cash case for 30 days to allow for the possibility of recission or restoration. After 30 days, the Med-Cal portion of the case must be transferred to a Medi-Cal worker. The CalWORKs unit clerk will re-assign the MC program on the case to Y71N, which is the MC clerk assigned to receive all discontinued cash aid cases coming from CalWORKs.

The EW must be sure that the discontinued case has the correct aid code for TMC. The aid codes for six-months of TMC are usually 39 or 3N.

II. Problems with TMC

MC will sometimes contact an EW unit supervisor if there is a problem with TMC. The EW supervisor will attempt to work with MC to resolve the issue. If the EW supervisor is unable to resolve the issue, the supervisor will contact MC via the 38SECUR email.

III. "JOBS NOW!" clients and TMC

In some cases, CalWORKs clients who have taken jobs as Public Service Trainees or other jobs through the JOBS NOW! program will experience problems with TMC due to their discontinuance from cash aid. This is often due to a failure on the client's part to continue following CalWORKs requirements after employment.

Sometimes these clients assume incorrectly that because they are working onsite that their CalWORKs EW knows this. This is, however, not always the case. In some

instances, the client will fail to complete a RRR when due, causing the cash case to be discontinued due to a failed RRR. A discontinuance for this reason will result in TMC eligibility for one month only. In other cases, the client fails to submit a QR 7. If these clients were discontinued for being over IRT or earned income exceeds MAP due to their Public Service Trainee income, they would be eligible to six months of TMC.

To prevent this problem, when an ES is informed that the participant has gotten JOBS NOW! employment and enters that information into the Employment Subsystem, the ES must remind the client to continue to comply with all CalWORKs eligibility requirements. The ES should also email the EW to make sure the EW knows that the client is now working.

It is also a requirement that the EW make an attempt to contact the client after a discontinuance notice has been mailed. The EW should inform the client that he/she must comply with all CalWORKs eligibility requirements in order to keep MC for up to six months or a year depending on income. The EW must inform the client what needs to be submitted or signed to rescind/restore the case (complete RRR, submit QR 7, submit verifications, etc.). Once the client has complied and the case has been rescinded/restored, the case can be discontinued for income exceeding MAP or over IRT. This type of discontinuance will give the client TMC for six months.

The EW supervisors will need to check the MC program status in both CalWIN and MEDS. If an EW supervisor finds that a JOBS NOW! client does not have TMC after discontinuance, report this to the Eligibility Manager.

58- Time on Aid

CalWORKs Eligibility Handbook	Time on Aid - Table of Contents 58-0
	Effective 9-1-04

58-0 Time on Aid - Table of Contents

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58-12 Two-Parent Families, Time Outs, and Welfare to Work

58-13 CalWORKs Services for Timed - Out Adults

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CalWORKs Eligibility Handbook	Time on Aid - Introduction 58-1
	Effective 7-1-07

58-1 Time on Aid - Introduction

Handbook section 58 describes the Time on Aid (TOA) Program, which manages 60 months of cash aid to clients from the California Work Opportunity and Responsibility to Kids (CalWORKs) program. Federal and state law and regulations require 18 or 24 and 60-month time limits on the receipt of aid as well as provide for exceptions to time limit requirements.

I. Exemptions and Extensions

The exemptions and extensions that impact the 60-month time limits are called “Clock Stoppers” and “Time Extenders”.

II. TOA Case Review

Section 58 defines the policy and procedure for conducting a case review and informing recipients about the CalWORKs 60-month time limit.

A TOA case review is required on:

- All intake cases
- At the 54th month of aid
- At the annual re-determination
- At the client's request.

A Welfare Data Tracking Implementation Project (WDTIP) is the state wide automated system which provides county welfare departments with information on recipients' aggregate time on aid for eligibility and welfare-to-work participation determinations. A Track Report of Recipients Approaching Time Clock Limits: A report is generated based on this data to identify persons who are at the 54th month of aid. However, the case record has the most reliable data. A careful review is required of each case that appears on the TRC101 report. Necessary corrections to the WDTIP system are completed by a TOA Coordinator, who is authorized to make changes.

III. Child Support and Overpayments

The policy and procedure to "untick" months for reasons of recouped child support and collected overpayments is included in Section 58-20 of of this Handbook.

IV. Informing

Recipients must be informed on a timely basis of the number of months that count toward the 60-month time limit and the process by which they can claim the time-limit exemptions. Counties are required to provide this information to ensure that recipients know of the approach of the time limits to prepare for the resulting grant reduction, and to ensure they are provided exemptions to which they are entitled.

The Notices of Action (NOA) are designed to keep the recipient informed of the remaining time on aid, any exemptions or extensions and the reasons for changes. In addition to providing the recipient with a NOA, the Program requires a face-to-face interview to ensure the recipient understands the regulations and is informed about time limits, exceptions and community resources for adults' "timing out".

V. Timing Out

When the adult(s) reach the 60 month time out and is deleted from the grant, the result is a Safety Net case or a whole case discontinuance.

A Safety Net case includes a parent(s) who has timed out but whose children continue to be eligible for aid. This adult is eligible for continued participation in WtW activities and supportive services. Safety Net families may be eligible for supportive services for work as long as the family remains on aid and for training or education-related activities. A reappraisal is required.

Families whose income makes the whole case ineligible for aid are eligible for post-aid retention services for up to 24 months when a family member is employed.

An Administrative Exemption may be granted for an adult not eligible for a CalWORKs exemption by recommendation of the Special Needs Multi-disciplinary Team (MDT).

CalWORKs Eligibility Handbook	Time on Aid - References 58-2
	Effective 7-01-07

58-2 Time on Aid - References

A. References from the Law and Regulations

All County Letters (ACL) 97-65; 98-37; 99-90; 99-27; 00-48; 01-66; 02-33; 02-66; 02- 74; 02-90; 02-92; 03-01.

All County Information Notices (ACIN) I-52-99; I-47-02; I-90-02; I-95-02; I-01-03; I-40-03.

Manual of Policy and Procedures (MPP) 81-215; 82-832.132; 82.833.1; 89-110.2; 40-107; 42-301.2; 42-302; 42-713. 44-133.5 & .8; 44-211.5; 44-317; 44-318; 44-350; 44-352.

B. References from Welfare to Work Handbook

Section 71-4, Exemption

Section 72-2.5, Evaluation

Section 72-2.6, Special Needs

Section 73-8, Community Service

Section 73-15A, Job Search

Section 74, Supportive Services

CalWORKs Eligibility Handbook	Time on Aid - Exemptions and Exceptions: Clock Stoppers and Time Extenders 58-3
	Effective 7-01-07

58-3 Time on Aid - Exemptions and Exceptions: Clock Stoppers and Time Extenders

Exemptions and Exceptions impact the 60-month time limit. Exemptions are called Clock Stoppers while Exceptions are called Time Extenders.

Beginning January 1, 1998, an adult (parent, aided stepparent, and/or caretaker relative) can only receive 60 months (5 years) of cash aid from the CalWORKs program. This includes cash aid received from any county in California or other states' Federal Temporary Assistance for Needy Families (TANF) Program.

I. Exemptions/Clock Stoppers

Exemptions/Clock Stoppers occur when a month on cash aid does not count toward the CalWORKs 60-month time limit if at any time during that month the client meets certain criteria as shown in the WtW and CalWORKs comparison table on page 3.

While the WtW time-clock and the CalWORKs time-clock share certain exemptions, the following exemptions do not stop the 60 month clock:

- Pregnant/unable to work,
- Care for a newborn,
- Working Full Time for VISTA.

In addition, the CalWORKs time-clock is not stopped or adjusted for the WtW case review reasons including:

- Job readiness activity,
- Unsubsidized employment meeting required participation hours,
- Lack of adequate caseload coverage,
- Lack of accommodation for low English proficiency.

II. Exceptions/Time Extenders

Exceptions/Time Extenders refer to the fact that, when the client has been aided for 60 months, the client may be added back into the AU if he or she and all parents, aided stepparents, and/or caretaker relatives in the home are in certain categories.

The Exceptions/Time Extenders are more strict in requirements than are Exemptions/Clock Stoppers. Not only must the parent meet the criteria, but all other parents, aided stepparents, and caretaker relatives in the home must also meet the exceptions.

Individuals are added back into the AU based on Beginning Date of Aid rules (MPP 44-317-318).

Please note the special circumstance:

Disabled—When this occurs after 60 months, not only must the individual be disabled but s/he must also be receiving SDI, WC, etc, AND all other adults in the home also meet an exception.

Domestic Violence—is the one exemption/clock stopper that does not require all adults in the home to meet an exception in order for the domestic violence victim to qualify for a Time Exception/Time Extender.

Administrative Exemption—may be granted by the Program Manager if an adult has been found to meet the “unable to maintain employment or participate in WtW” criteria and administrative exemption has been recommended by the Special Needs MDT process.

(Please refer to the paper version of this Handbook for charts in this section).

III. Informing Notice

The CalWORKs 60 Month Informing Notice (CW 2184) informs the recipient about time limits, exemptions and extenders in detail.

Give the CW 2184 Notice to the client for every:

- Intake,
- Reinvestigation (RV),
- Time on Aid Notice of Action (NOA).
- The 2184 form is on the shelves.

To print a copy of the CW 2184, go to www.dss.cahwnet.gov. Then go for FORMS, and search alphabetically for CW 2184.

CalWORKs Eligibility Handbook	Time on Aid 58-3.1- Special WtW Exemptions: August 2009 - July 2011
	Effective 11-01-09

58-3.1 Special WtW Exemptions August 2009 - June 2011

A new law became effective July 28, 2009 that exempts some families from participating in WtW activities. This *temporary* exemption will last until July 1, 2011, or until the exemption no longer applies, whichever is shorter.

This new law allows a WtW exemption for a parent or other relative who has primary responsibility for personally providing care to **one child who is from 12-23 months of age, inclusive, or two or more children who are under six years of age.**

A. Time Clock

The first 12 month exemption for the first child born while on aid does *not* stop the TOA CalWORKs clock. The exemption given for the 12-23 (inclusive) month period *does* stop the TOA CalWORKs clock. At the end of the 12-23 month period, the TOA clock starts again and the client must then register for WtW, unless otherwise exempt.

Under San Francisco County policy, CalWORKs is committed to providing WtW services to all our clients who want to participate. Exempt clients are encouraged to volunteer for WtW activities, and those clients already in an activity may continue to participate and receive appropriate services, including child care.

B. Examples

Example #1 = Client applies for CW May 2009 and is pregnant, is registered for WTW and is participating. Client gives birth in July 2009, and the baby is added to the case beginning August 1, 2009. August 2009 - June 2010 the CW's clock ticks and the client is exempt from WTW (11 months). July 2010 - June 2011 (12-23 month) mom is still exempt for WTW and the CW's clock does not tick.

Example #2 = Client applies for CW's September 2009 and is pregnant, registered and participating. Client gives birth December 2009 and the baby is added to the case January 2010. Client is exempt WTW and the CW's clock ticks Jan 2010 - Nov 2010 (11 months). Client is exempt Dec 2010 - June 2011 (7 months only because regulation sunsets) and the CW's clock does not tick. Client needs to be re-engaged in WTW and the clock Ticks July 2011.

Example #3 = Client has a 2 year old and a 3 year old on 8/1/2009. Client is exempt from WTW from 8/1/2009 - 6/30/ 2011 and the CW's clock does not tick for the entire time.

Example # 4 = Client has a 3 year old and 5 year old on 8/1/2009. The 5 year old turns 6 on Feb 10, 2010. Client is exempt from WTW and the clock does not tick from 8/1/2009 - 1/31/2010. Client will need to be re-engaged in WTW and the clock needs to Tick beginning 2/1/2010.

Example # 5 = Mom has one child on 8/1/2009 who was born 6/10/08 and added to the CW's case 7/1/08. Mom would be exempt from WTW from 8/1/09 - 5/31/2010 and her clock would not tick since she has a child bt 12-23 months. Client would need to be re-engaged in WTW June 2010 and her CW clock would start ticking.

CalWORKs Eligibility Handbook	Time on Aid - Intake 58-4
	Effective 9-06-16

58-4 Time on Aid - Intake

DISCLAIMER: Some of following procedures in this handbook section are in the process of being reviewed and revised. Please note that some procedures below (prior to the EFFECTIVE DATE cited above) may have changed and/or been updated to reflect current policies and procedures, but has not yet been posted.

Time on Aid (TOA) review is required on all CalWORKs intake cases. Time on aid information from other counties or states in which the applicant received aid is needed at intake.

A. Eligibility Worker Responsibilities

Intake Process:

1. Intake EW's must inform participants of the time remaining on their WTW 24-Month Time Clock using the CW 2208, Your Welfare to Work 24-Month Time Clock, Informing Notice.
2. At the time the TOA for the 48 Month Time Clock is reviewed in intake, the Intake EW shall complete the CW 2208 and indicate how many months are remaining on the 24-Month Time Clock.

Carrying Process:

Carrying EW's must inform participants of the time remaining on their WTW 24-MTC using the CW 2208, Your Welfare to Work 24-Month Time Clock, Informing Notice at RRR.

EFFECTIVE DATE OF THE FOLLOWING PROCEDURES BELOW: 07/01/07

Time on Aid (TOA) review is required on all CalWORKs intake cases. Time on aid information from other counties or states in which the applicant received aid is needed at intake. The time on aid history for a re-applicant in San Francisco may be found in the case record. When an intake case is found to be in the 54th month or up to the 60th month, it becomes high priority for transfer to carrying. A timed out client who re-applies for aid may be denied, but other family members may be eligible.

I. All Applicants

A. Before the interview with the applicant, print and KCAL Screens.

- KCAL will give the time on aid in California, including months in San Francisco and other counties.

File these screens in Section 3 of the case folder.

Note: KCAL may also show information for time on aid in other states. Other state information will appear if a California County has verification from the other state and has entered the information on the screen.

B. Provide CalWORKs 60-Month Informing Notice 2184 CW to every applicant.

C. Complete the First 60-Month Time Clock NOA, CDS 721 (translations M40-107a) within 30 days of approval for aid.

II. Restorations

When the applicant has received aid previously in San Francisco and is re-applying, look for evidence of a prior TOA case review in the case file and for a history of Diversion payment.

A. TOA Review Form and/or Notice on File

Look in Section 3 (& 6) of the case folder for the most recent Time on Aid Notice of Action (NOA) to determine the case status.

- Was a TOA review completed, but the case discontinued for another reason other than time out?
- How many months of aid had been used at the time of the last review?
- Was the whole case discontinued due to the adult timing out?
- Was this a Safety Net case at the time of discontinuance?

B. Check for Diversion Payments

To determine if Diversion payments have been given, look for FBU-DV; for example, 000000-DV-0.

Print the screen and file in Section 3. If Diversion has been issued, send case to TOA Coordinator for review.

C. TOA Review

Send case folders to TOA Coordinator for review:

- If the TOA Review was not completed before the case was discontinued,

OR
- If a review was completed and an updated review and TOA Notice are required.

OR
- If Diversion has been issued.

III. Intakes From Other Counties Or Other States

A. Inter-County Transfer (ICT)

When the individual was last on aid in another county, review the ICT form CW215 for sanction, time limit information and the latest 60 Month Time on Aid Notice of Action from the sending county. Please see CalWORKs PIM #03-02.

During the routine contact with the sending county, if the information is not complete, ask for the updated TOA and Sanction information, including child support and overpayment recoupment reviews.

The TOA Coordinator will complete the review.

B. Transfer From Out Of State

When the individual was last on aid in another state, ask for the TANF Time on Aid (TOA) information during the routine contact with the other state.

The TOA Coordinator will complete the review.

IV. Intake Case In 54th + Months On Aid

A. WDTIP Report

The TRC 101 Report lists CalWORKs recipients who are close to the end of the 60-month time limits.

The Intake Supervisor shall review this report monthly for any intake case listed in a 60-54 column. If a review is needed, transfer the case to carrying. This action is high priority. If for some reason the case cannot be transferred from Intake, send it to the TOA Coordinator for review.

B. Request Services From Enhanced Screener

An adult applicant who is in the 54th to 60th month on aid must receive priority attention for transfer from Intake to Carrying AT THE TIME OF APPLICATION. If immediate transfer cannot be done, after the TOA review is complete, the Enhanced Screener must meet with the client and proceed with services as appropriate including interview, case conference, reappraisal and plan (see Sections 58-7, 8 and 13).

To refer to Enhanced Screener, call the unit and narrate the call.

V. Intake And A Timed-Out Adult

A. When The Applicant Timed Out During A Previous Period Of Aid:

1. Give the applicant the CalWORKs 60-month Informing Notice (2184 CW).

2. Review the exemption and extension information with the applicant. Follow procedures in Section 58-3 to exempt or extend time if eligible.

Note: Use Time Limit Exemption Determination (CW2186b) to inform the applicant who asks for a new exemption.

3. If there is evidence of child support recoupment on WCHI and /or the DSS338X Report and the case file does not include the child support review documentation (7060 CW), refer the case to the TOA Coordinator for review and possible extender.

See Section 58-22 ff for information about how to add back an adult due to recouped child support.

B. Adult Not Eligible

Complete the steps in A above.

When the adult applicant is not eligible for an exemption or extender, but other family members are eligible, use the notice, Partial Cash Aid Approval, Timed-out Adult, (translation M40-107j). See Section 58-32 printed handbook for a copy of the notice (NOT available on line).

This notice informs the applicant that s/he is denied aid but the child(ren) and other adult (if applicable) have been granted aid.

C. Notice of Action (NOA)

Complete the notice Partial Cash Aid Approval, Timed-out Adult: M40-107j.

1. The notice asks for the date of the last Time on Aid (TOA) notice. Find the TOA notices in Section 3 (or 6).

2. Complete every blank on the notice.

3. The notice includes informing information about:

Food stamps,

Medi-cal,

Child Care: Possible Stage 2 Eligibility,

Children's Health and Disability Prevention Program (CHDP).

4. Send a CalWORKs 60-month Informing Notice (CW 2184) with this notice as is required with any and all TOA notices.
5. Note: The CW 2184 is on the shelves.

CalWORKs Eligibility Handbook	Time on Aid - Case Review
	Effective 7-01-07

58-5 Time on Aid - Case Review

Case folders must be reviewed thoroughly before completing and sending the time-clock NOAs to clients, because of the unreliability of data entry into CDS and GIS and the unreliability of TOA (“Time On Aid”) and TRAC (“Tracking Recipients Across Counties”) automated systems designed to keep track of all the time-clocks. The case review may reveal that certain clients have not used the number of months that the TOA and/or TRAC systems indicate because exemptions or deletions/discontinuances were either not properly recorded/coded or not transmitted from one system to another.

I. TOA and TRAC Data

The TOA and TRAC systems are used only to identify cases which are likely to be approaching their 54th CalWORKs month and need to be reviewed.

If you discover a TOA/TRAC discrepancy after completing the review and sending the appropriate time-clock NOA to the person, use the process in Section 58-11, Time on Aid Corrections, to correct the system.

A. Intake Cases

See Section 58-4, Intake.

II. Initial Case Review And Noticing Process

While the outline of the case review and noticing process makes references to clients who are in their 54th CalWORKs month, most of it is also applicable to the issuance of any initial CalWORKs time-clock NOA. This could also occur at Intake, Redetermination, or at the client’s request.

Use the WtW case review Worksheet for Time Limits (7027 CW) to facilitate the review process and the transfer of information to the NOAs, as well as the correction of data in TOA or TRAC.

III. Outline of Initial Case Review Process for Clients in Their 54th Month

1. Identify cases/clients in their 54th CalWORKs month from TRC101 printouts.
2. Obtain all volumes of case folder to cover period back to January 1998. Request through the Unit Clerk to Principal Clerk CX20.
3. Print the CalWIN screen from the TOA system and the KCAL screen from the TRAC system to facilitate the review by providing a month-by-month "baseline" to compare with what is found in the case record.
4. Review to determine months person was on CalWORKs in SF since 1/98 (see the example of completed 7027 CW at the end of this section).
 - a) Review LMOs for 0-mults.
 - b) Look at Application and Positive/Negative Action Codes/Dates to determine continuous periods of aid for case.
 - c) Note: Prorated initial month grants count like any other full month.
 - d) Look at Positive/Negative Action and PC Codes/Dates to determine continuous periods for person (if different).
 - e) On Worksheet for Time Limits (7027 CW),

Circle first month of aid for person (if person was on aid since before 1/98, use 1/98).

Fill in blanks to indicate first year of aid and years after, up to current year (1998, 1999, 2000, etc.).

For each aid break for person of at least 1 full month, circle last month of aid and first month restored.

Indicate reason for break: whole case discontinuance, person sanctioned, person ineligible, person left home, etc.

On the 60-Months TOA column, mark "N" for all months person had aid break of at least 1 month, but whole case still active. Leave blank if adult has left the home.

Ignore "penalties" when person remained "active" (with PC of 1 or 3) but an EX BIC was used; those still count.

- f) Determine whether any months during breaks in CalWORKS from SF should also be counted;

Review LMOs and 278Fs for S-mults (Homeless Assistance) and DV-FBUs (Diversion).

Review HA Worksheets, Diversion Services and Recoupment Agreements, and related NOAs.

Look for issuance of HA, RISP or Diversion during months when no regular aid issued but person was included in "AU".

- g) On 7027 CW,

Mark "Y" when HA was issued, including months covered by 16-day TS periods.

Mark "Y" when Diversion paid and client didn't reapply during Diversion Period.

If client reapplied during Diversion Period and chose recoupment, keep those months marked "N".

If client reapplied during Diversion Period and didn't choose recoupment, mark those months "Y".

- h) Review to determine whether any "zero grant" months "Z" can be eliminated from the count.

- i) On 7027 CW, mark with "Z" any months that qualify.

5. Review to determine any months exempt from CalWORKs 60-month time-clock.

- a) Review:

CW-61s verifying past exemptions,

PEC codes on LMOs indicating approved exemptions,

WtW forms where approved exempt months were recorded (7026 CW, 7026B CW, 7027 CW).

b) On 60-Month TOA column of Worksheet for Time Limits (7027 CW):

Mark "E" for any months where the WtW exemption is also applicable to CalWORKs.

See Section 58-3, Exemptions and Exceptions: Clock Stoppers and Time Extenders.

c) While reviewing the WtW forms, note any discrepancies regarding sanction periods and correct if necessary.

d) Review CW-7s and any correspondence reporting an exemption that was not acted on.

Use Time Limit Exemption Request form 2186 CW to process any newly discovered exemption requests.

e) On 60-Month TOA column of 7027 CW:

Mark "E" for any months where CalWORKs exemptions are approved from this process.

6. Then review to determine whether the person received aid in another county or state during breaks in CalWORKs from SF. These months must also be counted.

a) When reviewing LMOs for 0-mults above, note any incoming ICTs (Application/Positive code 300) after 1/98.

b) Look at CW-215, MEDS, and KSUM and KCAL screens in TRAC to determine other county and months of aid.

c) To request a case review by the other county or state, follow the process described in Section 58-10, Other County/State TOA Information.

d) On 60-Month TOA column of 7027 CW,

Change any months marked "N" to "Y" when you receive confirmation that CalWORKs was issued from another county.

7. To determine the results of the case review on the Worksheet for Time Limits (7027 CW):

Add all the months with "Y".

Subtract from 60.

The balance is the number of months of CalWORKs aid remaining.

On the example, 44 months have a "Y".

$$\begin{array}{r} 60 \\ - 44 \\ \hline 16 \end{array}$$

16 months of cash aid remain.

See the following instructions to complete the NOA for calculation details.

8. Changes to TOA/TRAC

If results of review differ from data on TOA/TRAC, for correction on time used in San Francisco follow procedures in Section 58-11 to send to the TOA Coordinator.

If there is evidence, or documentation the client provided, for a TOA correction in another county's time on aid, a request should be e-mailed to the other county following procedures in Section 58-10.

IV. Complete the NOA and Next Steps

1. Using the Worksheet for Time Limits (7027 CW), complete the first 60-Month Time Clock NOA (CDS 721; M40-107a). See 7027 CW form example.

- a) Enter today's date in blank for "AS OF _____, THE COUNTY...."
- b) Add up all "Ys" and enter total in blank for "...HAVE USED _____ MONTHS OF...." and "TOTAL NUMBER OF MONTHS USED: _____ MONTHS".
- c) "YOU RECEIVED CALWORKS: " Enter "from ____" and "through ____" dates on 7027 CW for continuous periods of regular aid in the State. Include TANF in other state, if known. Include months with "E", "N", and "Z" in this count of months of aid.
- d) Add up all "Es", "Ns" and "Zs", enter total in blank for "MONTHS THAT DID NOT COUNT - _____ MONTHS" and on page 2 "THE FOLLOWING _____ MONTHS DID NOT COUNT TOWARD.....".

- e) To know which of the three paragraphs to check, look at the DSS338X for Child Support Collection information. (For current report, see Page Center.)

- if there is a balance of Child Support collected, complete the Child Support review following procedures in Section 58-20 ff. Check "___ THE LIST ON THE NEXT PAGE INCLUDES MONTHS".

- If the Child Support information is not available, or you are not sure and WCHI shows a child support balance, check "___ YOU MAY ALSO HAVE MONTHS....."

- If there is no information indicating child support, check "___ NO CHILD SUPPORT WAS COLLECTED....".

- f) On Year/Month grid on page 2, enter years and then circle months that are marked with "Es", "Ns" and "Zs" on 7027 CW.

- g) Subtract 1b from 60 and enter in blank for "YOU MAY BE ELIGIBLE TO RECEIVE AID FOR ___ MORE MONTHS."

- h) Mail time-clock NOA within 30 days of the client completing his/her 54th month, or whenever the case review is completed. Enclose a CalWORKs 60 Month Informing Notice (CW 2184).

2. Next steps:

- a) Determine if Time-out Unit Case Conference is required.

- See Section 58-7, Case Conference.

- Schedule client in available slot with Unit Supervisor.

- b) Do a manual budget and:

- Calculate the anticipated change to the grant.

- OR

- Calculate the possible discontinuance from aid.

See Section 58-8, Interview.
 Schedule client for time-out interview.

After time-out interview, determine if time-out case conference is necessary.

CalWORKs Eligibility Handbook	Time on Aid - Notices 58-6
	Effective 7-01-07

58-6 Time on Aid - Notices

There are many forms, letters and notices related to time on aid. For easy reference, they have been summarized on the following table, 60-Month Time on Aid Forms and Notices at a Glance, (3/1/04). **(table is in printed handbook)**.

Sample forms and notices discussed anywhere within Section 58, Time on Aid, are found in Section 58-32 of the **printed** handbook.

Many forms and notices are available on line, either on the DHS Intranet CalWORKs Home Page/Program Books/Forms or on the DHS Intranet/Forms Central.

Note: Place file copies of all notices in Section #3 of case folders where all the WtW and TOA documents are filed.

CalWORKs Eligibility Handbook	Time on Aid - Case Conference 58-7
	Effective 07-01-07

58-7 Time on Aid - Case Conference

After the case review is completed and the NOA has been sent, the next steps are to determine the need for a case conference and conduct an interview with the client about his/her time on aid (See Section 58-8, Interview).

I. Unit Case Conferences Required for Unemployed Recipients

Because families are reaching their 60 months on aid and face income loss, it is very important to review the cases with no earned income to determine appropriate services. The case conference is required for these recipients as it provides the opportunity for unit members, the Vocational Assessor, Westside CalWORKs Counseling and other select providers to problem solve and make recommendations.

- A. Use the CalWORKs Case Conference Presentation Form (7051 CW) to prepare for a case conference. The form is designed to provide accurate and complete information during the case conference.
- B. Record the case conference recommendations on a CalWORKs Case Conference Presentation Form, Case Conference Recommendations (7051A CW).
- C. All cases timing out of the 60 month time limits with no earned income in the household should have a completed CalWORKs Case Conference Presentation Form and a Recommendations Form (7051 CW and 7051 A CW) in the file. The Employment Specialist shall complete both forms.

II. PROCEDURE: How to Use the CalWORKs Case Conference Presentation Forms

1. Fill out the Presentation Form (7051 CW) when scheduling the case conference.
2. Schedule clients with behavioral health issues when Westside staff will be in attendance.
3. Invite any provider(s) who have provided services and have information to contribute to the case conference.
4. Share a copy of the Presentation Form with the Vocational Assessor before the case conference.
5. Make copies of the Presentation Form for the case conference attendees.
6. As staff gathers for the scheduled case conference, distribute the form for the first scheduled client.
7. Give staff a few minutes to review the form.
8. Verbally present a very brief summary of the case to the attendees and highlight the issues for discussion.
9. The Vocational Assessor will then open the case conference up to discussion.

10. For a 54-60 month time out case, focus on the recommendations for appropriate referrals/plans to be carried out in the final 6 months of eligibility for CalWORKs / WtW.

11. Complete the Recommendations (7051A CW) as decisions are made in the case conference.

12. More than one recommendation may be made, as appropriate to the case and to allow for client decision making.

13. Distribution of the Recommendations (7051A CW) by the Employment Specialist:

- Original in the case file.
- Copy to the attendees who are listed at the top of the form by name (Worker, VA, Supervisor, Westside, other).
- Copy to the Section Manager.

14. Remember, in the interests of confidentiality, to collect the Presentation Forms from the other attendees and recycle.

15. Report progress in implementing the recommendations to the Supervisor.

16. Meet with the recipient and follow up with the case conference recommendations. See Section 58-8, Interview.

CalWORKs Eligibility Handbook	Time on Aid - Interview 58-8
	Effective 9-1-04

58-8 Time on Aid - Interview

After completing the detailed case review of months on aid and WtW participation history, and a case conference if the family has no earned income, it is time to begin the dialogue with the client.

I. Manual CalWORKs Budget

Before the interview, income eligibility and grant computations must be done manually to determine whether the cases with employment will remain income-eligible and, if so, how much the grants are likely to be once the clients are deleted from the Assistance Unit (AU).

Do a manual CalWORKs budget to determine the grant calculation for the family after the time limit expires.

A sample grant calculation is attached. For more eligibility information, see Section 58-9, Discontinuance at the End of 60 Months on Aid.

Note: When there is income, CalWORKs timed-out parents will be treated like "Sanctioned Persons" and not as "Excluded Persons" – that is, they will not be counted in "Family MAP" (also called "Big MAP") in the income eligibility and grant computations. Their income, however, will be counted minus the usual earned income disregards.

II. Prepare for the Interview

Send the NOA, the CW 2184, and an appointment letter concurrently. Invite the client to come to the office and talk about his or her individual case and what "timing out" means to the household. This may be the first of several conversations. Depending on the case situation and the client's response, engage in a detailed plan of action for the next six months.

This interview is similar to the WtW 18/24-month case review and noticing process. The possibility of past or current CalWORKs time-clock exemptions should be explored, but most importantly, what will happen after the 60th month must be discussed.

A. Time Out Interview

Discuss the following with all recipients timing out:

1. Share the results of your case review: how many months of aid remain?
2. What is the financial difference to the household when the adult portion of the grant is subtracted?
3. Will the household be discontinued due to excess income?
4. What about rent payments after discontinuance? Is the family living in public housing? Receiving the CalWORKs housing subsidy? How will they manage the rent?

The adult may be eligible for an additional CAAP benefit under the **Executive Director's Exception to Ineligibility for PAES and SSIP (EDEI)**.

These individuals must be:

- In an employment plan and making good progress, or otherwise actively pursuing employment services AND
 - Subject to loss of housing, i.e., when the discontinuance is effective, the household's rent exceeds 80% of the household's total monthly income. **(See CalWORKs PIM #04-03.)**
5. Review the exemption reasons that will stop the clock with the individual. Use the *CalWORKs 60 Month Informing Notice*, 2184CW. Discuss whether any of these reasons apply now or applied in the past and were not included in the review.

Clients who disclose/request current or past exemptions from the CalWORKs time-clock during the interview should be provided the *Time Limit Exemption Request* form, CW-2186A. Use the *Time Limit Exemption Determination* form, CW-2186B, to inform the client of approval or denial of the exemption. Send a revised time-clock NOA indicating the adjusted data.

B. Working Participants

Additional interview guidelines:

1. Discuss services to assist in adding income to the family.
2. Suggest job search services to get a better job or second job, or for another member of the household to get a job.
3. Discuss engagement in a WtW or retention training activity. For example, an individual in a minimum wage job might engage in a 3-month training in his/her field that can increase earnings by \$1.00 per hour. Or the part time VIP program may be an appropriate referral.
4. Explain what services the family is eligible for from CalWORKs and the community after they time out. See Section 58-13, CalWORKs Services for Timed Out Adults.
5. For those whose cases will be discontinued, explain the availability of retention services

6. In addition, discuss the issue of requesting discontinuance to save months with those clients with substantial income who are being provided CalWORKs time-clock NOAs.

C. Household with No Earned Income

Following Case Conference—additional interview topics:

1. Discuss the WtW history and options with the recipient:
2. Discuss the information from the case review in relation to any exemptions. Is the information correct? Is there reason to reinstate any exemption?
3. If the Learning Needs Screening (7001A CW) has not been done, complete it with the recipient. If the score is 12+, refer for evaluation.
4. If the case conference recommendation was referral to evaluation or Special Needs MDT, explain the process, obtain the required release of information, and initiate the appointment following the procedures in the WtW Handbook sections. For evaluation, see WtW Handbook 72-2.5. For Special Needs MDT, see WtW Handbook 72-2.6.
5. If the participant feels s/he should be exempt from the 60-month time clock, explore the reasons. Request a CW 61 Verification of Disability.
 - a) Note: The time-clock continues to tick until documentation and approval of an exemption is obtained. Therefore, proceed with urgency to obtain verification.
6. If the individual is now exempt from WtW but the 60 month time-clock is still ticking for this exemption reason, offer him/her the opportunity to come in and engage in activities – as a volunteer – during the last 6 months on aid. For example, a parent caring for a newborn might start training earlier than s/he had planned. (See Section 58-3.)
7. Offer job search services OR
8. Suggest engagement in a short-term education or training program compatible with the Employment Plan (WtW 2A) and if time remains in the 24-month time limit for WtW activity.

9. Refer to Community Jobs Program (CJP) for work experience and job search services—anyone up to the last 2 months of cash aid.
10. If the participant is engaged with CJP, confer with program staff to determine eligibility to continue in CJP for a few months past 60 months.
11. Provide transportation and ancillary services as needed to support the activity.
12. If the adult is participating in any of these activities upon discontinuance, review eligibility for EDEI.

CalWORKs Eligibility Handbook	Time on Aid - Discontinuance at the End of 60 Months on Aid 58-9
	Effective 9-1-04

58-9 Time on Aid - Discontinuance at the End of 60 Months on Aid

When discontinuing an adult(s) who has timed out of CalWORKs, the case may be converted to a Safety Net aid code or a case level discontinuance may be needed. Discontinuance requires action for Food Stamps, Medical, ongoing services and retention.

Definitions:

Safety Net cases are cases in which all the adults in the AU have timed out and the children remain eligible for CalWORKs.

Case Level Discontinuance refers to cases in which the adult(s) have timed out and the family is no longer eligible for CalWORKs. The discontinuance reason may be excess income or child turns 18.

I. Aid Codes For Calworks Safety Net Cases -

(NOTE: in the CalWIN environment, the system will change aid codes automatically.)

CalWORKs Eligibility Handbook

A. Aid Code 3A – Safety Net – All Other Families, CalWORKs Timed-Out, Child-Only Case

Use this aid code for cases previously categorized as All Other Families, in which all adults have been disco

Note: use aid codes 3A-9 and 3C-9 for Safety Net vendor payment cases.

B. Aid Code 3C – Safety Net – Two-Parent, CalWORKs Timed-Out, Child-Only Case

Use this aid code for cases previously categorized as two-parent cases in which both adults are discontinued from cash aid because they have timed out, regardless of citizenship status prior to timing out. (Aid codes 35, 3M, 3U).

II. Non-Safety Net Cases

A. Two-Parent Cases

If only one parent in a two-parent case has timed out, the case is not a Safety Net case, and the aid code doesn't change. Change the aid code to 3C when the second parent is also discontinued. See Section 58-12, Two-Parent Families and Time Outs.

B. All Other Families Cases

Cases with two aided adults in which one adult is disabled and exempt from the 60-month time limit do not become Safety Net cases when the other adult times out.

C. Zero-Parent Cases

Current zero-parent cases (cases that are child-only cases for reasons other than the adult(s) reaching the 60-month time limit), are not Safety Net cases.

Continue to use the zero-parent aid codes (33, 3R, 3G, and 3H). Examples of zero-parent cases include, but are not limited to, cases in which all of the parents in the home are convicted drug felons or receiving SSI, or cases in which the caretaker relative is non-needy and not aided.

III. Denials

1. Use TOA Notice M40-107j for individual or whole case denials.

IV. Whole Case Level Discontinuances

1. Enter Negative Action for the last day of the month:
2. Request TOA Notice 60th Month on Aid, Case Level Discontinuance, (M40-107g);
3. Prepare the case discontinued for excess income for transfer to Retention:
 - Set up Transitional Food Stamps and make sure post-aid Medical is set up.
 - Convert case to retention case
4. Send case to retention unit.
 - Note that cases in retention are eligible for supportive services for twelve months.
5. Some Safety Net cases will lose CalWORKs eligibility entirely because of excess income (whole case discontinuances – eligible for Retention).

V. Safety Net Conversions

1. Change aid codes to 3A-0, 3C-0
(3A-9 and 3C-9 for cases with vendor payments).
2. Only the children in the case should be left on aid.
4. Food Stamps:
 - Set up Transitional Food Stamps
5. Send outreach letter Safety Net Time Out (7254 CW) and the 60th Month on Aid – Discontinue at Person Level 60T (M40-107e).

Note the Safety Net letter (7254CW) is only available on the DHS Intranet/CalWORKs Home Page/Program Books/CWandWtWforms. All languages are posted. See Section 58-32 for a copy in English (printed handbook).

6. Make sure transitional Medi-Cal is active.
7. Participants who are working must be enrolled in GIS to receive the 12 months of transportation and other supportive services.

8. If participants are not working, try to engage them in an activity.

9. Send the Safety Net outreach letter (7254CW) each month for two more months. You may also call participants to discuss their options, but if there is no response from the participants after three months, send the case to the exempt units.

VI. Q and A (Section 51-96)

For more detailed problem solving for Safety Net, two-parent families, and Time on Aid, etc., see the SDSS ACIN #01-40-03, Q and A, included in Handbook Section 58-15. Or find it on line at: http://www.dss.cahwnet.gov/getinfo/acin03/pdf/I-40_03.pdf

CalWORKs Eligibility Handbook	Time on Aid - Other County and State TOA Information 58-10
	Effective 9-1-04

58-10 Time on Aid - Other County and State TOA Information

During the case review, information on the ICT form (CW-215), MEDs, KSUM (option 4) and PSUM screens in TRAC will show months of aid in other counties.

Whenever information is entered on PSUM, an inquiry to the other county/state must be made requesting a TOA case review of their closed case.

I. Obtain Information From Other County/State

A. Other County In California

Verify time on aid with the other county. Use email or call the contact person on the *WDTIP/TRAC County Contact List*. The updated list is found on the CalWORKs Intranet Home Page/Time On Aid File.

B. Other State

Verify time on aid with the state. Use email, telephone or the form *Verification of Aid for the TANF Program – To State* (CW 2188).

The State Time On Aid Contact list is available on the CalWORKs Intranet Home Page/Time On Aid File.

C. Email (or telephone or CW 2188) the TOA Contact with the following information:

- Case name,
- Case number,
- Social Security number,
- Birth Date,
- Dates of aid to be verified (if known),
- Ask about child support and TOA (other counties in California only)

D. Response from County and State

1. Continue with Case Review

Once you have made the contact with the other county/state, use the current information on the TRAC/PSUM screen to complete the review.

When the other county/state responds and reports corrections to time on aid, revisit the review and make changes in the months to be unticked, as appropriate. (This corrected information will be input on PSUM by the other county.)

2. No Response in 30 Days

If there is no reply to your inquiry within 30 days, email the TOA Coordinator with the above information and who you attempted to contact in the other county/state.

The TOA Coordinator will make a follow up inquiry and report back upon receipt of the information.

CalWORKs Eligibility Handbook	Time on Aid - TOA Corrections 58-11
	Effective 9-1-04

58-11 Time on Aid - TOA Corrections

I. Send Time on Aid Corrections to the TOA Coordinator

Follow the procedures below to request TOA and TRAC corrections by the TOA Coordinator whenever discrepancies are found between the CalWORKs 60-month time-clock information in a case folder and the TOA or TRAC screens.

A. Use Correction for CalWORKs 60-Month TOA (7063 CW),

- To communicate with the TOA Coordinator. A copy of the form is found in Section 58-32 or on DHS Intranet.

1. Make a copy of the following, as appropriate:

- PTOA Screen,
- KCAL Screen,
- *Time Limits Worksheet* (7027 CW) form completed,
- *TOA Tracking Child Support and Overpayment Recoupment Worksheet* (7060 CW) form completed with required supervisor's approval signature.

2. Attach the copies to a completed Correction for *CalWORKs 60-Month TOA* (7063 CW) form. Follow the instructions on the form to tell the TOA Coordinator:

- What were the PC and Aid Type for time you want unticked,
- How many months are to be corrected and for what reason(s), i.e., DV, CalLearn, etc.

3. Send the Correction for CalWORKs 60-Month TOA (7063 CW) and attachments to the TOA Coordinator in interoffice mail. File a copy in Section 3 of the case folder. Do not send the case file unless requested.

4. TOA and TRAC corrections may not "take" for the zero grant information, due to a computer bug.

To memorialize the zero grant information for the case review, specify the month and year that should be corrected on the 7063 CW.

5. The corrections will not appear immediately on TOA and TRAC. The process to load data into DTOA takes 3-5 days. The TOA Coordinator is responsible to verify that the information is successfully loaded in TRAC.

If you wish to confirm the action has been taken, check in TRAC after 5 days. If there are any questions at that time, call the TOA Coordinator.

II. TOA Coordinator

The TOA Coordinator is a designated CalWORKs Employment Specialist with access to the TOA and TRAC systems and training in how to make time on aid changes.

The TOA Coordinator performs the following tasks::

1. For CalWORKs Intake cases, completes TOA reviews, corrects and updates all cases with prior cash aid. May review the case before transfer to Carrying.
2. Makes corrections to the TOA and TRAC system as needed for all CalWORKs recipients.
3. Assists with inter county and inter state inquiries about TOA, child support and overpayment reviews for Intake, Carrying and other county or state inquiries.
4. Responds to requests from other counties or states for TOA information on closed CalWORKs cases.

CalWORKs Eligibility Handbook	Time on Aid - Two-Parent Families, Time Outs, and Welfare-to-Work 58-12
	Effective 9-1-04

58-12 Time on Aid - Two-Parent Families, Time Outs, and Welfare-to-Work

I. Non-Safety Net Cases

If only one parent in a two-parent family has timed out, the case is not a Safety Net case as one parent continues to be eligible for aid.

II. Two Parent Families when One Parent Times Out

What are the WtW requirements for two parent families when only one parent times out of the 60-month time limits?

A. One Parent Exempt/Disability

In a two-parent family, Parent #1 times out from the case after 60 months on aid. Parent #2 has been exempt for disability reasons (a clock stopper) for several months and is currently exempt. Parent #2 is not timing out. In this scenario, Parent #2 is exempt from WtW requirements and continues to receive aid. The aid code for the case is not changed.

B. One Parent Is Not Timing Out

In a 2-parent family, Parent #1 times out from the case after 60 months on aid. Parent #2 has not used all of her 60 months on aid because of some periods of exemption for "clock-stopping reasons", (i.e., disability or caring for ill/incapacitated person in the home). Therefore, Parent #2 is not timing out. She has never participated in WtW because Parent #1 always met the 35 hours participation requirement.

In this scenario, Parent #2 must now participate in WtW and meet the 35-hour per week 2-parent family participation standard. Parent #1 is no longer eligible for aid, so the full time employment of 35 hours a week no longer meets the family's WtW requirements. The aid code does NOT change.

How To Engage Parent # 2 In WTW

Inform Parent #2 that in order to remain on aid s/he must now participate in WtW Activity. Parent #1 is no longer on aid, so cannot provide "deferral" for Parent #2 by her/his work participation.

Parent #2 may need to learn all about the WtW Program. Start by reviewing Parent #2's case file. Did s/he attend CalWORKs Orientation? Take CASAS? Have a Learning Needs Screen and a TVA? Inform Parent #2 how many months s/he has remaining in the 60-month time clock. Help the individual to make the best use of the time remaining to benefit from WtW opportunities.

C. Time Exception/Time Extender and One-Parent Time Out

When Parent #1 times out and Parent #2 is on a sanction, the timed out parent #1 may be "extended" on aid if s/he meets one of the exception/extender criteria.

The sanctioned parent already meets the “not on aid” extender, so if the timed-out parent also meets an extender reason, both parents meet extender criteria.

CalWORKs Eligibility Handbook	Time on Aid - CalWORKs Services for Timed-Out Adults 58-13
	Effective 9-1-04

58-13 Time on Aid - CalWORKs Services for Timed-Out Adults

NOTE: Some procedures described in this section refer to GIS, which was part of our previous computer system. These operations are now performed in the CalWIN Employment Services Subsystem.

Clients who time out of CalWORKs after 60 months, and are discontinued for excess income, are eligible for Retention services and should be transferred to Unit 8C3.

Participation in post aid activities is voluntary for Safety Net adults timing out of CalWORKs after 60 months. Staff is expected to support engagement in activities as appropriate to the individual and her/his WtW history. It is important to help the client explore community resources to address her/his goals. Clients may be eligible for CalWORKs WtW services but there are program requirements and fiscal limitations.

If engaged in WtW activity at the time of discontinuance, review eligibility for **Executive Director’s Exception to Ineligibility for PAES (EDEI)**. (See Section 58-8).

I. Timed Out and Case Management

The Employment Specialist is responsible for case management to safety net cases. Following are guidelines about Safety Net adult(s).

A. The Safety Net adult is eligible for the following until CalWORKs cash aid is discontinued for the whole case:

Transportation to work,

Ancillary services if work-related,

CalWORKs services upon request,

CalWORKs Student Parent Scholar Program (if attending an accredited college or university and otherwise eligible).

B. The Safety Net adult:

Must have attendance and progress monitored if:

Engaged in CalWORKs or WtW funded services, and/or

Receiving supportive services.

May be eligible for services well beyond discontinuance from cash aid and/or the post-aid retention period, when accessing services available to the public or to low-income persons.

Who is later discontinued and a family member has earnings, must be transferred to the Retention Unit..

C. Two-Parent Note:

In a two-parent family, one parent may time out and the other continues to receive aid. The parent who times out is a Safety Net adult and eligible for services.

II. Services in the Community

The Safety Net adult may be eligible for training or job search services in the community that do not require referral or support by CalWORKs. Explore these services first.

To access information refer the client to one or more of the following resources:

- BRAIN data base available at all CalWORKs sites, check with the CalWORKs Social Worker or VA,
- Help Link Resource Directory of Human Services available in Employment Services libraries at EIC, 170-2nd Floor (E0X0), and Career Centers.
- City College website: ccsf.edu or CCSF Financial Aid Office,
 - Phone 239-3575 or 76 or 77 or 79.
- Consult with VA or WDD Special Programs Coordinator (E101).
- Family Resource Centers are open to public.

Note: Some community funded training programs include supportive services.

III. Job Search Services

The Safety Net adult may request job search services.

Refer to the One Stop Centers/Career Link and Cal JOBS. The services are open to the public.

Services include:

- access to general and First Source job openings
- vocational assessment and career counseling
- job readiness workshops and structured job club activities
- information and referral services
- certification for eligibility for WIA/PIC funded training programs

One Stop Career Link Centers are located at:

- 3120 Mission Street
- 801 Turk Street
- 1800 Oakdale

IV. CalWORKs Services

The Safety Net adult may be eligible for services from the following CalWORKs providers until CalWORKs cash aid is discontinued for the whole case:

- Behavioral Health from Westside CalWORKs Counseling.
- Career Planning and Assessment, client unemployed or employed, by the Vocational Assessor.
- Child Care/Stage 2, if adult off aid, for work, training or job search for 24 months.

- Domestic Violence from DHS contracted Advocate, if eligible for Waiver. DV may also be an Extender after the 60 months have ended. Monitor DV Waiver.

V. Reappraisal/Assessment Required for Training

When an adult in a safety net case requests CalWORKs supportive services for training and/or help with training costs, a reappraisal/assessment by the ES and VA is required before any services may be approved.

A. CalWORKs can approve supportive services and/or referral for training when the reappraisal/assessment results show:

The client's participation and progress in WtW activity during 60 months on aid was satisfactory.

Training is appropriate (for career advancement or if the labor market justifies training).

B. CalWORKs cannot provide supportive services for the activity and cannot make a referral for training when the reappraisal/assessment results show:

The client did not participate and/or make satisfactory progress in WtW activity during the 60 months on aid.

The client is employable and additional training will not substantially increase earnings potential.

VI. CalWORKs and Training Support

When the reappraisal/assessment for the Safety Net adult supports training as an activity, explore and eliminate the availability of community resources first. After this exploration, a referral to WtW funded training or an Individual Referral (IR) for training expenses and/or supportive services for training may be appropriate.

A. Referral Process

When referral procedures require a Referral form (7006 CW) and/or an Employment Plan (WtW 2/2A), use the CalWORKs Retention/Career Advancement Services Plan (7039 CW) to make the referral to the provider. The Safety Net adult is not on aid. For post aid clients, the 7039CW form takes the place of the 7006 CW and the WtW 2. Otherwise follow procedures for each provider as appropriate.

The client will be required to maintain satisfactory progress in order to receive ongoing supportive services.

To refer for training and/or supportive services, proceed as follows:

B. City College (CCSF):

If a Safety Net adult requests ancillary expenses for classes at CCSF, an Education Plan is required for all classes, including ESL; refer to:

CalWORKs Office
50 Phelan – B-609,
Phone 452-5705

Make appropriate referral entry in GIS to activate CCMS and note “this client is eligible for an Education Plan and Book Vouchers from CalWORKs”. Use CCMS to monitor progress.

C. Individual Referral (IR):

The Safety Net adult may be required to successfully complete one month at ETSC or up to 3 months of CJP before IR funded training is approved, if the outcome of the reappraisal/assessment does not strongly justify training.

Additionally, the individual must also participate in community service when CalWORKs approves an IR for a Safety Net adult’s training.

CJP will apply the Simplified Food Stamp Program regulations to the calculation of participation requirements and will individually determine the Community Service Plan so as not to conflict with the training schedule.

D. WtW Funded CBO:

If a CBO has WtW funding, the provider will need verification of the Safety Net adult’s link to CalWORKs – use the above mentioned 7039CW.

E. VIP:

The Safety Net adult who is not employed and is low in English proficiency is eligible for referral to VIP and accompanying supportive services until the CalWORKs cash aid is discontinued for the whole case.

F. CJP:

If referred and accepted by CJP prior to the end of 60 months, a Safety Net adult may continue in CJP up to 9 months total participation.

The participant's progress and attendance in all required CJP activities are used to determine eligibility for the post 60-month extension.

VII. GIS and Safety Net Adult

Use the GIS Status Codes described below for Safety Net adults to reflect whether or not any services are being provided and what the services are. Change the GIS Status when the "safety net" adult has been discontinued from cash aid and the aid code has been changed (as appropriate).

A. To open a training or job search activity and/or to access CCMS at City College,

1. Change GIS Status to 1.
2. Enter the activity/component and provider in GIS.
3. Now change the GIS Status to 3, so you can issue supportive services.
4. This work around allows you to enter an activity for a discontinued adult and then change the status to 3, so the adult is reported as "deferred". Status 3 has been redefined in San Francisco to mean "Safety Net Adult getting services".

B. To provide supportive services, i.e., transportation, ancillary,

Change the GIS Status to 3.

This will allow you to make entries on the SSA! Screens.

C. No services of any kind to the Safety Net Adult

Change the GIS Status to 5—Deregistered from GIS.

D. Changes in Status

As long as the child(ren) are receiving cash aid, the parent may request services as outlined in this handbook section. Change the GIS Status when the adult requests services or ends participation.

CalWORKs Eligibility Handbook	Time on Aid - 60 Month Time Limit and Safety Net Cases Q & A 58-15
	Effective 9-1-04

58-15 Time on Aid - 60 Month Time Limit and Safety Net Cases Q & A

I. More detail about 60 Month Time Limit

The *All County Information Notice (ACIN) 01-40-03* provides guidance regarding CalWORKs 60-month time limit, Safety Net and other issues. The Q & A is designed to help staff clarify procedures that presented problems in the initial implementation of policy. The Q & A is reproduced in its entirety below.

Review the questions and answers about:

- Safety net aid codes,
- Cal Learn bonuses and sanctions,
- Penalties,
- Extenders,
- Adding an adult back into AU,
- Child support and homeless assistance.

Safety Net

A. In an Assistance Unit (AU) with Mom and one child, Mom reaches her CalWORKs 60-month time limit and the county changes the aid code to 3A to designate Safety Net status. Six months later, Mom becomes eligible for Supplemental Security Income (SSI). Does the case remain a Safety Net 3A case or should it be coded as a 3R case to reflect eligibility for a higher Exempt Maximum Aid Payment (MAP) level? If the case becomes an Exempt AU, when should the MAP level be increased?

Although the AU will qualify for a higher MAP level due to its new Exempt AU status (Manual of Policies and Procedures (EAS 89-110.22), the case remains coded as a Safety Net case in aid code 3A.

Since Mom's SSI status would also qualify the AU for the higher Exempt MAP, counties will need to establish a method to generate the higher MAP amount. The county should change the MAP level for the AU two months after the AU's status changed in accordance with EAS 89-110.282. In the event that Mom's condition changes and she is no longer eligible for SSI, she cannot receive CalWORKs cash aid because she is timed-out.

B. Same scenario as question A except the timed-out adult is a needy caretaker relative. Would the AU be eligible for Exempt MAP or Nonexempt MAP, and would it be applied retrospectively?

When a needy caretaker relative reaches the CalWORKs 60-month time limit and is removed from the AU, the AU qualifies for Exempt AU MAP status (EAS Section 89-110.23). The new Exempt MAP status would be retrospectively budgeted to increase the MAP two months later.

Example: The AU includes a needy grandmother and her two grandchildren. The AU receives a grant of \$679. The grandmother reaches her 60-month time limit in April and she is removed from the AU effective April 30. Benefits should be decreased to \$548 effective May 1 to reflect the smaller AU size (two). When the grandmother is discontinued she becomes an unaided non-parent caretaker relative which will qualify the AU for a higher Exempt MAP. Since May is the month in which the grandmother's status changes to unaided non-parent caretaker relative, the AU would be entitled to the higher Exempt MAP level beginning July 1. The AU's grant will be increased to \$613 effective July 1.

C. In an AU with Mom, Dad, and one child, Mom and Dad reach their 60-month time limit, and the case is changed to 3C. Dad moves out of the home changing the case from Two-Parent to All-Other. Should the aid code be changed from 3C to 3A?

Yes. Since the case is no longer a two-parent Safety Net case, it should be coded as 3A, Safety Net – All Other Families, CalWORKs Timed-Out.

D. If the case is a 3A Safety Net (All Other Families, CalWORKs Timed-Out) case with a Mom (who is CalWORKs timed-out) and her two children in the AU, and Dad moves in changing the deprivation to Unemployed Parent, how should the case be coded?

If Dad has also reached his Temporary Assistance to Needy Families (TANF) and CalWORKs 60-month time limits, the case would be re-coded as 3C to reflect its status as a Safety Net, Two-Parent, CalWORKs Timed-Out case.

If Dad had not reached the CalWORKs time limit and is still entitled to receive CalWORKs, the case should be coded as a two-parent case with aid code 35.

E. How should Cal-Learn bonuses and sanctions be treated when vouchers are used to pay Safety Net families?

Cal-Learn bonuses for making satisfactory academic progress and Cal-Learn sanctions for failure to demonstrate adequate academic progress or for nonsubmittal of a report card should both be reflected in the voucher payment made to Safety Net families. Since the graduation bonus is paid to the Cal-Learn teen and not to the AU as part of the grant, it will continue to go directly to the teen as a separate payment and not be included in the voucher.

F. Which penalties are applied to Safety Net cases?

Counties cannot apply penalties to Safety Net cases that result in a reduction of cash aid due to an adult's failure to comply with immunization and school attendance requirements for a child under 16 years old, sanctions, or Intentional Program Violation (IPV) disqualification. These penalties cannot apply because they affect only the adult's portion of the grant, which no longer exists. These types of penalties will be applied if aid is reinstated to the adult as a result of overpayment or child support repayment or if the individual subsequently meets extender criteria.

The 25 percent grant reduction for failure to cooperate with child support requirements, and school penalties applied to children over 16 years of age would continue to be applied to the AU in Safety Net cases because the needs of the adult are not affected.

60-Month Time Limit

G. Mom is TANF timed-out, but is not CalWORKs timed-out. The case is claimed to aid code 32 (AU with TANF timed-out adult who remains CalWORKs eligible). Prior to reaching the CalWORKs 60-month time limit, Mom then becomes SSI eligible. Which aid code is the case claimed to?

The county should use aid code 32 because Mom is TANF timed-out, but has not reached her CalWORKs time limit. Her case will remain in aid code 32 and her time clock will hold at the number of months she received aid up to the date that she became eligible for SSI and as a result, ineligible for CalWORKs. In the event that her condition changes and she is no longer eligible for SSI, she can re-apply for CalWORKs to receive the remaining number of months of CalWORKs aid.

H. Mom reaches the CalWORKs 60-month time limit. Two months later she becomes disabled and the doctor verifies that she cannot participate in Welfare to Work or employment activities. She would be meeting a time limit “exemption” criterion had she still been active in the AU. Can the mother still qualify for an exemption despite the fact that she has exhausted her 60 months of aid?

No. Exemptions (clock stoppers) only apply to individuals who have not reached their CalWORKs 60-month time limit. Although the mother can no longer claim an exemption, she may qualify for an extender for disabled individuals. In order to qualify for the extender based on disability, she must be receiving benefits from State Disability Insurance (SDI), Temporary Disability Insurance, In-Home Support Services, or State Supplementary Program and the disability impairs her ability to work or participate in welfare-to-work activities. Alternatively, she may qualify for the extender for individuals who are unable to maintain employment or participate in welfare-to-work activities. (See EAS Section 42-302.11 for extenders.)

I. When should an individual be added back into the AU based upon an extender criterion?

In order to add an individual back into the AU based upon an extender criterion, the recipient must first make a verbal or written request for the extender as required in MPP Section 42-302.3. Individuals are added back into the AU based on Beginning Date of Aid rules (MPP Sections 44-317 – 44-318). The following examples demonstrate how Beginning Date of Aid rules apply to extender situations:

Example A: An aided Mom with two children reaches her CalWORKs 60-month time limit and is removed from the AU in March 2003. On June 5, 2003, she informs the county that she is disabled and the county provides her with the request form (CW 2186A) which she submits in June. After several months have passed, she provides the county the disability documentation that indicates she has been disabled as of August 2003. The documentation provided by the recipient states that her disability impairs her ability to work and that she is currently receiving benefits from SDI. When should she be added back into the AU?

In this situation, Mom, who is a mandatory included person, would be added back into the AU on the date she requests to be added into the AU or the date all eligibility requirements are met, whichever is later. Although she requested to be added into the AU in June, the date that all eligibility criteria were met occurred later. Therefore, the county would add her back into the AU effective August 2003, when the onset of the disability was established.

Example B: An aided nonparent caretaker relative with two aided grandchildren reaches the time limit and is removed from the AU in January 2003. On April 15, 2003, she

becomes age 60 and informs the worker that she would like to receive aid. When should she be added back in the AU?

Nonparent caretaker relatives are optional members of the AU. Therefore, she would be added back into the AU on the date all eligibility requirements are met. The county would add her back into the AU effective April 15, 2003.

J. When a time clock is unticked (e.g., via child support reimbursement or overpayment recoupment) when do you add the adult back into the AU?

The county will add the adult back into the AU when the county is notified of the recoupment and it is determined that the adult is eligible for additional month(s) of aid. Since the child support recoupment occurred after the adult was discontinued from aid due to reaching the time limit, the county cannot retroactively add the adult back into the AU and provide a retroactive payment to the family. The adult is added into the AU when the county is notified of the child support recoupment and it is determined that the adult is eligible for additional months of aid due to the exemption. The adult shall be mandatory included as of the first of the month in which additional months become available. See example below.

Example: The recipient reaches her time limit in April 2003. The child support recoupment accumulates and the county is able to reimburse the aid received for three months, March 1998 – May 1998. The county provides a NOA that states she reached her time limit in April 2003, the months of March, April and May of 1998 were exempt due to child support recoupment, and the remaining number of months on aid is three. As a mandatory included person, aid is restored to the timed-out individual effective the first of the month following the date the individual was notified of the additional months of aid.

K. The AU consists of Mom, Dad and their two children. Dad leaves the home on June 10. Neither Mom or Dad report that he is no longer living in the home. In December, the CWD finds out through the Special Investigation Unit that Dad has moved out of the home. Mom is charged with a partial overpayment for July-December. Do the months of aid from July through December count toward Dad's 60-month time clock tick?

Yes. Both parents have the responsibility of informing the county of any change in circumstances that may affect their eligibility for aid. Since neither parent informed the county of the change in their household, Dad was considered to have been aided. Therefore, the six months of aid would count toward each parent's 60-month time clocks. The aid provided from July through December is an overpayment and the county should appropriately recover the overpayment. However, if the overpayment is fully reimbursed, the months of aid would be unticked on Dad's 60-month time clock, as he was totally ineligible for aid. The months would continue to count toward Mom's 60-

month time clock because she was eligible for aid and partial months of aid do count toward the 60-month time limit as provided in MPP Section 42-302.2.

L. Mom has reached her 60-month time limit on January 1, 2003. She meets extender criteria because she has caretaking responsibility for her disabled child. Dad moves back into the home on February 15. He does not have any CalWORKs time on aid remaining, and does not meet an extender criterion. When would Mom be removed from the AU?

Since both adults in a two-parent household must meet extender criteria in order to continue to be aided, Mom must be removed from the AU at the end of the month after appropriate 10-day notice is given, in this case February 28. The aid code should be changed to Safety Net aid code 3C effective March 1.

In the above example, if Dad had moved in on February 25th, it would not allow enough time to send a 10-day notice. Therefore, Mom would be removed from the AU effective March 31st, and her portion of the grant would be charged as an overpayment for the month of March.

M. Are Homeless Assistance benefits included in the total grant amount when applying child support reimbursement to repay months of aid?

Yes. Homeless Assistance benefits are considered aid paid to the recipient. Therefore, child support recoupment shall be used to reimburse all aid received by the family in the month in order for the exemption to apply.

N. Homeless Assistance benefits, both temporary and permanent, are limited to once-in-a-lifetime (with exceptions). If Homeless Assistance benefits are repaid by child support recoupment, is the AU eligible to receive another Homeless Assistance benefit?

No. Although, the Homeless Assistance payment is repaid by child support recoupment, the recipient did receive the benefit and used the benefit for its intended purpose (i.e. to secure housing.) Therefore, the AU is ineligible to receive another Homeless Assistance benefit, unless specified in the exceptions provided in regulations, MPP Section 44-211.54. When the cash aid, including the Homeless Assistance payment is repaid, the recipient shall have the month exempt from the CalWORKs 60-month time limit.

O. A CalWORKs timed-out adult applies and receives permanent Homeless Assistance for the children in the AU, (the amount of Homeless Assistance benefit does not include the timed-out adult.) Is the permanent Homeless Assistance benefit now attached to the children and will it therefore be their once-in-a-lifetime Homeless Assistance?

No. The Homeless Assistance benefit is provided to the adult recipient on behalf of the children in the AU. As long as that adult recipient continues to reside with the children, the AU cannot receive an additional Homeless Assistance benefit. If another caretaker who has not previously received homeless assistance on behalf of or as part of another AU takes responsibility of the children, then the AU is eligible to receive homeless assistance.

A Dad and his two children begin receiving CalWORKs in May 1998. The case is discontinued for lack of cooperation in July 1998. Mom now has custody of the two children in the case, applies and is approved for cash aid in September 1998. The case is subsequently discontinued effective September 30, 2000. Child support was received from Dad from April 2000 – September 2000.

P. How is the child support applied to the aid paid and whose time clock would be “unticked”, Mom or Dad’s?

The policy for application of child support recoupment requires that the child support recoupment collected from January 1998 forward shall be cumulatively applied to repay aid payments beginning with the earliest unreimbursed month(s) of aid, on or after January 1998 for the case. The child support recoupment must follow the aided children in the AU as intended. Therefore, any child support that fully reimburses month(s) of aid, will exempt months for all aided adults in the AU beginning with the first month of aid for the case - 5/98.

In the scenario described above, the child support is applied to the first month of aid for the case which included the father. Therefore his 60-month time clock would be unticked for May and June 1998. The recoupment for the children would then continue to be applied to the case in September 1998 and onward so the mother’s time clock would be unticked as each month of aid is reimbursed. (See ACL 02-74 for more information about child support recoupment.)

Q. Will CWDs be issuing informing notices to clients about the extenders?

Yes. CalWORKs form CW 2184 must be given to clients upon application, redetermination, and with all time limit NOAs, to inform clients about the 60-month time limit and what qualifies as extenders and clock stoppers. In addition, CWDs were provided NOA message 40-107f with ACIN I-90-02 to inform adult recipients who have reached their CalWORKs 60-month time limit but will continue to be aided because they meet extender criteria.

R. Are cases on extenders federal or state-only funded?

Extender cases are cases that continue to be aided beyond the CalWORKs 60-month time limit. As these cases remain eligible for CalWORKs, they are currently claimed to aid codes that are state-only funded because the original TANF 60-month time limit has expired.

S. Is a domestic abuse waiver considered an exemption (clock stopper) or extender to the 60-month time limit?

Domestic abuse waivers can be applied in both instances, during the 60-months of aid as a clock stopper and after the 60-month time limit, as an extender. State regulations MPP Sections 42-302.12 and 42-302.21(c) provide for the exception and exemption for individuals who are victims of domestic abuse and the county determines that good cause exists for waiving the 60-month time

CalWORKs Eligibility Handbook	Time on Aid - Child Support & Overpayments - Introduction 58-20
	Effective 1-1-17

58-20 Time on Aid - Child Support and Overpayments - Introduction

NOTE: The Maximum Family Grant (MFG) rule has been repealed and will end January 1, 2017. Cases with MFG child(ren) are required to cooperate with Child Support Services (CSS) starting 1/1/17, except for aid codes K1 and 3F.

I. Child Support

While doing the Time On Aid Case Review, the accumulated child support collected by the Local Child Support Agency (LCSA) must be tracked and used to reduce the number of months of aid paid. Any month(s) in which cash aid is fully reimbursed as a result of child support collected (whether collected in that month or any subsequent month) shall not be counted for the CalWORKs 60-month time limit.

II. Overpayment

Likewise, the overpayment history must be reviewed. When an overpayment for a totally ineligible month has been collected, the month shall not be counted for the CalWORKs 60-month time limits, whether or not there is child support. When there are both child support and overpayment history, a computation to give the participant credit for a partial overpayment that has been collected is applied, thereby extending the child support credit.

The child support and overpayment "unticking" only apply to the CalWORKs clock, not the TANF clock.

CalWORKs Eligibility Handbook	Time on Aid - Child Support & Overpayments: Process 58-23
	Effective 1-1-17

58-23 Time on Aid - Child Support and Overpayments: Process

NOTE: The Maximum Family Grant (MFG) rule has been repealed and will end January 1, 2017. Cases with MFG child(ren) are required to cooperate with Child Support Services (CSS) starting 1/1/17, except for aid codes K1 and 3F.

I. Process Overview

During the Time on Aid case review, identify the cases with child support and/or overpayments.

1. Review the cases with child support following the instructions in this section.
2. Review all overpayments that occurred on or after 1/1998.
3. All volumes of the CalWORKs case will be needed for necessary validation whenever there is an overpayment record.

If the file is in SIU, and the case is at month 54 or later, request the file through the Principal Clerk CX20. Email the client name and case #, and specify the case file is with SIU; state you need the case file for 60 Month Time on Aid.

4. Missing volumes

If after diligent effort, volumes with documentation of the overpayment are not located:

- Complete the computations for all of the overpayments in the case that are verifiable.
- Complete the child support unticking, for the verified overpayment information, as appropriate.

- Request a copy of the Overpayment Packet from the Overpayment Unit through the Principal Clerk CX20. Email the client name, case #, date and amount.
- Confer with the Supervisor about how to proceed; if unable to resolve an overpayment(s), confer with the Section Manager.

5. Reports to assist with the child support and overpayment process

Three reports provide valuable information to complete the Child Support TOA review.

- **Child Support Collected by CSS Since 9/1/98, DSS338X** records the total child support collected (arrearages and current) for any months since September 1998. Use the TOTAL COLLECTION figure.
- **Monthly Grant Amounts 2/1998 Thru 12/2002, DSS338Y,** lists the CalWORKs grant amounts paid for each month from January 1998 to the present for the cases listed on the DSS338X.

File the reports in Section 4 of the case folder. Since tracking is an ongoing process, you will receive periodic reports to give updated information.

Note: the "BIC" Report (DSS338Z) does not include the cases with overpayments but no child support. During your case review, identify these cases and document any full month overpayments accrued since 1/1998.

6. Forms

Use the Worksheet for Time Limits (7027 CW) you have completed for the case review as a reference to track exemption or penalty months while doing the computations. .

Use the TOA Tracking Child Support and Overpayment Recoupment Worksheet, (7060CW) to complete the overpayment and child support computations and track child support on an ongoing basis. This form is available in Excel on the DHS Intranet. Most of the calculation is automatic. A Cheat Sheet, Completing The TOA Worksheet (7060CW) is found in Section 58-29. Use this for manual computations and as a guide to the excel version of 7060 CW.

7. Supervisor approval

The Supervisor must review the TOA Tracking Child Support and Overpayment Recoupment Worksheet (7060CW) for accuracy. The Supervisor’s approval signature is required in the “Status as of Review Date” part of the form.

8. File documents

Maintain the form(s) and supporting documents in the case file in Section four (4). Add each subsequent review to the same form using additional pages.

9. Update DTOA Screens

Follow procedures in Section 5-11 Time on Aid Corrections to send corrections to the TOA Coordinator.

10. Ongoing review of Child Support and TOA for cash aid cases:

- Monthly upon receipt of the 338X report

Or

- After the initial review is complete, review for child support reimbursement at the same time as the required TOA Review at reinvestigation.

11. At Intake the TOA Coordinator will do the TOA review, including child support and overpayment information, if available. See Section 58-4, Intake.

CalWORKs Eligibility Handbook	Time on Aid - Tracking Months Exempted for C/S Recoupment 58-24
	Effective 1-1-17

58-24 Time on Aid - Tracking Months Exempted for C/S Recoupment

NOTE: Maximum Family Grant (MFG) will end January 1, 2017 and cases with MFG children are required to cooperate with Child Support Services (CSS) starting 1/1/17, except for aid codes K1 and 3F.

All child support collected from January 1998 forward is cumulatively applied to repay CalWORKs aid payments, including collections for a current month, arrearages, lump sum payments and disregards issued.

1. The cumulative amount of child support (i.e., TOTAL COLLECTION figure on Report DSS 338[X]) is applied to each month of aid, starting with the earliest un-reimbursed month(s) of aid, on or after January 1998, and moving forward as each month's grant is reimbursed.
2. Example: If the participant came on aid in January 1998, begin reimbursing that month first, then February 1998, March and so on. Do not move around or skip months during the reimbursement process.
3. Round off child support amounts to the nearest dollar (50 cents and above rounded up, 49 cents and below rounded down).
4. The child support recoupment amount is applied to ALL month(s) of aid **whether or not the month had been previously exempt** for another reason, including any month(s) in which the individual was **exempt, penalized, or sanctioned—including when there were no adults aided** (zero parent case).
5. Each month of aid that is **fully reimbursed** by child support is exempt and therefore NOT counted toward the CalWORKs 60-month time limits of the aided adults in the AU, including parents, stepparents and/or caretaker relatives residing in the home of the child(ren).
6. The child support collection amount is reviewed to determine if the cumulative amount is sufficient to reimburse and exempt a monthly grant amount. Any child support amount balance that remains but is insufficient to fully reimburse a monthly grant is carried forward and used when the case is next reviewed.
7. Use the TOA Tracking Child Support and Overpayment Recoupment Worksheet (7060CW) to complete the computations.
8. Summary of the child support procedure with NO overpayment:

On the ***TOA Tracking Child Support and Overpayment Recoupment Worksheet*** (7060 CW), use the total amount of child support paid (Report DSS338 or 338X), going back to the first month (January 1998 or later) of CalWORKs grant received (Report DSS338Y), including any Diversion payments, and move from month to month in the order months were paid. Complete the form subtracting the monthly CalWORKs grant amount from the child support balance. Any child support

amount that remains, but is insufficient to fully reimburse a monthly grant, must be retained and carried forward and used for subsequent months of aid.

NOTE: When using child support to repay Diversion payments, reimburse the Diversion payment for the month it was issued. If the participant reapplied for CalWORKs and was granted aid during the Diversion period, wait to untick the months until the Diversion and CalWORKs payments are reimbursed.

9. As recipients transfer from and to other counties, information regarding the balance of the child support recoupment and number of months not counted due to child support recoupment must be reported to continue reimbursement of the subsequent months of aid. The ICT form asks for this information.

For information about child support from another county, follow procedures in Section 58-10, Other County and State TOA Information.

For a case example of how to buy back months with child support and no overpayments using the *TOA Worksheet* (7060 CW) see Example A, Section 58-30.

CalWORKs Eligibility Handbook	Time on Aid - Overpayments and Time Limits: Overview 58-25
	Effective 9-1-04

58-25 Time on Aid - Overpayments and Time Limits: Overview

A review of the overpayment history with or without child support is part of the process to determine how many months of the 60-month time limits to untick. After the grant in the overpayment month is reduced by the amount of the overpayment collected, the child support recoupment reimburses the adjusted grant. The child support is spread over more months.

Additionally when a “full month” overpayment is collected, that month can be unticked, whether or not there is child support.

Policy guidelines for overpayments follow:

1. Review all overpayments that occurred on or after 1/1998. Disregard overpayments that occurred prior to 1998 and their collections.

2. Adjust the grant for the overpayment in the month it occurred when there is an overpayment collection. Do not adjust the grant in the month the overpayment was collected.
3. Child support may have been used to offset overpayments at the time the overpayment computation was processed by the overpayment unit. **When child support was used to determine the original overpayment balance**, subtract the amount of child support previously deducted from the total accumulated child support to create the child support balance. This step is skipped if child support was not used to determine the original overpayment balance. (This information is found on the overpayment Form 952-B).
4. Anytime a **full month overpayment** (i.e., an entire month of aid in which the recipient was not entitled to the cash aid) from 1/98 forward is fully repaid by grant adjustment or any other means (other than child support reimbursement), that month will not be counted toward the CalWORKs 60-month clock and **must be "unticked"**. If the full month overpayment is still in the process of being adjusted and that month is next in line to be reimbursed by child support, the remaining amount of the overpayment can be reimbursed with the child support, and then unticked.
5. Any month in which an **overpayment is not for the full month** of aid will continue to count toward the 60-month clock even after the overpayment is fully adjusted until such time as **child support paid unticks the month**. When the child support calculation for that month is done, only the part of the grant that was not part of the re-paid overpayment needs to be reimbursed by child support to untick the month.
6. When an overpayment includes several months, some fully ineligible and some partially ineligible, months will be unticked in the following manner:
 - a. Determine the CalWORKs amount overpaid for each month of the overpayment. Determine the amount of the overpayment that has been collected for each month listed. This should be equal to or less than the monthly overpayment amount.
 - b. Starting with the first month of the overpayment, determine if the overpayment amount for that month has already been collected. If the overpayment for that month has not been fully collected, use the child support to adjust the remaining overpayment balance (for that month) as well as the eligible portion of that month's CalWORKs grant.
 - c. If the overpayment has been fully collected, reimburse the remaining amount of the eligible portion of the grant with the available child support

balance. Continue this process, moving in order through the months until the child support balance is not enough to reimburse another full month. Keep track of the remaining child support balance so the process can continue when more child support is paid.

It is very important to identify the amount of overpayment that occurred for each month in the overpayment. Review the whole case before balancing any child support against the overpayment and eligible grant amount.

CalWORKs Eligibility Handbook	Time on Aid - Child Support Information from Other Counties 58-28
	Effective 1-1-17

58-28 Time on Aid - Child Support Information from Other Counties

NOTE: The Maximum Family Grant (MFG) rule has been repealed and will end January 1, 2017. Cases with MFG child(ren) are required to cooperate with Child Support Services (CSS) starting 1/1/17, except for aid codes K1 and 3F.

When child support was collected during the time a recipient was receiving aid in another county, the other county staff should review their closed file and determine if any months on aid in their county can be unticked.

Follow the procedure in Section 58-10, Other County and State TOA Information, to obtain information from other counties.

Once you have emailed the TOA Coordinator, use the current information on the TRAC/PSUM screen to complete the review. When the other county responds and reports corrections to time on aid, revisit the review and make changes in the months to be unticked, as appropriate.

CalWORKs Eligibility Handbook	Time on Aid - TOA Worksheet: Cheat Sheet 58-29
	Effective 9-1-04

58-29 Time on Aid - TOA Worksheet: Cheat Sheet

Please Note: Follow the directions below to manually complete the TOA Child Support and Overpayments Worksheet (7060 CW). Use these directions as a guide when completing the Excel version online as calculations are done automatically.

With the advent of CalWIN, much of the terminology on this form is obsolete, although the form is still being used.

Use the *TOA Worksheet (7060 CW)* to document the information about un-ticking months for overpayments and child support. Complete the Worksheet in pencil. Attach the Reports referenced to the Worksheet and file together in the Case file, Section 4.

1. Review the case for the 60 month TOA using the 7027 CW as normal.
2. Using the Report DSS 338 Y – enter the grant amount for each month beginning 1/1998 (or the first month of aid) through the last month on the print out. Complete the Month & Year and line 4.
3. From the 7027 CW, enter “Yes” for any exempt month, line 12.
4. Using the Report DSS 338(or 338X) enter the Total Child Support Collection balance, line 1 for the first month of aid.
5. Using the Report DSS 338Z (overpayment information), determine the following:
 - A. Review the 278F’s and/or the Report of Overpayment (Form 800) to determine when the overpayment (o/p) occurred. **If it occurred prior to 1/1998, it does not affect the 60-month TOA.**
 - B. On the DSS 338Z Report, make note of the month each overpayment was accrued, the amount of the overpayment for each month, and the amount collected to date. Use the report as a worksheet to back up the information entered on the 7060 CW.
 - C. If the o/p was computed by the Overpayment Unit, check the ***Overpayment Budget Worksheet*** (temp 952B) to find any child support used to offset the o/p (see line C at the bottom of the form).

If child support (c/s) was used to offset the o/p, enter the amount used, line 2, for the first month (1/98 or first month of aid).

- D. If the o/p occurred on or after 1/1998, enter the amount of the o/p for each month, line 5. (Use the *Report of Overpayment* [Form 800] or the 278F to determine if the overpayment was for a full month.)
- E. Remember, any month in which an overpayment is not for the full month of aid will continue to count toward the 60-month clock even after the overpayment is fully adjusted until such time as child support paid unticks the month. When the child support calculation for that month is done, only the part of the grant that was not part of the re-paid overpayment needs to be reimbursed by child support to untick the month.
- F. Enter the amount of the o/p that has been collected, line 6, for the first month not to exceed the amount of the o/p. (Use Report DSS338Z: the "Total BIC Amount" for this o/p).

For the next month(s) with an overpayment, enter the remaining balance of the amount collected not to exceed the amount of the o/p in that month, line 6.

- G. Enter the uncollected o/p amount, line 7. (If the o/p for the month has been totally collected, enter \$0; if not fully collected, enter the balance still to be collected for the o/p amount for that month.)
- H. Subtract the amount of the o/p that has been collected from the grant amount. Enter the remainder, line 8, the "Adjusted Grant".
- I. If the "Adjusted Grant", line 8, is \$0, and the month was not exempt (line 10) untick the month, "X" in line 11, date unticked in line 12.
- J. If the "Adjusted Grant", line 8, is greater than "0", subtract it from the Child Support Balance, line 1 (or 2), enter the balance in line 9.

6. Subtract the grant amount, line 8, from the Child Support Balance, line 1-2, beginning with the first month of aid. Enter the balance in line 9. Enter the Child Support Balance from line 9 on line 1 for the second month of aid and continue the computation for each month until the c/s balance remaining is less than the grant received.

- A. When the Child Support Balance is less than the "Adjusted Grant", the month cannot be unticked until additional c/s is collected.
- B. At the next RV, or TOA review, if additional c/s has been collected, start at the point you ran out of c/s and enter the new amount collected in line 3.

If there is sufficient c/s to offset the grant, untick the month and carry over any c/s balance to the next month, line 1.

7. Continue to enter the overpayment information for all o/p's in the month(s) they were accrued, since 1/1998, on lines 5-8.

A. If a full month o/p has been collected, untick the month with an "X", line 11 and enter the date unticked in line 12.

B. If an o/p is collected in the future for a month in which it had previously been offset with c/s, adjust the Child Support Balance, line 9, and change the information in lines 6, 7 and 8.

8. When the initial review is done, complete the "Status at Date of Last Review" on the last page of the 7060CW for the case.

9. Complete a TOA review again at RV, or 3 months before time on aid is about to end again. You may be able to continue extending time on aid for cases with child support indefinitely.

CalWORKs Eligibility Handbook	Time on Aid - Child Support Recoupment Q&A 58-31
	Effective 1-1-17

58-31 Time on Aid - Child Support Recoupment - Q & A

NOTE: The Maximum Family Grant (MFG) rule has been repealed and will end January 1, 2017. Cases with MFG child(ren) are required to cooperate with Child Support Services (CSS) starting 1/1/17, except for aid codes K1 and 3F.

I. General Information About Child Support Reimbursement

The following questions and answers have been developed by the State Department of Social Services (ACL 10-74) for additional guidance in the application of child support collection policy and procedure to cases for the 60-month time limits.

Application of Child Support Time Limit Exemption

A. If the child support recoupment was intended for a previous period of time (a previously assigned arrearage payment) prior to January 1998, can that amount be used to reimburse months of aid beginning January 1998?

Yes. Permanently assigned arrearage payments are not assigned to a specific period of time. The policy for the child support time limit exemption requires that child support recoupment collected from January 1998, whether it is current or arrears, be used to reimburse aid paid back to that month.

B. Will child support that is provided directly to the family (excluding the disregard payments) be used to “untick” the adult participant’s clock?

No. Child support that is provided directly to the family is not considered part of the reimbursement for cash aid. The child support amount received by a family is regarded as income for the AU (unless it is received as support for an MFG or SSI child).

C. Does the county apply the total amount of child support that was specifically used to repay the aid? Is the disregard or the interest income included in the child support recoupment that reimburses cash aid?

Yes. In order to apply the time limit exemption, counties must apply the total amount of child support recoupment (which includes the disregard and interest) that reimburses the monthly cash aid. Beginning October 1998, the \$50 disregard payments are considered as part of the collection to repay the cash grant.

Prior to October 1998, the disregard and the pass-on amounts were not considered part of the collection to reimburse cash aid. Therefore, prior to October 1998, counties should not include the disregard and pass-on amounts for reimbursement of the cash aid.

D. The clock is “unticked”, as the child support recoupment equals the aid payment for the month. A couple of months later, it is discovered that there is an underpayment and a retroactive payment is issued. Is the clock re-ticked?

Yes. The exemption must be applied when the month of aid is fully reimbursed by child support recoupment. When the retroactive payment was issued, the month was no longer considered fully reimbursed. Therefore, the month cannot be exempt from the CalWORKs 60-month time limit until additional child support recoupment can be applied to reimburse the retroactive payment. If the worker

knows of this circumstance in advance, the participant can be allowed to choose whether to receive the underpayment and have the clock re-ticked or waive the underpayment and use the additional month of aid.

NOTE: When resuming the reimbursement process, on the TOA Worksheet (7060CW) go back to these “re-ticked” months and begin “unticking” these months first.

Needy Caretaker

E. If a needy caretaker (non-parent) relative has custody of the child, is the child support recoupment used to “untick” his/her months of aid?

Yes, the amount of child support recoupment for the child who is living in the needy caretaker relative’s household must be applied to the caretaker relative’s monthly grant amounts. The case is established for the needy caretaker relative and the child support is reported on that case. When the monthly grant amount is repaid, the month is exempt from his/her CalWORKs 60-month time clock.

Zero Parent Case

F. Case Scenario -- Child support is collected for two children in a Zero Parent case, (the children live with their grandmother who is a non-needy caretaker relative). At a later point in time, the mother returns to the home and is aided and the case becomes an All Families case.

1. Will the child support recoupment for the children in a Zero Parent case be applied to a month of aid?

Yes. The child support recoupment will be applied to the months of aid of the Zero Parent case. However, since there is no aided adult in the AU no time on aid will be counted, so there are no months to “untick” from the CalWORKs 60-month time limit.

2. Will the child support arrearage be used to “untick” the 60-month time clock on the All Families case?

Any arrearage amount that is collected to recoup the unreimbursed assistance will be reported to DHS. The amount that is available to reimburse the grant must be accumulated and used to “untick” the months of aid for the adult who is living with the child, if that adult is part of the AU. Because the policy requires that child support must be recouped from the earliest month of aid, the mother may or may not have been included in the month(s) of aid that were reimbursed by the child

support recoupment and therefore she may or may not have month(s) “unticked”.

Unaided Child (e.g. MFG or SSI)

G. Can the child support collected be applied to aid when the child support was paid on behalf of an unaided child?

No. The child support that is received on behalf of a child who is not part of the AU, (e.g. a SSI or Maximum Family grant [MFG] child) is forwarded to the family. Since the child support is provided directly to the family, it is not considered child support recoupment used to reimburse the grant and therefore, it will not be reported to the county by the LCSA. (Please refer to NOTE above regarding MFG cases.)

Closed Case

H. Case Scenario – Case is discontinued. The absent parent continues to pay arrearages for child support. Will the arrearages be used to “untick” the clock?

Yes. The LCSA will provide DHS with the amounts of child support payments that will be used to recoup the cumulative unreimbursed assistance. Determine whether the amount (collected in and after 1998) is sufficient to “untick” the month(s) of aid.

When/if the client comes in to reapply for CalWORKs, the TOA Coordinator will determine whether the amount (collected in and after 1998) is sufficient to “untick” the month(s) of aid. If, while the case is still in closed files, another county inquires about whether child support collected in San Francisco County will “untick” months, the TOA Coordinator will be required to review the case for TOA child support reimbursement.

I. If child support is collected during the period that the recipient is not receiving cash aid, is the child support amount sent directly to the custodial parent?

Current child support collected is sent to the family once the entire family is no longer aided and the LCSA has been notified.

However, if the parent is no longer receiving aid, but the children are, the child support is assigned to the State and child support collections are used to recoup the amount of public assistance allocated to the family.

Safety Net

J. Case Scenario – An adult has been discontinued from aid because she reached the CalWORKs 60-month time limit but the children continue to be aided as part of the Safety Net. Several months later the worker receives a Child Support Report showing a large child support recoupment amount, which results in months of aid exempted from the 60-month time limit.

1. Is the worker required to add the adult back into the AU? If yes, at what point should the adult be added back into the AU?

Yes. The adult must be added back into the AU, if the family is otherwise eligible. Since the child support recoupment occurred after the adult was discontinued from aid due to reaching the time limit, the worker cannot retroactively add the adult back into the AU and provide a retroactive payment to the family. The worker shall add the adult into the AU, using a CW 8 application form, when the worker is notified of the child support recoupment and it is determined that the adult is eligible for additional months of aid due to the exemption. The adult must be included as of the first of the month in which additional months become available. The worker is required to send a NOA informing the recipient of the exempt months due to child support reimbursement of aid and the increase in the cash aid payment. At the next RV, send a time limit NOA to inform her of the number of months of aid that she used, the specific exempt months, and the remaining months on aid.

2. If the adult is added back into the AU, is the individual subject to CalWORKs WTW requirements? If yes, in what WTW activities must the person participate?

Yes. Because the adult is added back into the AU, and is an aid recipient again, s/he is subject to applicable CalWORKs WTW requirements, including those regarding the 24-month time limit, hours of participation, satisfactory participation, and sanctions. Generally, the adult in this situation has reached the 24-month time limit. Therefore, s/he must participate in unsubsidized employment and/or community service, and other allowable activities. However, with a break in aid, a REAPPRAISAL must be completed and s/he may have the option to restart WtW activity.

K. When a family has reached the CalWORKs 60-month time limit and is no longer eligible for aid due to an increase in income and an assigned arrearage is collected, how will the adult receive the aid for the months that had been exempt?

Case Scenario – An adult is discontinued from aid because she reached the CalWORKs 60-month time limit but the children continue to be aided as part of the safety net. After a period of 6 months, her earnings increase, which causes the family to be ineligible and the entire AU is discontinued from aid. After the AU is discontinued, an assigned arrearage is collected from the absent parent and is reported as recoupment to DHS, which results in months of aid exempted from the 60-month time limit. Since the family is now ineligible for aid due to an increase in income, how will the adult receive the aid for the months that had been exempt?

The adult was discontinued from aid because she received a cumulative total of 60 months of CalWORKs aid. The child support recoupment occurred after the family became ineligible for aid. Although she must be granted the exempt months for which she is entitled, the family is no longer eligible for aid, therefore aid cannot be granted to the AU unless the family reapplies for aid.

If the family reapplies for CalWORKs, the TOA Coordinator will determine whether the child support collected exempts any months for the previously timed-out adult and will take appropriate action to “untick” the months, if the information is available. If the worker determines eligibility for the family, she is entitled to the remaining number of months of aid until she again reaches the cumulative total of 60 months.

At the time of re-application the TOA Coordinator sends the TOA informing notice (CDS 723) to inform the adult(s) of the number of months of aid that have been used, the specific exempt months, and the remaining months on aid.

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