

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



August 31, 2007

SUBJECT: REGIONAL CENTER BIENNIAL GROUP HOME (GH) AND FOSTER FAMILY AGENCY (FFA) RATE REQUIREMENTS – AID TO FAMILIES WITH DEPENDENT CHILDREN – FOSTER CARE (AFDC-FC) PROGRAM NOVEMBER 2007 FILING

IMPORTANT NOTICE

Dear Provider:

This letter serves as a courtesy reminder that your regional center biennial application is due. Completion of this application is necessary for a regional center group home or FFA program to receive a program number for AFDC-FC funding which is only to be used to pay for board and care cost. Senate Bill 84 (Chapter 177, Statutes of 2008) amended Welfare and Institutions Code Section 4684(c)(1) which specifies that regional center consumers who are recipients of AFDC-FC benefits, regional centers shall purchase or secure the services that are contained in the child's Individualized Family Service Plan (IFSP) or Individual Program Plan (IPP), but which are not allowable under federal or state AFDC-FC provisions.

Providers were informed in the September 30, 2005 and the January 31, 2006 Foster Care Audits and Rates Letters (FCARL #2005-03 and FCARL #2006-01) that as an odd numbered provider, you would be required to submit rate application on October 1, 2007. **However, to allow providers a full sixty (60) days to prepare and submit an application, the California Department of Social Services (CDSS) has extended this deadline to November 1, 2007.** Copies of the FCARLs can be found on the Foster Care Audits Policy and Support Bureau's website at: http://www.childsworld.ca.gov/FosterCare_1445.htm .

Enclosed are the requirements for a complete biennial regional center application. **To avoid termination of your program number, please be sure to submit your application on or before November 1, 2007.** Providers can obtain the SR and/or FCR forms online at: http://www.dss.cahwnet.gov/cdssweb/FormsandPub_271.htm .

If you have any questions about the rate application process or forms, please contact your Foster Care Rates Consultant at (916) 651-9158.

Sincerely,

SHEILAH DUPUY, Chief
Foster Care Rates Bureau

Enclosure

REGIONAL CENTER RATE APPLICATION/REQUEST REQUIREMENTS

A complete application/request must be submitted for each regional center group home (GH) and/or foster family agency (FFA) program in operation to receive a program number. A complete application/request is one that contains all the required documents necessary to establish a program number. Forms have changed to reflect submission of information for a biennial reporting period. This means that data is required for the corporation's prior two fiscal years. Please refer to the regulations and the instructions on the reverse side of each group home form when preparing the rate application/request. The instructions will assist you in completing the rate application/request package correctly. **The documents and forms listed in Sections I and II are required for a complete regional center GH and/or FFA program application/request.**

I. REQUIRED FORMS:

A. SR & FCR forms:

- For a **GH regional center**, a “**Group Home Program Rate Application (SR 1)** with original signature (Front and Back)
- For an **FFA regional center**, a “**Foster Family Agency-Data and Certification Sheet**” (FCR 1FFA) with original signature.
- For a **GH regional center only**, a **Self-Dealing Transaction Declaration (FCR 16)** signed by the group home's board designee. This form can be obtained at: <http://www.cdss.ca.gov/pdf/FCR16.pdf>

II. REQUIRED DOCUMENTS:

- A. A copy of the most recent regional center rate and vendorization letter.
- B. For a **GH regional center only**, a copy of the Group Home Administrator Certificate issued by Community Care Licensing (CCL) for the program's administrator.
- C. A complete listing of the corporation's Board of Directors including full names, titles, mailing addresses and phone numbers.
- D. A declaration signed by the Board of Directors that the program will operate during the biennial rate period in the public interest for scientific, education, service or charitable purposes; is not organized for profit-making purposes; and, uses its net proceeds to maintain, improve or expand its operations.

Note: A regional center group home or foster family agency provider is to immediately notify the FCRB if the agency ceases to operate on a nonprofit basis, becomes inactive, suspended, or other wise is not in good standing with the Secretary of State (SOS).

- E. A copy of any initial or amended Statement of Information (SI 100) filed with the Secretary of State (SOS).
- F. If there has been any change since the last submission, an endorsed copy of the Articles of Incorporation filed with the SOS.
- G. A copy of all current Community Care Licensing licenses for each facility including sub-office licenses.
- H. If any changes have occurred, a tax exempt status letter either from the Internal Revenue Service or the California Franchise Tax Board designating your organization as tax exempt.

GOOD CAUSE REQUESTS

A regional center provider who is unable to submit a complete application by the due date because of circumstances beyond the provider's control, may submit a "good cause" request to extend the due date. Typical circumstances that constitute good cause include, but are not limited to, natural disasters and emergency medical situations [MPP 11-400g(1)].

The procedures for submitting a good cause request are contained in MPP Section 11-402.371 and Section 11-403(l)(1). **A good cause request must be submitted by a provider to the FCRB separately from the rate application and must be postmarked no later than five calendar days following the application due date.** The good cause request must contain a clear statement requesting good cause and include the specific reason(s) for submitting an incomplete or untimely application. The written request for good cause should also include the name, location, and program number of the affected program; the name, address and telephone number of the provider; and, the name, address and telephone number of the contact person. Good cause requests should be signed by the Executive Director of the group home or FFA.

TIMELINES AND PENALTIES

A complete regional center GH or FFA application/request must be postmarked on or before November 1, 2007 to be considered timely. An application/request that is postmarked after this date or remains incomplete after the due date will result in termination of your program number. Once a program number is terminated, a new program number can only be obtained by submitting a new, complete application/request.

If a private consultant or Certified Public Accountant (CPA) completes and/or mails an application on behalf of a provider, responsibility for the content of the documents filed and the date of filing remains with the provider. A private consultant or CPA's failure to submit a timely application will not excuse untimely submission of a complete application and may result in a penalty.

A complete copy of the regulations is online at the following websites:

<http://www.dss.cahwnet.gov/getinfo/pdf/fcmanb.pdf>

<http://www.dss.cahwnet.gov/getinfo/pdf/fcmanc.pdf>

WHERE TO SEND APPLICATIONS:

Please mail a complete rate application to the attention of your Rates Consultant to the following address:

**California Department of Social Services
Foster Care Rates Bureau
744 P Street, M.S. 9-74
Sacramento, CA 95814**