**Adoption Assistance Program (AAP)**

**Reassessment/Post Adoption**

E050-0562| Draft Revision Date: 01/05/2022

Overview

This policy provides instructions and guidelines for Adoption Assistance Program (AAP) Eligibility Workers (EW) on how to process changes to rates, vendors and child/youth/nonminor dependents (NMD) information after the adoption has been initiated, including reassessing eligibility for ongoing Medi-Cal and AAP Benefits.

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Version Summary

This policy guide was updated from the 05/08/2012 version, as part of the Eligibility Policy Redesign. It was updated to align with the implementation of the Leader Replacement System (LRS), and to clarify the roles and responsibilities of AAP Reassessment EWs in continuing to complete eligibility determinations under the AAP for children, youth and nonminor dependents (NMDs).

POLICY

**Adoption Assistance Program (AAP) Benefits**

The Adoptions Assistance Program (AAP) removes or reduces barriers that prevent the adoption of children who otherwise would remain in out-of-home care or under legal guardianship by providing financial and/or medical assistance to families who are willing and able to assume parental responsibility for children who are eligible for AAP benefits.

AAP rates/benefits are negotiated between the adoptive family and the Resource Family Support and Permanency Division (RFSPD) CSW and are based on the needs of the child and the circumstances of the adoptive family. The RFSPD CSW shall make the final AAP benefits determination. The adoptive parent(s) income should not to be used in determining the AAP benefit.

Upon authorization by an RFSPD CSW of a negotiated AAP benefit the Eligibility Worker (EW) determines the origin of the AAP funds based on the case’s eligibility criteria and financial responsibility as one of the following:

* The county that, at the time of the adoptive placement, would have been responsible for making a payment under the Cal-WORKS program, Aid to Families with Dependent Children – Foster Care (AFDC-FC) or the Approved Relative Caretaker (ARC) program had the child not been adopted.
* Children under non-paid foster care placement receiving SSI/SSA are also eligible, and may receive both AAP Benefits and SSI/SSA benefits.
* If the child was voluntarily relinquished for adoption prior to a determination of eligibility for this payment, the county of residence of the relinquished parent at the time the relinquishment document was signed, is responsible for determining AAP eligibility and for providing financial assistance.
* The responsible county for all other eligible children shall be the county where the child is physically residing prior to placement with the adoptive family.

The AAP benefit will continue unless one of the following occurs:

* The child has attained the age of 18 unless the child has a mental or physical handicap or meets AB 12 requirements that warrants continuation of AAP benefits to the age of 21 years.
* The adoptive parents are no longer legally responsible for the support of the child.
* The responsible public agency determines the adoptive parents are no longer providing any type of support to the child.

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**Out-of-Home Care Placement**

When an entity such as a Regional Center, Mental Health, County Welfare Department, Probation or other program pays for the child’s out-of-home care placement cost, the adoptive parent(s) may continue to receive AAP benefits at the state approved basic rate or their actual share of cost for their child’s support, whichever is greater. The adoptive parent(s) maximum share of cost is the state approved rate, eligible SCI rate or dual agency rate, and any applicable supplemental rate the child would have received had they remained in out-of-home care.

The payment for the out-of-home care placement should not exceed the maximum state-approved foster care facility rate for which the child is placed. Any changes in the amount of the AAP benefits require a new agreement and the concurrence of the adoptive parent(s). The AAP benefit increase to the state-approved foster care family rate must be reflected in a new AAP agreement for the limited duration of the child’s out-of-home care placement. The adoptive parent(s) may request the financially responsible public agency to pay the facility directly using the child’s eligible AAP funds, or the adoptive parents may request the AAP payments continue to be sent to them to pay the facility. This should be discussed and mutually agreed upon with the adoptive parent(s).

Upon the child’s return to the adoptive parent(s) home, a new AAP agreement must be signed reflecting the AAP benefit amount, not to exceed the state-approved foster family home rate, eligible Specialized Care Increment (SCI) rate or dual agency rate and any applicable supplemental rate.

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**Rate Changes**

Specialized Care Increment (SCI) Rates

The Specialized Care Increment (SCI) rate is intended to compensate caregivers to meet the special emotional, behavioral (D-Rate) and/or significant medical (F-Rate) needs of a child/youth/NMD in out-of-home care.

If the child also has any special needs which would qualify him or her for an SCI, the AAP benefit shall include the applicable state-approved SCI in addition to the age-related, state-approved out-of- home care rate.

Regional Center Rates

If the child is a client of a California regional center, rates will be based on regional center rates.

California regional center clients who leave California shall continue to receive AAP benefits based on the regional center rate previously established or the applicable rate in the host state (whichever is higher) for which the child is eligible.

Dual Agency Rate

Children who are California Regional Center clients, receiving AFDC-FC, ARC, Kin-GAP, or AAP benefits, and residing in one of the following locations, are eligible to obtain a dual agency rate:

* Adoptive home
* Approved home of a relative(s)
* Home of a non-relative extended family member (NREFM)
* Home of a non-related legal guardian, or former non-related legal guardian when the guardianship of the child otherwise eligible for AFDC-FC has been dismissed due to the child turning eighteen (18) years old
* Approved non-relative RFH
* RFH not vendorized by Regional Center

Dual agency rates are not available to Foster Family Agency (FFA) homes, group homes/Short-Term Residential Therapeutic Program (STRTP), or community care facilities vendorized by a Regional Center.

Once the AAP 2 for the authorization of a Dual Agency P2 rate is received from the Post Adoption Services (PAS) or RFSPD CSW, it will be forwarded from the AAP Reassessment EW to the AAP PRU [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV) In-Box for processing. If there is a request for the P2 rate at time of intake, the AAP Intake EW will complete the assignment.

It is necessary to submit an AAP 2 to request the P2 rate.

Supplemental Rate

A SOC 835, SOC 836 and SOC 837 must be in the child’s case to process P2 supplemental rate. The language in the Notice of Action (NOA) will indicate rate information that is written into the SOC 835, SOC 836 and SOC 837 instructions.

The AAP 2 and all supporting forms need to be submitted to the AAP PRU In-Box [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV) for processing. When a child is first determined eligible for a dual agency, the child must be immediately assessed for the supplemental rate and a determination for a supplement must be reached within ninety (90) days, regardless of a regional center’s signature on the SOC 837.

California Necessities Index (CNI)

The CNI is an annual rate increase that reflects the change in the cost of living. The AAP basic rate may be automatically increased based on the annual CNI increase, should one occur, effective July 1st of each year. An amended agreement is not required nor is an AAP2.

* All Host County rate increases due to CNI within the State of California are to be manually processed by the Reassessment EW.

Age-Related Rate Changes

Initial AAP agreements signed on or after January 1, 2010 will no longer be eligible to receive an AAP age-related increase or age-related decrease with the exception of the P1 rate.

* All P1 rate should be reduced when child turns three (3) years of age and does not qualify for higher rates.

A family may request an AAP benefit increase at any time based on changes on the child’s circumstances and needs. A reassessment of the child’s and family’s needs and supports will be completed to determine if an AAP benefit increase is warranted.

Initial AAP agreements signed prior to January 1, 2010 will still be eligible to receive the AAP age-related increase or age-related decrease upon request from Services.

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**Continuum of Care Reform (CCR)**

For initial adoption assistance agreements executed on or after January 1, 2017 or for initial adoption assistance agreements executed between July 1, 2011 and December 31, 2016 where the adoption finalizes on or after January 1, 2017, the Level of Care (LOC) basic level rate plus any applicable SCI, or the applicable Dual Agency Rate and Supplement applies.

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**Change of Vendor Information**

All requests related to the update of vendor information are to be verified by contacting the PAS or the adoptive parents. Supporting documentation warranting the change request must be obtained, forwarded to the AAP PRU In-Box [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV) along with the Request to Update Vendor Information form, and filed in the AAP eligibility physical case. The vendor information changes might be the following: name change, address change, payee changes, etc.

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**Notices of Action (NOA)**

All NOAs are child specific. An NOA is completed by the individual taking the action when aid is granted, request for a rate change is denied, increased, decreased, discontinued, deferred or terminated.

For a rate decrease, a NOA should be sent at least ten (10) days prior to the rate decrease, whenever applicable.

An NOA is completed and sent to the adoptive parent when a retroactive payment has been created from the CNI to reflect the cost of living increase.

* An NOA is automatically generated by LRS.
* The Reassessment EW is responsible to initiate an NOA when a CNI is for a Host County rate.

The County shall send an NOA between sixty (60) and seventy (70) days prior to the ending date of payment when the child will reach the age of eighteen (18), or when the adoption assistance agreement indicates that AAP benefits are for a specific, time-limited duration.

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**Medi-Cal**

Throughout this procedural guide, the obtaining of Medi-Cal Eligibility Data System (MEDS) print outs are for review purposes only. No changes will be made on the MEDS system except by the AAP Medi-Cal Unit. If discrepancies between LRS and MEDS are due to errors in LRS, the EW is required to update the inaccurate information in LRS and verify the updated changes in MEDS, forty-eight (48) hours prior to referring to the centralized Medi-Cal unit.

The Medi-Cal program associated with aid codes other than “03”, “04”, “06”, “07” or “60”, that appear on the child’s Medi-Cal record, can be reviewed on the MEDS Network User Manual.

Interstate Compact On Adoption and Medical Assistance ([ICAMA](https://aaicama.org/cms/))

ICAMA is a compact that has been adopted by the legislatures of compact member states, which governs the interstate delivery of and payment for medical services and adoption assistance payments and subsidies for adopted children with special needs.

County Responsibility as a Sending Agency

A child who is eligible for Title IV-E benefits is automatically eligible to receive Medicaid in the receiving state. However, a child who receives state-funded adoption assistance does not qualify for Medicaid in the receiving state unless that state has a [reciprocal agreement](https://aaicama.org/cms/stateinfo-docs/Medicaid-%20COBRA_Reciprocity_revMarch2019.pdf) with California to provide health care services. In the absence of such an agreement, the County should advise the adoptive family that the child will retain Medi-Cal eligibility to receive health care services from an out-of-state provider who is willing to accept payment under the California Medi-Cal Program.

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**Children Adopted by the Same Parent**

If more than one child is being referred to the AAP and placed in the same adoptive home, these children are considered siblings.

In an attempt to minimize the number of staff assigned to a family, all siblings should be assigned to the same AAP Reassessment EW with first consideration of assignment given to the currently assigned AAP Reassessment EW and/or the AAP Reassessment EW who is assigned to most of the siblings. If it is determined at any point that there are multiple AAP Reassessment EWs assigned to a sibling group (i.e., siblings placed in the same home), any task needed to transfer the cases should be completed prior to transferring the case.

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**Reassessment**

Reassessment of an adoptive case is to be performed every two (2) years.

Effective 01/01/2012, youth receiving AAP benefits are eligible for extended benefits provided the initial adoption agreement was signed when the youth was at least sixteen (16) years old and one (1) of the eligibility criteria ([E030-0540, Extension of Foster Care beyond Age 18](http://lacdcfs.org/Policy/Hndbook%20FCE/E030/004205_E030-0540_Extension_of_Foster_Care_Beyond_Age_18.doc) and [E050-0564 Extended Adoption Assistance Program (AAP) Beyond the Age of 18](http://lacdcfs.org/Policy/Hndbook%20FCE/E050/E0500565v1012.doc)) is met.

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PROCEDURE

**AAP Case Reassessment**

**AAP Reassessment EW Responsibilities**

Within fourteen (14) business days of receipt of the AAP intake case, review the case as follows:

1. DCFS 26-1: Ensure that appropriate reminders are in place for events includingage rate decrease, Regional Center/Early Start Intervention (ESI) or eighteen (18) years old.
2. Ensure that the case has been created in LRS and that the data is accurate.
3. Ensure payments have been issued by LRS.
4. Review and ensure the origin of the funds from which the AAP program is aided based on the case’s eligibility criteria.
5. Confirm Adoptions Medi-Cal has been activated.
6. If the case has been set up correctly, set controls for follow up actions, and then file the case per unit procedure.
7. If incomplete or inaccurate, notify the AAP Reassessment Eligibility Supervisor (ES) by completing the AAP Intake Review Guide.
8. Document in the CWS/CMS case notes that the case has been assigned to the AAP Reassessment EW.

**AAP Reassessment ES Responsibilities**

1. Review the case for accuracy and completion when the case is referred for correction from the AAP Reassessment EW.
   1. If accurate and complete, return the case to the assigned AAP Reassessment EW.
   2. If inaccurate or incomplete, return to the AAP Reassessment Unit Clerk for return to the AAP Intake Unit for corrective measures.
2. Follow up within ten (10) business days if the case has not been with the corrective measures contact the AAP Intake ES to monitor corrective measures needed.
3. Upon receipt of the case with the corrective measures, return the case to the assigned AAP Reassessment EW for follow up.

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**Case Changes That Occur After AAP Intake Approval**

The AAP Reassessment EW may receive requests for change from the following sources:

1. Post Adoption Services (PAS) Children’s Social Worker.
2. Assigned RFSPD CSW.
3. A Revenue Enhancement/AAP Hotline work order generated at the request of an adoptive parent.
4. Returned AAP3 form from adoptive parents.
5. Appeals Hearing Specialists.
6. Out of state ICAMA Unit.
7. Other sources such as:
   1. Probation Department
   2. Foster Care Section
   3. Department of Mental Health
   4. Other counties or other states

**AAP Reassessment EW Responsibilities**

1. Upon receipt of the change request documents, review all documents for accuracy and completion with the appropriate level signatures.
   1. If incomplete or inaccurate, return to RFSPD CSW or the source of change request for corrective measures. Forward to the AAP Reassessment ES once corrective measures are completed.
   2. If complete and accurate, forward the request to the AAP Reassessment ES for review.

**AAP Reassessment ES Responsibilities**

1. Review the case and assignment.
   1. If complete and accurate, return the request to the AAP Reassessment EW to forward the request to the AAP PRU In-Box [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV).
   2. If incomplete or inaccurate, return the case to the assigned AAP Reassessment EW to request RFSPD CSW or the source of change request corrective measures.
   3. Upon confirmation of corrective measures, return the request to the AAP Reassessment EW to forward request to the PRU In-Box [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV)

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**Child’s Name Change**

**AAP Reassessment EW Responsibilities**

* 1. Review the supporting documentation and validate anything that may have an inconsistency.
     1. A Finalized case requires a copy of Birth Certificate.
     2. A non-finalized case requires AAP2 from Regional CSW.
  2. Complete the child’s name change in the LRS Individual Demographic Page.
  3. Review MEDS after two (2) business days to verify changes in LRS have been updated.
  4. Complete Medi-Cal Eligibility Database System (MEDS) Referral to update child’s name under Medi-Cal if MEDS update has not interfaced with LRS.
     1. If discrepancies between MEDS and LRS occur, the EW is to make correction in LRS and review updates in MEDS on the next working day.
     2. If MEDS is still inaccurate refer to the Centralized Medi-Cal Unit.
  5. Update the name on the physical folder.
  6. Submit supporting documents to the AAP Reassessment ES to update the case name in LRS.
  7. Document actions taken in the LRS Journal.

**AAP Reassessment ES Responsibilities**

* 1. Receive and review supporting documents for name change.
  2. Update the case name under Case Summary in LRS.
  3. Save.

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**Payee Name Change**

Payee name changes pertaining to reassessment occur when an individual becomes divorced, marries or one parent is deceased. Requests will be provided by the PAS CSW or the adoptive parent.

**AAP Reassessment EW Responsibilities**

* 1. Receive and review the supporting documentation and validate any inconsistency.

1. For a non-finalized case, an AAP 2 from the regional CSW is required.
2. For a finalized case, the request must include one or more of the following supporting documents: a copy of the death certificate, divorce decree, marriage certificate, court report, driver’s license, passport, etc.
   1. Indicate the name change on the outside of the case folder.
   2. Complete a Request to Update Vendor Information on LRS/Lift Suspension form.
   3. Submit the AAP 2 form and supporting documents to the AAP Reassessment ES to review and approve.
   4. Once it is approved by the Reassessment ES, scan and email the request to the AAP PRU [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV) In-Box.
   5. Document actions taken in the LRS Journal.

**AAP Reassessment ES Responsibilities**

1. Review the submitted supporting documents and referral for accuracy and completion.
2. Sign the hard copy of the Request to Update Vendor Information on LRS/Lift Suspension form and return to the assigned AAP Reassessment EW for completion with the AAP PRU section.
3. Document actions taken in the LRS Journal.

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**Address/Phone Number Change**

**AAP Reassessment EW Responsibilities**

1. Upon receipt of a request for an address and/or phone number change:
2. Contact the adoptive parent/s to verify information, and to obtain the necessary documentation.
3. If the address change is as a result of a separation, divorce or death, ensure that the appropriate documentation such as: death certificate, divorce decree, court order, etc. is provided to the AAP Reassessment EW to validate the requested action, and refer to PAS for appropriate action (including signatures), if necessary.
4. Request and obtain any documentation from the adoptive parent/s that validates the change of address/phone such as: utility bills, state identification card, driver license, lease agreement, notarized letter, etc.
5. Update the Contact Summary page in LRS.
6. Complete a Request to Update Vendor Information on LRS/Lift Suspension form.
7. Submit the AAP 2 form and supporting documents to the AAP Reassessment ES for approval.
8. Once the ES approval is received, forward the request and supporting documents to the AAP PRU In-Box [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV)
9. Review the accuracy of the information in LRS once an email notification about the completion of the requested action is received from PRU.
10. Document actions taken in the LRS Journal.

**AAP Reassessment ES Responsibilities**

1. Review the submitted supporting documents and referral for accuracy and completion.
2. Sign the hard copy of the Request to Update Vendor Information on LRS/Lift Suspension form.
3. Return the original documents to the assigned AAP Reassessment EW to be forwarded to the PRU In-Box [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV).
4. Document actions taken in the LRS Journal.

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**Lift Vendor Suspension**

**AAP Reassessment EW Responsibilities**

1. Contact the adoptive parent(s) to verify information update. If the address is different see [Address Change](#AddressChangeI) Procedure
2. If address remains the same, complete a Request to Update Vendor Information on LRS/Lift Suspension form.
3. Submit form to the AAP Reassessment ES for approval.
4. Document actions taken in the LRS Journal.

**AAP Reassessment ES Responsibilities**

1. Review the submitted PRU referral for accuracy and completion.
2. Sign the hard copy of the Request to Update Vendor Information on LRS/Lift Suspension form and return the PRU referral to the assigned AAP Reassessment EW to forward the request to the PRU In-Box [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV).
3. Review LRS to ensure the suspension has been lifted once a completion email has been received from PRU.
4. Document actions taken in the LRS Journal.

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[Skipped Issuance](#SkippedIssuanceReportassignments)

**AAP Reassessment EW Responsibilities**

1. Upon email notification from the AAP PRU EW, investigate the skipped issuance assignment.
   1. If corrective measures can be taken, take such actions to resolve the issue(s) identified.
2. Upon completion of the corrective measure, run EDBC
3. The ES will be notified electronically that EDBC was run and will approve when determined to be complete and accurate.
4. For those instances where additional corrective measures are needed, the ES will forward the assignment back to the EW for correction and the EDBC will be re-run by the EW. The ES will be notified electronically that EDBC was re-run and will approve when determined that corrective measures are accurate and complete.
   1. If corrective measures require assistance from the AAP PRU, complete the “Request to Update Vendor Information on LRS/Lift Suspension” form and submit the form and supporting documentation to the ES for approval.

Upon approval from the ES, forward the form and supporting documentation via email to the AAP PRU In-Box at: [PRUAAP@dcfs.lacounty.gov](mailto:PRUAAP@dcfs.lacounty.gov).

1. Cooperatively work with the Eligibility Resolution Unit (ERU) and the AAP PRU, if needed, to resolve complex and/or complicated issues.
2. AAP PRU will take action(s) based on the email request from the EW and notify the EW and ES of the actions taken.

**AAP Reassessment ES Responsibilities**

1. Review the actions taken by the EW to ensure completeness and accuracy of the actions.
   * 1. If the EW took corrective action(s), authorize/approve the EDBC if the action(s) taken was completed and accurate.
     2. Reject the EDBC and return the case to the EW if corrective measures are needed.
     3. Upon resubmission of the case, determine if corrective measures are accurate and complete and that EDBC was re-run by the EW. Authorize/approve the EDBC if the action was completed correctly.
     4. When corrections are completed and the EDBC is rerun authorize the EDBC results to release the payment(s).

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**Reissuance of Payments**

**AAP Reassessment EW Responsibilities**

1. Upon receipt of the notification of canceled payment through the Foster Care Hot Line (FCHL) or other sources, such as: a call from the adoptive parent(s) or the adoption CSW.
2. Verify the Issuance History in LRS
3. Verify the vendor’s information under the Resource Databank in LRS for the vendor name, address, and phone number for accuracy.
4. Run the Eligibility Determination and Benefit Calculation (EDBC) for the specific month of the Skipped Issuance Report.
5. Review and accept the AAP EDBC Summary page.
6. Inform the AAP Reassessment ES the completion of action taken for review and approval.
7. Document actions taken in the LRS Journal.

**AAP Reassessment ES Responsibilities**

1. Review the Issuance History page to verify the canceled payment.
2. Review Vendor information under the Resource Databank in LRS, including vendor suspension.
3. Authorize EDBC to reissue payment.
4. Document actions taken in the LRS Journal.

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**Rate Change Increase/Decrease Out of Home Care Placements Paid by the AAP**

**AAP Reassessment EW Responsibilities**

1. Upon receipt of the AAP2 from PAS:
2. Complete the AAP Case Referral form.
3. Submit the referral with the AAP 2 to the Reassessment ES for review and approval.
4. Document actions taken in the LRS Journal. [Back To Top](#Top)

**AAP Reassessment ES Responsibilities**

1. Review the AAP2 and the Case Referral form for completion and accuracy
   1. If accurate and complete, sign the AAP Case Referral form and return to the AAP Reassessment EW to scan and email to the AAP PRU In-Box [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV) for processing.
   2. If inaccurate or incomplete, return to the AAP Reassessment EW for corrective measures.
   3. Upon confirmation of corrective measures, forward the request to the AAP PRU for processing.

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**Child Temporarily Placed in Probation or Foster Care Placement (Out of Home Care Placement Paid by Another Entity)**

For a Probation placement or if an adopted child is re-entering foster care, the notifications may be received via telephone, FAX, e-mail, PROB 667, AAP 2, DCFS/A 159 or MEDS print out.

* If the adoption has not been finalized, AAP will be terminated.
* If the adoption has been finalized and the adoptive parental rights are not terminated, adoptive parents may continue to receive [AAP benefits](#OutofHomeCarePlacement) basic rate only.

Adoption Not Finalized (Disrupted AAP Placement)

**AAP Reassessment EW Responsibilities**

* 1. Retrieve the Physical Case from the Reassessment file.
  2. Review the notification, DCFS/A159, and AAP2 from PAS.
  3. End Date the ID Num page under Client Management Section in CWS/CMS.
  4. Confirm the Removal Date under the Adoptive Placement Section in CWS/CMS.
  5. Document actions taken in CWS/CMS Case Notes and save to database.
  6. End Date in the AAP Summary and the AAP Placement pages in LRS.
  7. Run and Accept EDBC to discontinue case.
  8. Complete and copy the NA 791 terminating AAP Benefits.

1. One (1) copy is to be filed in the physical case.
2. Two (2) copies are sent to the adoptive parents.
   1. Print and review MEDS on the next day.
   2. Submit the physical case to the AAP Reassessment ES for review and approval.
   3. Document actions taken in the LRS Journal.

**AAP Reassessment ES Responsibilities**

* 1. Review completion and accuracy of all information updated in CWS/CMS, LRS, and in the physical case.
     + 1. If accurate and complete, authorize LRS EDBC and document in the LRS Journal.
       2. If inaccurate or incomplete, return case to the AAP Reassessment EW for corrective measures.
       3. Upon confirmation of corrective measures, authorize LRS EDBC and document in the LRS Journal.
  2. Return the approved case to the AAP Reassessment EW for filing.

Adoption Finalized and Adoptive Parental Rights Not Terminated

**AAP Reassessment EW Responsibilities**

* 1. Retrieve the Physical Case.
  2. Review notification and the AAP 2.
  3. If the child is receiving a Specialized Rate, complete a case referral form and submit to the PRU In-Box: [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV) along with the AAP 2 for the [rate decrease](#RateChanges) to the Basic Rate.
     1. If child is receiving the Basic Rate no changes are needed.
  4. Document actions taken in the LRS Journal.

**AAP Reassessment ES Responsibilities**

1. Review the AAP2 and the Case History form (when provided) for completeness and accuracy.
   1. If accurate and complete, sign the AAP Case Referral form and return to the AAP Reassessment EW to scan and email to the PRU In-Box: [PRUAAP@DCFS.LACOUNTY.GOV](mailto:PRUAAP@DCFS.LACOUNTY.GOV) for processing.
   2. If inaccurate or incomplete, return to the AAP Reassessment EW for corrective measures.
   3. Upon confirmation of corrective measures, forward the request to the AAP PRU for processing. [Back To Top](#Top) [Back To Procedure](#PROCEDURE)

**Denials of Rate Change for Region Treatment Center (RTC) Placement and Requests AAP Extension**

**AAP Reassessment EW Responsibilities**

Upon receipt of a signed AAP2 (Denial Request) from PAS take the following steps:

1. Retrieve the physical case.
2. Complete the NA 791 for denial and use the reason stated on the signed AAP2.
   1. One (1) copy is to be filed in the physical case.
   2. Two (2) copies are sent to the adoptive parents.
3. Submit a Denial Request AAP 2, Denial NA 791 and Physical Case to the AAP Reassessment ES for review and approval of the NA 791.
4. Document actions taken in the LRS Journal

**AAP Reassessment ES Responsibilities**

* 1. Review the Denial NA 791

1. If the Denial NA 791 is inaccurate or incomplete, return to AAP Reassessment EW for corrective measures.
2. Upon confirmation of corrective measures, initial the NA 791 and file in the physical case.
3. If the Denial NA 791 is accurate and complete, initial it and return it to the AAP Reassessment EW to mail to the adoptive parent(s).
   1. Document actions taken in the LRS Journal.

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**Discontinued Adoptions**

Adoptive cases may be discontinued due to various reasons, such as:

* Death of child
* Death of adoptive parent
* Adoptive parent no longer supporting the child
* Adoptive parent no longer legally responsible for child

**AAP Reassessment EW Responsibilities**

1. Review the AAP2 from PAS.
2. End Date the AAP Summary page and the AAP Placement page in LRS.
3. Run and Accept EDBC as fail to discontinue case.
   1. Complete the NA 791 terminating AAP Benefits.
4. One (1) copy is to be filed in the physical case.
5. Two (2) copies are sent to adoptive parents.
6. Complete the CEC Referral.
7. Submit Physical Case to the AAP Reassessment ES for review and approval
8. Document actions taken in the LRS Journal

**AAP Reassessment ES Responsibilities**

* 1. Review the physical case and the case in LRS to verify the completion of all pages.

1. If inaccurate or incomplete, return the physical case to the AAP Reassessment EW for corrective measures.
2. Upon confirmation of corrective measures, initial the NA 791 and file it in the Physical Case.
3. If the case is accurate and complete, initial the NA 791 return it with the physical case to the AAP Reassessment EW to mail two (2) copies to the adoptive parent(s) and file one (1) copy in the physical case.
   1. Authorize EDBC.
   2. Document actions taken in the LRS Journal.

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**Medi-Cal Benefits**

**AAP Reassessment EW Responsibilities**

1. Review the Medi-Cal information. If there is an open “60” Aid Code no action is needed.

* A “60” aid code would indicate that the child is in receipt of SSI/SSP and the Department does not have the authority to override information on this type of Medi-Cal case. There is no need to request Medi-Cal for children in receipt of SSI, since the child is already receiving SSI-related Medi-Cal benefits through the SSA.
  1. If the MEDS secondary screen shows active AAP Medi-Cal a MEDS referral must be submitted to discontinue the AAP Medi-Cal.

1. If Medi-Cal printouts reflect an open CalWorks case and Medi-Cal is active on the CalWORKs case ensure that AAP Medi-Cal aid codes are active on the secondary screens (Q1, Q2, or Q3).
2. If the child is in a Pre-Paid Health plan and the adoptive parent is requesting to disenroll the child complete a disenrollment referral and submit to the centralized Medi-Cal unit for processing.
3. With any requested change on the child’s LRS case, ensure that the aid code in MEDS is consistent with the aid code in LRS.
   1. If Medi-Cal has a different aid code, submit a referral to the Medi-Cal Section for review and to take corrective measures.
4. Document actions taken in the LRS Journal.

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**[Request for Interstate Compact On Adoption and Medical Assistance (ICAMA)](http://aaicama.org/cms/)**

**AAP Reassessment EW Responsibilities**

1. Upon receipt of an out of state address change documents from the adoptive parents, complete the ICAMA request to initiate the Medicaid out of state.
2. If the Social Security (SS) number is not available, contact the adoptive parent to request the SS number to activate Medi-Cal until ICAMA can be processed.
3. Complete the [ICAMA Form 7.01 California Notice of Medicaid Eligibility/Case Activation](https://aaicama.org/wp-content/uploads/2021/08/ICAMA-Form-7.01-CA-NY-2021.docx).
4. Email/Fax a copy to the Deputy Compact Administrator for the State of California (in Sacramento) and a copy to the Interstate Compact Administrator in the state the child is residing in along with the copy of AD 4320 (Consult with the Interstate Compact Directory for this information).
5. A copy of the ICAMA Form 7.01 California, [ICAMA Form 7.02a Letter to Families](https://aaicama.org/wp-content/uploads/2021/08/ICAMA-Form-7.02a-Ltr-to-Families-2021.docx), and [ICAMA Form 7.02b Information for Families](https://aaicama.org/wp-content/uploads/2021/08/ICAMA-Form-7.02b-Info-for-Families-2021.docx) is mailed to the Adoptive Parent(s).
6. File the original documents in the physical case.
7. Review MEDS the next day to ensure the accuracy of the address change, and refer change to Medical Unit. Submit a referral to the Medi-Cal section to update the MEDS address and eligibility status for the Out-of-State address since the information does not interface from LRS.
8. For changes to an existing ICAMA case, complete the ICAMA Information Exchange form (ICAMA Form 7.5), and send a copy to the Deputy Compact Administrator for the State of California (Sacramento), the Interstate Compact Administrator in the state where the child is residing,
9. and adoptive parents.
10. File copy in the physical case.
11. Document actions taken in the LRS Journal.

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**Reassessment**

**AAP Reassessment EW Responsibilities**

1. Ninety (90) days prior to the reassessment month, print the listing of reassessments due from the LRS Workload Inventory.
   1. For Regional Center and Dual Agency (Early Start Intervention) cases only: At the time of the first reassessment following the finalization of adoption, or the first reassessment after approval of the Regional Center rate.
2. If the child is paid the Dual Agency/Early Start P1 rate, the case must be flagged as this rate ends when the child turns three (3) year of age. The projected end date of the termination of the Early Start rate will be reflected on the LRS work load inventory. The effective date of the new rate is the 1st of the month following the month the child turns three (3) years of age.
3. If the child is receiving an F1 rate it will continue until a new rate assessment is completed and an AAP 2 is received.
4. Send a notification letter, to the PAS Unit, advising them that a reassessment is due for the child.
   * + Early Start Intervention cases (i.e. children under three (3) years of age): There may be a decrease in the rate to a basic rate once the child turns three (3), or the rate may be increased due to a [Regional Center](http://lacdcfs.org/Policy/Hndbook%20FCE/E060/E0600570v0812.doc) evaluation.
5. For cases with an adoption agreement signed prior to 2010 and receiving a Specialized Care Increment (SCI) rate only, review the child’s age as there may be a decrease in the child’s AAP with a change in age (“D” or “F” rates).
   * A reminder may have been set up either at the time of the case intake or if there has been a rate change established after the case was referred to the Reassessment Unit.
   1. If applicable, send an email notification to the PAS unit that continuation of the child’s SCI rate must be renegotiated.
6. For youth aging out of AAP at age eighteen (18):
7. To extend the youth’s aid up to twenty-one (21) years of age, complete the following requirements: [E050-0565, Extended Adoption Assistance Program (AAP) Beyond the Age of 18.](http://lacdcfs.org/Policy/Hndbook%20FCE/E050/E0500565v1012.doc)
8. Sixty (60) to seventy (70) days prior to the youth turning age 18, take the following actions:
   1. Complete the Notice of Action (NA 791) advising the Adoptive Parent that AAP will terminate the first of the month following the month the youth turns 18 or 21 years of age.

One (1) copy is to be filed in the physical case.

Two (2) copies are sent to adoptive parents.

* 1. Submit to the Reassessment ES for review.
  2. Document actions taken in the LRS Journal.

**AAP Reassessment ES Responsibilities**

1. For youth aging out of the AAP, review the NA 791 and LRS Journal.
   1. If incomplete or inaccurate, return to the Reassessment EW for corrective measures.
   2. Upon confirmation of corrective measures, approve NA 791 and return to the Reassessment EW to send document to adoptive parent(s).
   3. If accurate, return the case to the Reassessment EW to send the NA 791 to adoptive parent(s).

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**Processing Reassessment Cases**

**AAP Reassessment EW Responsibilities**

1. Complete and mail the AAP 3 to the adoptive parent(s) ninety (90) days prior to reassessment for all cases except when youth is eighteen (18) or twenty-one (21) years of age.
   * + 1. If the AAP 3 is not returned sixty (60) days prior to reassessment, send a second copy.
       2. If the AAP3 is not returned, the AAP benefits must continue with the same rate reflected in the last AAP agreement and the AAP2.
2. Upon receipt of the AAP3, review the form for requested changes. If any changes are requested, forward a copy of the AAP 3 to the PAS and monitor to ensure the requested changes are addressed.
3. Verify that the following information is accurate and up to date in LRS:

* All data on Issuance History page
* Contact page
* Individual Demographics page
* AAP Summary page
* AAP Placement page

1. Add the new Agreement to the AAP Placement Page to reflect the amended reassessment period.
2. Run the EDBC for the following month as “RE”.
3. Review the AAP EDBC Summary page to ensure the aid code, schedule level and rate amount are accurate prior to accepting it.
4. Complete the following forms:
   * AAP Review Sheet
   * NA 791
5. Print and review the Medi-Cal documents for the following information:
6. Ongoing Medi-Cal eligibility if the adoptive parent(s) did not request to waive the Medi-Cal benefits.
7. Accurate aid code.
8. Death indicator on MEDS.
9. If the MEDS printout reflects a date of death for the child/youth or an e-mail is received from the Medi-Cal section to verify the child’s death, review the YODA to obtain the Death certificate and notify the PAS via e-mail to submit AAP 2 to terminate AAP benefits.
10. If unable to verify the death information on YODA notify the PAS via e-mail to contact the adoptive parent(s), verify information, and submit AAP 2 to terminate AAP benefits.
11. If the death of the adopted child/youth is not confirmed, submit a Medi-Cal referral to the Centralized Medi-Cal unit to update the MEDS and remove the death date.
12. Once AAP 2 is received from PAS update LRS, run EDBC, and discontinue AAP within forty-eight (48) hours.
13. Print the appropriate rate chart based on the CNI increase.
14. File all forms in the physical case.
15. Submit the physical case to the Reassessment ES for review and approval.
16. Document actions taken in the LRS Journal.

**AAP Reassessment ES Responsibilities**

1. Review the LRS Issuance History page, Contact page, Individual Demographics page, AAP Summary page, and AAP Placement page.
2. If incomplete or inaccurate, reject the EDBC Results.
3. If accurate and complete, authorize EDBC.
4. Review the physical case.
5. If accurate and complete, approve the review sheet in the physical case and return to the EW to file.
6. If incomplete or inaccurate, return to the EW for corrective measures.
7. Approve the review sheet in the physical case upon receipt of corrective measures and approve the EDBC.
8. Document actions taken in the LRS Journal

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**Discontinue Case on LRS Due to Age (18 or 21)**

**AAP Reassessment EW Responsibilities**

1. End date the LRS AAP Summary page and AAP Placement page.
2. Run and accept the EDBC as fail to discontinue the case.
3. Complete and submit the CEC Referral to the CEC Unit.
4. Submit the physical case to the Reassessment ES for review and approval.
5. Upon receipt of the approved case from the Reassessment ES, refer the case to be sent to storage.
   * For youth who are eighteen (18) years of age, physical cases are to be kept in the EW’s file cabinet for six (6) months prior to being sent to storage.
6. Document actions taken in the LRS Journal.

**AAP Reassessment ES Responsibilities**

* 1. Review the physical case and LRS to check if all pages are complete and accurate.
     + 1. If information is accurate and complete, authorize the EDBC.
       2. If incomplete or inaccurate, return to the Reassessment EW for corrective measures.
       3. Upon receipt of corrective measures authorize the EDBD.
  2. Return the physical case to the assigned AAP Reassessment EW.
  3. Document actions taken in the LRS Journal.

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APPROVALS

**AAP Reassessment Eligibility Supervisor**

* Lift Vendor Suspension
* Payee Name Change
* Reassessment Cases
* Review Sheet from Physical Case
* Eligibility Determination and Benefit Calculation (EDBC)

HELPFUL LINKS

**Attachments**

[AAICAMA Resource - Medicaid: COBRA Reciprocity Interstate, Non-Title IV-E Adoption Assistance Chart](https://aaicama.org/wp-content/uploads/2021/09/AAICAMA-Resource-Medicaid-AA-Non-Title-IV-E-Final-9.7.2021.pdf)

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**Forms**

LA Kids

[AAP 2](http://www.cdss.ca.gov/Portals/9/FMUForms/A-D/AAP2.pdf?ver=2018-09-04-145453-780), Payment Instructions Adoptions Assistance Program

[AAP 3](http://www.cdss.ca.gov/Portals/9/FMUForms/A-D/AAP3.pdf?ver=2018-01-29-141059-610), Reassessment Information Adoption Assistance Program

[AD 4320](http://www.cdss.ca.gov/Portals/9/FMUForms/A-D/AD4320.pdf?ver=2018-10-19-163412-410), Adoption Assistance Agreement

[ICAMA Form 7.01](https://aaicama.org/wp-content/uploads/2021/08/ICAMA-Form-7.01-CA-NY-2021.docx), California – Notice of Medicaid Eligibility/Case Activation

[ICAMA Form 7.02a](https://aaicama.org/wp-content/uploads/2021/08/ICAMA-Form-7.02a-Ltr-to-Families-2021.docx), Letter to Families

[ICAMA Form 7.02b,](https://aaicama.org/wp-content/uploads/2021/08/ICAMA-Form-7.02b-Info-for-Families-2021.docx) Information for Families

[ICAMA Form 7.5](https://aaicama.org/wp-content/uploads/2021/08/ICAMA-Form-7.5-Info-Exchange-2021.doc), Information Exchange

[NA 791](http://lakids.dcfs.lacounty.gov/DCFS/forms/documents/Eligibility/NOANoticeofActionAdoptions.pdf), Notice of Action AAP - Approval/Denial/Change

[SOC 835](http://www.cdss.ca.gov/cdssweb/entres/forms/English/SOC835.pdf), Supplement to the Dual Agency Rate Multiple Questionnaire Worksheet

[SOC 836](http://www.cdss.ca.gov/cdssweb/entres/forms/English/SOC836.pdf), Supplement to the Rate Eligibility Form

[SOC 837](http://www.cdss.ca.gov/cdssweb/entres/forms/English/SOC837.pdf), Supplement to the Rate Questionnaire

Hard Copy

DCFS 26-1, Task Reminder

Referenced Policy Guides

[FYI 01-46](https://pubftp.dcfs.lacounty.gov/Policy/FYI/2001/01-46%20fyi.doc), Birth Parent Information Regarding Foster Care Payments or Adoption

Assistance Program Payments for his or her Biological Child

[FYI 07-02](https://pubftp.dcfs.lacounty.gov/Policy/FYI/2007/FYI0702FFAAdoption.doc), Informing the Foster Family Agency (FFA) of Adoptive Placement

[FYI 07-05](https://pubftp.dcfs.lacounty.gov/Policy/FYI/2007/FYI0705RefferalonAdopedkidst.doc), CWS/CMS Procedures for Referrals on Previously Adopted Children

[FYI 09-06](https://pubftp.dcfs.lacounty.gov/Policy/FYI/2009/FYI0906AAPDocuments.doc), The Correct Completion of AAP Documents

[FYI 09-32](https://pubftp.dcfs.lacounty.gov/Policy/FYI/2009/FYI0932ProvideBirthCertificate.doc), Providing a Birth Certificate to Youth and Legal Guardians

[FYI 10-19](https://pubftp.dcfs.lacounty.gov/Policy/FYI/2010/FYI1019BirthCertificateRequests.rtf), Requesting a Child’s Birth Certificate from the State

**Statutes**

[All County Information Notice (ACIN) I-44-16](https://www.cdss.ca.gov/Portals/9/ACIN/2016/I-44_16.pdf?ver=2019-06-24-135754-463), Adoption Assistance Program (AAP) Monitoring Update

[ACIN I-47-05](https://www.cdss.ca.gov/lettersnotices/entres/getinfo/acin05/pdf/I-47_05.pdf), Unavailability of Verifying Official Documents for Adoption

[ACIN I-82-16](https://www.cdss.ca.gov/lettersnotices/entres/getinfo/acin/2016/i-82_16.pdf), Adoption Assistance Program (AAP) Eligibility

[All County Letter (ACL) 02-02](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl02/pdf/02-02.pdf), Changes in Adoption Assistance Program Regulations

[ACL 02-56](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl02/pdf/02-56.pdf), Dolores Yarbrough v. Rita Saenz and California Department of Social Services

[ACL 03-60](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl03/pdf/03-60.pdf), Regional Center Consumers

[ACL 07-14E](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl07/pdf/07-14E.pdf), Errata – Correction to All County Letter (ACL) No. 07-14 Changes to Title IV-E Foster Care and Adoption Assistance Program (AA) Activities that are eligible for Federal Financial Participation (FF) as the Result of the Deficit Reduction Act (DRA) of 2005.

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[ACL 07-14](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl07/pdf/07-14.pdf), Changes to Title IV-E Foster Care and Adoption Assistance Program (AAP) Activities that are Eligible for Federal Financial Participation (FFP) as the Result of the Deficit Reduction Act (DRA) of 2005

[ACL 08-01](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl08/08-01.pdf), Aid to Families with Dependent Children-Foster Care, Kinship Guardianship Assistance Payment Program and Adoption Assistance Program Rates

[ACL 08-17](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl08/08-17.pdf), Dual Agency Care Rates for Children with Developmental Disabilities Who Receive Aid to Families with Dependent Children-Foster Care or Adoption Assistance Program Benefits

[ACL 08-40](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl08/08-40.pdf), Private Adoption Agency Reimbursement Program (PAARP) Funding Increase Claiming Guidelines

[ACL 08-49](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl08/08-49.pdf), Adoption Provisions of the Adam Walsh Child Protection and Safety Act of 2006

[ACL 08-49E](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl08/08-49E.pdf), Errata – Correction to All County Letter (ACL) 08-49 (Adoption Provisions of the Adam Walsh Child Protection and Safety Act of 2006)

[ACL 08-54](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl08/08-54.pdf), Instructions Regarding the Supplement to the Rate Paid on Behalf of a Dual Agency Child

[ACL 09-10](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2009/09-10.pdf), Hague Convention on Intercountry Adoption (HCIA); Intercountry Adoption Act of 1000 (IAA); Title 22 Code of Federal regulations (CFR) Parts 96, 97, 98, 99; Senate Bill (SB) 703 (Chapter 583, Statutes of 2007)

[ACL 09-15](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2009/09-15.pdf), Implementation of Assembly Bill (AB) 1512 (Torrico, Chapter 467, Statutes of 2007); Clarification and Instructions for Disenrollment of Children in Foster Care from the County Organized Health System and Medi-Cal Change of Address Procedures for Children in Foster Care and Adoption Assistance Programs

[ACL 09-28](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2009/09-28.pdf), Indian Child Welfare Act and Adoptions – Forms, Processes, and Standards

[ACL 09-45](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2009/09-45.pdf), Aid to Families with Dependent Children-Foster Care (AFDC-FC), Kinship

Guardianship Assistance Payment Program and Adoption Assistance Program

[ACL 09-45E](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2009/09-45E.pdf), Errata - Aid to Families with Dependent Children-Foster Care (AFDC-FC), Kinship Guardianship Assistance Payment Program and Adoption Assistance Program

[ACL 09-51](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2009/09-51.pdf), California’s Adoption Assistance Program and Title IV-E Federal Mandates

[ACL 09-67](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2009/09-67.pdf), Implementation of the Re Adoption Provisions for Intercountry Adoptions

[ACL 10-08](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2010/10-08.pdf), Adoption Assistance Program

[ACL 10-16](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2010/10-16.pdf), Dual Agency Rates: Answers to Frequently Asked Questions

[ACL 11-23](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2011/11-23.pdf), Adoption Case Records Retention

[ACL 11-69](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2011/11-69.pdf), Extension of Foster Care Beyond Age 18: Part One

[ACL 11-74](http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2011/11-74.pdf), Adoption Assistance Program Rates

[ACL 16-38](http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2016/16-38.pdf), Adoption Assistance Program (AAP): Children Relinquished to A Private Adoption Agency.

[ACL 16-79](https://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2016/16-79.pdf), Information About the Continuum of Care Reform (CCR) Home-Based Family Care (HBFC) and Short-Term Residential Therapeutic Program (STRTP) Rates Structure and Conversion Process from the Old Rate Structure to the New Rate Structure.

[ACL 18-122](http://www.cdss.ca.gov/Portals/9/ACL/2018/18-122.pdf?ver=2018-10-19-091241-383), Adoption Assistance Program (AAP) Eligibility

[ACL 19-58](https://www.cdss.ca.gov/Portals/9/ACL/2019/19-58.pdf), Adoption Assistance Program (AAP) Rates

[California Department of Social Services (CDSS) Adoption (AD) Regulations Title 22](https://www.cdss.ca.gov/inforesources/letters-regulations/legislation-and-regulations/adoptions-regulations) - Adoption Program Regulations

[CDSS Child Welfare Services (CWS), Chapter 31-400](https://www.cdss.ca.gov/Portals/9/Regs/cws3.pdf?ver=2019-01-29-130851-340) - Placement

[CDSS Eligibility Assistance Standards (EAS) Chapter 45-400-800](https://www.cdss.ca.gov/inforesources/Rules-Regulations/Legislation-and-Regulations/Foster-Care-Regulations) - EA-ANEC Program & Adoptions Assistance Program (AAP)

[CDSS EAS Chapter 46-100](https://www.cdss.ca.gov/Portals/9/Regs/13EASa.pdf) - State Supplementary Payment (SSP) Program

[Welfare and Institutions Code (WIC) Section 16115-16125](https://leginfo.legislature.ca.gov/faces/codes_displayText.xhtml?lawCode=WIC&division=9.&title=&part=4.&chapter=2.1.&article=) – Adoptions Assistance Program

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