

**CALIFORNIA DEPARTMENT OF CHILD SUPPORT SERVICES**

P.O. Box 419064, Rancho Cordova, CA 95741-9064

Reason for this Transmittal

- State Law or Regulation Change
- Federal Law or Regulation Change
- Court Order or Settlement Change
- Clarification requested by One or More Counties
- Initiated by DCSS

October 18, 2010

LCSA LETTER: 10-16

ALL IV-D DIRECTORS

SUBJECT: STATE FISCAL YEAR 2010/11 ADDITIONAL FEDERAL FINANCIAL PARTICIPATION EXPENDITURE SURVEY

The State Fiscal Year 2010/11 budget includes authority for \$26.4 million Federal Financial Participation (FFP), based on the understanding that the Local Child Support Agencies (LCSAs) will be required to provide the 34 percent match. An LCSA may elect to use County General Funds dollars and/or remaining health insurance incentive funds to mitigate program reductions during the 2010/11 fiscal year.

In order to proceed with this process, the Department of Child Support Services (DCSS) is requesting that each LCSA complete the attached survey by November 12, 2010. The information provided in this survey will enable DCSS to identify and plan for additional FFP expenditures.

Please be reminded that the child support program is governed by federal and state law, regulation, and policy directive which apply to any funds spent in operation of the child support program. The use of county funds and/or health insurance incentive funds does not relieve your agency from abiding by the respective requirements that currently govern the expenditure of federal and state monies.

**All LCSAs must return a survey response to DCSS, by November 12, 2010.**

Please refer to Attachment I for instructions on how to complete the survey. An electronic version of the survey (Attachment II), which includes formulas, is available upon request. Please **email** Donna Kruger at **Donna.Kruger@dcss.ca.gov** or your LCSA Budget analyst if you are interested in receiving this version.

LCSA Letter: 10-16  
October 18, 2010  
Page 2

Please send the completed survey, **signed by the LCSA director**, to:

California Department of Child Support Services  
LCSA Budget Section  
**Attn:** Donna Kruger  
P.O. Box 419064, M.S. 621  
Rancho Cordova, CA 95741-9064

DCSS would like to thank you for your assistance in this process. If you have any questions or concerns, please contact Donna Kruger at (916) 464-5015 or your LCSA Budget analyst.

Sincerely,

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MARK BECKLEY  
Deputy Director  
Administrative Services Division

Attachments (2)

cc: David Oppenheim, Child Support Directors Association

## **Instructions for the Completion of Attachment II**

For LCSAs that do not intend to use county general funds and/or health insurance incentive funds to match Title IV-D funds in the child support program in SFY 2010/11, check the box stating “No” and stop. Remaining LCSAs will check the “Yes” box and complete lines A through E.

- **This is for Non-EDP administrative expenditures only.**
- On line A, please report the SFY 2010/11 Non-EDP Final Administrative Allocation for your LCSA.
- On line B, please report the Non-EDP expenditures anticipated for SFY 2010/11.
- On Line C, please report the difference between your Projected SFY 2010/11 Expenditures (line B) and SFY 2010/11 Non-EDP Final Administrative Allocation (line A). The electronic version automatically calculates the difference between lines B and A. A positive amount would indicate your anticipated expenditures are larger than your Administrative Allocation.
- On line D, please report the result of multiplying the amount on line C by 66 percent. This represents the additional FFP requested by your LCSA in SFY 2010/11. The electronic version automatically calculates the FFP.
- On line E, 1, please report the result of subtracting the amount on line D from line C. This represents the county general funds and/or incentive funds to match Title IV-D funds projected to be expended by your LCSA in SFY 2010/11. The electronic version automatically calculates the non federal share.
- On line E, 2, please report the 34 percent matching share of line E, 1 that will be paid for with county general funds.
- On line E, 3, please report the amount of line E, 1 that will be paid for with health insurance incentives.
- On line E, 4, please report the amount of line E, 1 that will be paid for with performance incentives.
- Line E, 2 plus line E, 3, plus line E, 4 must equal line E, 1.

<b>LCSA Name</b>	
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**SFY 2010/11 Non-EDP Child Support Administrative Expenditure Survey**

Do you intend to use county general funds or health insurance incentive funds?      YES            NO        
 If yes, please complete Lines A through E.

<b>Line A</b>	<b>SFY 2010/11 Final Non-EDP Administrative Allocation.</b>	
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<b>Line B</b>	<b>Projected SFY 2010/11 Non-EDP Administrative Expenditures.</b> <b>DO NOT INCLUDE EDP EXPENDITURES.</b>	
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<b>Line C</b>	<b>Difference between Lines A and B. (Subtract Line A from Line B.)</b>	-
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<b>Line D</b>	<b>Federal Share (Line C multiplied by 66%).</b>	-
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<b>Line E</b>	<b>1. Non Federal Share (Line C Less Line D).</b>  <b>2. Amount of Line 1 to be paid for with CGF.</b> <b>3. Amount of Line 1 to be paid for with health insurance incentives.</b> <b>4. Amount of Line 1 to be paid for with performance incentives</b>  <u>Line E2 plus Line E3 plus Line E4 must equal Line E1.</u>	-
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**Return no later than November 12, 2010 to:**

**California Department of Child Support Services  
 LCSA Budget Section  
 Attn.: Donna Kruger  
 P.O. Box 419064, M.S. 621  
 Rancho Cordova, CA 95741-9064**

<b>Signature of the LCSA Director:</b>	<b>Date:</b>