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November 21, 2011

CHDP Program Letter No: 11-14

TO: ALL CHILD HEALTH AND DISABILITY PREVENTION (CHDP) PROGRAM DIRECTORS, DEPUTY DIRECTORS, STATE CHILDREN'S MEDICAL SERVICES (CMS) STAFF AND DEPENDENT AND INDEPENDENT COUNTY OPERATIONS STAFF

SUBJECT: FISCAL YEAR (FY) 2011-2012 ALLOCATIONS FOR THE HEALTH CARE PROGRAM FOR CHILDREN IN FOSTER CARE (HCPCFC)

The purpose of this CHDP Program Letter is to provide CHDP local programs with their HCPCFC FY 2011-2012 allocations, which is the state share of the Medi-Cal Title XIX funds. The State General funds are to be matched with Federal Title XIX funds to supplement the HCPCFC Administrative Budget and are based on the Federal Financial Participation (FFP) guidelines found in the CMS Plan and Fiscal Guidelines (PFG). The allocation is based on county caseload data obtained from the Department of Social Services as of May, 2011. This caseload distribution is then applied toward the total State dollars available to determine the county allocation. See the enclosed funding allocation table.

Each local CHDP program is to carry out the HCPCFC as set forth in the CMS PFG. The primary responsibility of the HCPCFC Public Health Nurses (PHNs) remains that of administrative case consultation. By providing these services the PHN administratively coordinates the health care needs of children in foster care, including their developmental, dental and mental health needs. The PHN supports adherence to the health assessment periodicity schedule specified in the CHDP Health Assessment Guidelines, ensures that identified health needs are monitored, and supports continuity of health care services. The PHN, Social Worker, and/or clerical support update the CWS/CMS Health and Education Passport, including prescribed medications. The PHN/Social Worker share medical information where appropriate. The PHN consults with physicians and other medical and non-medical professionals regarding the health and well-being of children in foster care and in coordinating appropriate medical treatment.

