Child Specific Letter (CSL) for Placement and Funding

NOTE: Our case management system is moving from Child Welfare Services/Case Management System (CWS/CMS) to Child Welfare Services-California Automated Response and Engagement System (CWS-CARES). This policy includes language, forms/templates, and resources that will be reviewed and updated as we transition into CWS-CARES.

(Revised 10/30/26)

Related Policies
Forms
Background
Pre-Placement
Steps to Obtain Director Approval for Placement
Steps to Complete and Process the CSL (04-404)
Confirmation of Facility Rates and Program Numbers
Alignment with SET

Related Policies

Additional information can be found in the following policies:

- County Funds and 04-130
- Placement Payment Procedures
- Approved Facility List
- Presumptive Transfer

Forms

This policy references the following forms:

- 04-404 Child Specific Letter
- 04-130 Authorization for County Payment (CWS/CMS Template)
- SOC 158A Foster Child's Data Record and AFDC-FC Certification

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Background

A Child Specific Letter (CSL) is a document prepared on a case-by-case basis to request funding for a placement in a non-contracted or out-of-county facility. AFDC-FC payments may be made for children placed in the following settings only when a CSL (04-404) is received and authorized by the CFWB Manager or CFWB Deputy Director:

- Out-of-county Short-Term Residential Therapeutic Program (STRTP)
- Out-of-county Foster Family Agency (FFA)
- Small Family Home (SFH)
- Community Treatment Facility (CTF)
- Out-of-county Transitional Housing Program, Non-minor Dependents (THP-NMD)
    - THP + aftercare does not require a CSL

Background (cont.)

- In-county, non-contracted facilities, not listed on the Approved Facility List, that is distributed monthly by the Institutions and Evaluations Unit (IEU)
- FFA homes that are on the Approved Facility List when the child is placed in a home outside the county
- Out-of-state STRTPs, FFAs, CTFs

Pre-Placement

Prior to placing a youth in any out-of-county or non-contracted facility, the SW must obtain the facility's active license, Certificate of Liability Insurance, as well as the rate agreement, and submit them to the CFWB Director for approval. Once the CFWB Director approves the placement, a CSL (04-404) is processed to allow AFDC-FC funds to be paid to the placement. See **Steps to Obtain Director Approval** for more information.

The Approved Facility List is updated and distributed monthly by the Institutions and Evaluations Unit. CFWB Director pre-placement approval is not required for facilities that are listed on the Approved Facility List, as they are currently contracted with CFWB.

For all home-based out-of-county placements, Specialty Mental Health Services (SMHS) are subject to the Presumptive Transfer process. If the child/youth/NMD is placed in an STRTP or CTF, a Single Case Agreement (SCA) is needed to pay for SMHS. See Presumptive Transfer for further information about the SCA process.

Steps to Obtain Director Approval for Placement

The following steps outline how to obtain approval **prior to placement** in any out-of-county or non-contracted STRTP, FFA, SFH, CTF, or THP-NMD:

Step	Who	Action

1	Placement Unit SW	• Obtain the following information and copies from the placement/facility via e-mail/fax:
		  ○ Facility license
		  ○ Certificate of Liability Insurance
		  ○ Authorized rate letter or placement agreement (if different than the AFDC State rate)
		• License must be verified prior to placement. To verify the license, check CDSS website: Social Services - Community Care Facility search
		• Send copies of the above to Primary Protective Services Supervisor (PSS) and Primary Protective Services Program Manager (PSPM) with a Cc to Primary SW

Steps to Obtain Director Approval for Placement (cont.)

Step	Who	Action

2	Primary PSPM	• Send the following to the CFWB Director to request approval for placement:
		  o Facility license
		  o Certificate of Liability Insurance
		  o Authorized rate letter or placement agreement (if different than the AFDC State rate)
		• Copy Placement Unit SW and Placement Unit PSS in the e-mail.
		
		NOTE: When out-of-county or non-contracted THP-NMD providers are utilized on an ongoing basis, the provider's license and Certificate of Liability Insurance must be reviewed and approved by the CFWB Director every twelve months, or upon expiration of the Certificate of Liability, whichever occurs first. Approval shall not extend beyond the Certificate of Liability Insurance expiration date. Placement PSS or Designated CFWB Staff shall ensure the official list of approved THP-NMD programs remains current.

3	CFWB Director	Review the following documents to ensure placement can be approved: • Facility license • Certificate of Liability Insurance • Authorized rate letter or placement agreement (if different than the AFDC State rate) Provide an e-mail to the primary PSS and PSPM if the placement is approved. If the placement is **not approved,** the placement cannot occur and the CSL is not required.
4	Primary PSS	• Notify Placement Unit SW/PSS via email of Director Approval. • Forward Director Approval email to Placement Unit SW and PSS.

Steps to Complete and Process the CSL (04-404)

Once the placement has been approved and the child is placed, the CSL (04-404) will need to be processed. The CSL (04-404) can be initiated prior to placement; however, the CSL (04-404) is not signed until after the placement occurs.

The following steps outline how to process a CSL (04-404), once the placement has been approved:

Step	Who	Action

1	Placement Unit SW	• Placement Unit SW or Designated CFWB Staff will begin the CSL (04-404) process prior to placing a child in a non-contracted facility or out-of-county facility.
		• Fill out "To be completed by Placement Social Worker or Designated CFWB Staff" section of the CSL (04-404).
		• Once that section is completed, send the CSL (04-404), to Placement Unit PSS with the following attachments:
		  ○ Facility license
		  ○ Certificate of Liability Insurance
		  ○ Authorized rate letter or placement agreement (if different than the AFDC State rate)
		  ○ E-mail from Director approving placement

2	Placement Unit PSS or Designated CFWB Staff **NOTE**: For THP placements, Extended Foster Care (EFC) will designate a staff member to complete the CSL.	• Review CSL (04-404) information provided. • Fill out "To be completed by Placement Supervisor or Designated CFWB Staff" section of CSL (04-404). • AFDC funding to be completed using the current foster care rates found in the All County Letter 26-44 • Leave 04-130 Co-Funding blank if not applicable. If co-funding is needed, the funding should be listed on the CSL (04-404) under "04-130 Co-Funding". Co-funding is always needed when the placement rate is greater than the AFDC rates. • List the Program Number, which can be located by following the Confirmation of Facility Rates and Program Numbers below. If still unable to locate, contact FC-Clerical. **NOTE**: There is no Program Number for Small Family Homes.

Steps to Complete and Process the CSL (04-404) (cont.)

Step	Who	Action
2 (cont.)		• Confirm the CSL (04-404) information is accurate and complete. Digitally sign the box titled, "Approved CSL information" on CSL (04-404). • Once minor/youth/NDM is placed, e-mail completed CSL (04-404), to the CFWB Manager of primary SW for approval and signature. • If placement is in a SFH, e-mail completed CSL (04-404) form, to the CFWB Deputy Director (DD) of primary SW for approval and signature.
3	CFWB Manager or CFWB DD	• Review CSL (04-404) and if approved, digitally sign and date the CSL form in the box titled, "Authorized By". • E-mail the signed CSL (04-404) back to the Placement Unit PSS or Designated CFWB Staff (who approved the CSL information).
4	Placement Unit PSS or Designated CFWB Staff	• E-mail the primary worker's assigned Registrar the signed completed CSL (04-404), and Cc the following Staff in that email: o Primary SW o Primary PSS o Placement SW o CalSAWS clerk o Institutions and Evaluations Unit (IEU) If applicable, include in the e-mail that there are 04-130 funds that the primary SW is responsible for requesting. • Save signed CSL (04-404) and attachments to the S drive CSL folder. The following attachments must be saved on the S drive: o Facility license o Certificate of Liability Insurance o Authorized rate letter or placement agreement (if different than the AFDC State rate) o E-mail from CFWB Director approving placement • Log the CSL in the CSL tracking log on the S drive CSL folder.

Steps to Complete and Process the CSL (04-404) (cont.)

Step	Who	Action
5	Registrar	• Enter placement into CWS/CMS • Process SOC158A • Send to Human Services Specialist (HSS)
6	HSS	• Confirm Provider Table information with CalSAWS clerk. CalSAWS clerk will verify that the initial license, program name, program number, address, and rate matches the Provider Table. If not, advise the PSS that submitted the CSL (04-404), of discrepancies so that corrections can be made. • Enter placement information into CalSAWS.
7	Primary SW	• If 04-130 co-funding is required: 1. Submit a monthly Authorization for County Payment (04-130) for any funding above the AFDC-FC rate. 2. Ensure the facility provides an invoice for any additional fees. 3. Send the signed/approved 04-130 and invoices to the CFWB Fiscal Admin Analyst (W473). Refer to County Funds and 04-130 policy. **NOTE**: The rate must be pro-rated if the child is not in placement the full month.

Confirmation of Facility Rates and Program Numbers

When determining the rate, ADFC-FC funds may only be used for room/board and general mental health services up to the maximum FFA, THP, or STRTP rate. The rate must be monthly, instead of daily. If the facility only provides a daily rate, indicate the monthly rates calculated by 30/31 days. Refer to the Foster Care Rates Table, for current rates listed by facility type.

Confirmation of Facility Rates and Program Numbers (cont.)

You can **look up facility names, billing address, rates, and program numbers** through the following process:

For in-state facilities	Refer to CDSS website 1. Scroll to Foster Care Rates Lists 2. Select the appropriate placement level Facility rates and program numbers may also be located on the Approved Facility List if applicable. If unable to locate the facility rate and program number, request assistance from Foster Care Eligibility.
For out-of-state facilities	Contact the Interstate Compact on the Placement of Children (ICPC) office

Alignment with SET

This policy supports Safety Enhanced Together (SET) Value 3- Helping Children and Youth Achieve Their Full Potential and Develop Lifelong Relationships.