State of California—Health and Human Service Department of Health Care Services

Health Care Program for Children in Foster Care

Certification Statement	County/City:	Fiscal Year:
	Humboldt	2025-26

I certify that the Health Care Program for Children in Foster Care (HCPCFC) will comply with all applicable state and federal and state laws and regulations, including all federal laws and regulations governing recipients of federal funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further certify that the HCPCFC will comply with all rules promulgated by DHCS pursuant to these authorities, including the Integrated Systems of Care Plan and Fiscal Guidelines Manual. I further agree that this HCPCFC may be subject to sanctions or other remedies if this HCPCFC violates any of the above.

Sofia Pereira	Pereira, Sofia Digitally signed by Pereira, Sofia Date: 2025.07.30 08:42:32 -07'00'	
HCPCFC/County Authorized Representative	Signature	Date
Michelle Bushnell		8/19/2025
Local Governing Body Chairperson Name	Signature	Date