

September 4, 1987

E R R A T A

TO: ALL-COUNTY WELFARE DIRECTORS

SUBJECT: CHANGE IN THE DEFINITION OF AN INDIVIDUAL
CONSIDERED SEVERELY IMPAIRED (SI) FOR IN-HOME
SUPPORTIVE SERVICES (IHSS)

REFERENCE: ALL-COUNTY LETTER 87-117

The referenced All-County Letter should be corrected to:

Page 4. 383 "...payment maximum of \$1051..."

On any Notice of Action sent to a recipient, which included message 383, the correct amount of \$1051 will appear.

Page 5. The correct telephone number for Roberta Christensen is
(916) 323-6341.

cc: CWDA