STATE OF CALIFORNIA—HEALTH AND WELFARE AGENCY

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814

July 9, 1987

ALL-COUNTY LETTER NO. 87-95

TO: ALL COUNTY PUBLIC WELFARE DIRECTORS

SUBJECT: THE BUDGET ACT OF 1987/88 COST-OF-LIVING ADJUSTMENTS (COLAS) THAT AFFECT IN-HOME SUPPORTIVE SERVICES (IHSS) BENEFIT LEVELS

This letter provides you with information regarding the revised IHSS benefit levels which will be adjusted to reflect the COLAs in the 1987/88 Budget Act, effective July 1, 1987.

A. Recipient COLAs reflect a 2.6 percent increase. Benefit maximums are changed as follows:

	From	To	
1. Severely Impaired	$1,024	$1,051	(MPP 30-765.11)
2. Non-Severely Impaired	$ 708	$ 726	(MPP 30-765.121)
3. Restaurant Meal Allowance	$ 58	$ 60	(MPP 30-757.134(a)(1))

B. No funds are appropriated for IHSS provider COLAs.

Case Management Information And Payrolling System (CMIPS) Procedures

Procedures will be implemented to automate the changes made due to the COLAs as soon as possible. We expect all automation will be completed by July 15, 1987. CMIPS will automatically adjust cases impacted by the Budget Act. No COLA update should be done manually prior to this automation.

CMIPS automation will occur in the following sequence:

- Restaurant meal allowances
- Scheduled changes in contract and homemaker provider mode hourly service rates effective July 1987
- Unmet need decreases

Each of these steps is discussed below:

A. Restaurant Meal Allowance

1. All eligible recipients will automatically receive an increase in their restaurant meal allowance warrants. For the month of July 1987 only the full increase will be included in the second monthly warrant.

2. A Turnaround Document (TAD) SOC 293 will be generated which will reflect the increase in Fields M2 (Beginning Date) and M4 (Gross Amount).

3. The TAD SOC 293 will have an identifying message on the top which will read:

   "State maximum increase: meal allowance"

4. An automated Notice of Action (NOA) will be generated to the recipient with message number 342:

   "Your Restaurant Meal Allowance is increased due to an increase to the State maximum. MPP 30-757.134."

   This number will be printed in Field R (NOA Message) on the TAD.

5. NOAs will be printed at the printer sites by on-line counties; NOAs for batch counties will be printed by Electronic Data Systems (EDS) and mailed to the recipient and county, as appropriate. All TADs will be printed by EDS and mailed to the county.

B. Scheduled changes in Contract or Homemaker Provider Mode Hourly Service Rates

1. All counties that have scheduled changes in the annual hourly service rate occurring in July 1987 will have computations completed and TAD SOC 293s generated which will reflect changes in Fields K1 or L1 (Mode/Rate/Hours) and M2 (Beginning Date) and M4 (Gross Amount) if in the contract or homemaker provider delivery mode.

2. The TAD SOC 293 will have an identifying message on the top which will read:

   "Hourly rate increase"

3. All TADs will be printed by EDS and mailed to the county.

C. Unmet Need Cases That Are Impacted by Increased Benefit Levels: One Delivery Mode

1. Those cases with an unmet need that are served by only one delivery mode will have services automatically increased and unmet need decreased to reflect correct adjustments of Services Authorized to be Purchased.

2. A TAD SOC 293 will be generated which will reflect the adjustments in Fields K1 (Mode/Rate/Hours), M2 (Beginning Date), M4 (Gross Amount), M5 (Hours), AA-YY (Assessment Grid: Authorized To Be Purchased and Unmet Need columns) and aa 1 through 7 (Monthly Hours Authorized).

3. An automated NOA will be generated to the recipient with message number 382 or 383:

   382 "Your unmet need for IHSS is decreased because the state payment maximum has been increased to $1,051 (or $726). MPP 30-765."

   383 "You no longer have an unmet need for IHSS because the increased state payment maximum of $1,051 (or $726) will cover the cost of your assessed need for service. MPP 30-765."

   This number will be printed in Field R (NOA Message) on the TAD.

4. For all IP served cases with a one recipient/one provider relationship indicated on the SOC 311 Field E3 (# of Prov.) there will be a TAD SOC 311 generated.

5. For all other non one-to-one providers, the SOC 311 must be manually updated with the appropriate entries in Field F4 (Hours) and F6 (Rate). These cases will be identified on an exception listing which will be mailed to each county by the middle of July 1987.

6. NOAs and TADs will be printed at the printer sites by on-line counties. Batch counties will have documents printed by EDS and mailed to the recipient and county, as appropriate.

7. Advance pay recipients will not receive their automatic increase until August 1, 1987. An EDS automated emergency warrant will represent the unmet need decrease (if appropriate) to be paid to their providers for July 1987.

8. These advance pay recipients affected by the new state maximums will be identified by copies of the NOAs and by the July 1987 Monthly Characteristics Listing, columns Pay and Unmet.

9. All IHSS unmet need cases that have had automated adjustments made to their benefit levels will have an indicator ($) printed by the recipient name on the July 1987 Monthly Caseload Listing and Office Caseload Listing.

D. Unmet Need Cases That Are Impacted By Increased Benefit Levels: More Than One Delivery Mode

1. Those cases with an unmet need that are served by more than one delivery mode will be listed on a COLA exception list (as will those other cases that fail to meet the criteria for automation). The social services worker will be responsible for entering the hours of one of the service delivery modes in Field K1 or L1 (Mode/Rate/Hours) and a beginning date in Field ZZ 3 (Beginning Date).

2. A TAD SOC 293 will then be generated which will reflect the adjustments in Field K1 and L1 (Mode/Rate/Hours), M4 (Gross Amount), M5 (Hours), AA-YY (Assessment Grid: Authorized To Be Purchased and Unmet Need column), and aa 1 through 7 (Monthly Hours Authorized).

3. The TAD SOC 293 will have no identifying message on top of the form. The action will be treated as a reassessment change.

4. An automated NOA will be generated to the recipient with message number 382 or 383 and that number will be printed in Field R (NOA Message) on the TAD.

5. For all IP served cases the steps under C4 and C5 will be the same.

6. All TADs and NOAs will be printed at the printer sites by on-line counties; batch counties will have documents printed by EDS and mailed to the recipient and county, as appropriate.

E. Protective Supervision Cases

1. All cases receiving protective supervision services will also be listed on an exception list.

2. Protective supervision cases that may be eligible for additional payment due to increased benefit levels must be changed by the social service worker. Changes should be made to:

   - Field WW (Protective Supervision) through adjustments to "Alternative Resources" so CMIPS can properly compute "Authorized to be Purchased."

   - Field ZZ3 (beginning Date).

3. A TAD SOC 293 will be generated but it will not have a special identifier on the top of the form. The action will be treated as a reassessment change.

4. For all IP served cases the steps as described under C4 and C5 will be the same.

5. An NOA will be generated with message numbers 371 and 375:

   371 "Alternative resources available to you for protective supervision have been reduced. MPP 30-763.3."

   375 "You have been found in need of additional hours of service. MPP 30-763.2."

6. All TADs and NOAs will be printed at the printer sites by on-line counties; batch counties will have documents printed by EDS and mailed to the recipient and county, as appropriate.

F. IHSS Cases With An Overdue Assessment

1. Any case with a TAD SOC 293 Ending Date in Field ZZ4 of June 30, 1987, or earlier, cannot be automated. Those cases will be identified on the COLA exception list. The social service worker must complete a reassessment and enter a new date in Field ZZ4 (Ending Date).

2. CMIPS will then recalculate the case file and generate both a correct TAD and NOA.

3. The TAD SOC 293 will have no identifying message on top of the form. The action will be treated as a reassessment change.

4. An automated NOA will be generated to the recipient with message number 382 or 383 and that number will be printed in the Field R (NOA Message) on the TAD SOC 293.

5. Attached to this All-County Letter is a list of the total number of overdue assessments by county.

G. All Other Cases

1. All other cases of unmet need that cannot be resolved through the procedures listed above must be resolved on a one-to-one basis through consultation with SDSS/EDS.

On the TAD SOC 293 the Field ZZ3 (Beginning Date) will change to July 1, 1987 on all automated documents to reflect the proper effective date of change. This will also be reflected on the segment line M. If other changes are made for authorized periods prior to July 1, 1987, re-enter the effective Beginning Date (Field ZZ3) so segments will be properly updated.

Multiple COLA changes will be reflected on a single TAD. We expect that all TADs and NOAs will be in the counties by mid-July and encourage filing of the documents as soon as possible in your case records. Once you have the exception lists, please initiate appropriate action.

Questions regarding CMIPS procedures should be addressed to Roberta Christensen at (916) 323-6341. Questions regarding program issues should be addressed to your Adult and Family Services Operations Consultant at (916) 445-0623.

LOREN D. SUTER
Deputy Director
Adult and Family Services

Attachment

cc: CWDA

Attachment

JUNE 1987
COUNTY SUMMARY
OVERDUE ASSESSMENT LISTING

COUNTY #	COUNTY NAME	TOTAL	DISTRICT OFFICE
01	*ALAMEDA	137	05
01	"	49	06
01	"	177	08
01	"	4	09
01	"	5	10
TOTAL		*372	
02	ALPINE	1	01
03	AMADOR	3	01
04	BUTTE	16	01
05	CALAVERAS	4	01
06	COLUSA	6	01
07	*CONTRA COSTA	10	01
07	"	1	02
07	"	9	03
07	"	43	04
07	"	8	05
TOTAL		*71	
09	*EL DORADO	1	01
09	"	15	02
TOTAL		*16	
10	FRESNO	164	01
11	GLEN	1	01
12	HUMBOLT	38	01
13	IMPERIAL	29	01
14	INYO	1	01
15	*KERN	3	01
15	"	2	02
15	"	5	06
15	"	1	07
TOTAL		*11	

COUNTY #	COUNTY NAME	TOTAL	DISTRICT OFFICE
16	KINGS	6	01
17	LAKE	23	01
19	LA	38	01
19	"	2	19
19	"	7	24
19	"	8	41
19	"	6	47
19	"	13	69
19	"	1	73
19	"	7	74
19	"	15	75
19	"	2	77
19	"	9	87
TOTAL		108	
21	MARIN	10	01
22	MARIPOSA	18	01
23	*MENDICINO	7	01
23	"	5	02
23	"	5	03
TOTAL		*17	
24	MERCED	34	01
26	MONO	5	01
27	*MONTEREY	3	04
27	"	1	07
27	"	2	08
27	"	2	09
TOTAL		*8	
28	NAPA	4	01

COUNTY #	COUNTY NAME	TOTAL	DISTRICT OFFICE
36	*SAN BERNARDINO	51	01
36	"	14	03
36	"	10	04
36	"	3	06
36	"	10	08
36	"	3	10
36	"	94	14
TOTAL		*185	
37	*SAN DIEGO	10	02
37	"	3	04
37	"	2	05
37	"	3	06
37	"	51	07
TOTAL		*69	
38	SAN FRANCISCO	162	01
39	SAN JOAQUIN	5	01
40	SAN LUIS OBISPO	5	01
41	SAN MATEO	42	01
42	*SANTA BARBARA	1	01
42	"	4	02
TOTAL		*5	
43	SANTA CLARA	140	01
44	SANTA CRUZ	38	01
45	SHASTA	10	01
46	SIERRA	5	01

COUNTY #	COUNTY NAME	TOTAL	DISTRICT OFFICE
29	NEVADA	10	01
30	*ORANGE	10	01
30	"	10	02
30	"	2	03
30	"	4	04
30	"	17	05
TOTAL		*43	
31	PLACER	53	01
32	PLUMAS	2	01
33	*RIVERSIDE	4	10
33	"	2	12
33	"	3	16
33	"	10	17
33	"	1	22
TOTAL		*20	
34	*SACRAMENTO	154	01
34	"	3	02
TOTAL		*157	

COUNTY #	COUNTY NAME	TOTAL	DISTRICT OFFICE
47	*SISKIYOU	6	01
47	"	1	47
TOTAL		*7	
48	SOLANO	53	01
49	SONOMA	14	01
50	STANISLAUS	17	01
51	SUTTER	1	01
54	*TULARE	3	02
54	"	9	03
54	"	1	05
TOTAL		*13	
56	*VENTURA	1	23
56	"	4	93
TOTAL		*5	