

# STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY **DEPARTMENT OF SOCIAL SERVICES**

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GOVERNOR

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August 29, 2014

COUNTY FISCAL LETTER (CFL) NO. 14/15-15

TO: ALL COUNTY WELFARE DIRECTORS

ALL COUNTY FISCAL OFFICERS

ALL COUNTY AUDITOR CONTROLLERS ALL COUNTY REFUGEE COORDINATORS ALL CALWORKS PROGRAM SPECIALISTS

SUBJECT: IN-HOME SUPPORTIVE SERVICES (IHSS) PROVIDER WAGE

REIMBURSEMENTS

REFERENCES: TITLE XIX OF THE SOCIAL SECURITY ACT; ALL COUNTY

LETTER (ACL) No. 07-11, DATED FEBRUARY 7, 2007,

ACL No. 07-46, DATED NOVEMBER 8, 2007; ACL No. 14-40,

DATED SEPTEMBER 1, 2014

The purpose of this CFL is to provide counties with time study instructions regarding a new process developed for reimbursing IHSS providers for incorrect Medi-Cal Share of Cost (SOC) pay warrant deductions when the recipient has not paid the deducted SOC to the IHSS provider. Previously, there was no process for counties to directly pay providers when an incorrect SOC deduction is made. Under the old process identified in ACL No. 07-11 and ACL No. 07-46, the recipient could pay the provider for the erroneous deduction and file a claim for reimbursement. As mentioned in ACL No. 14-40, a new provider reimbursement process has been developed to directly reimburse providers who have had an incorrect Medi-Cal SOC deduction withheld from their pay warrant if they have not been paid by the recipient. The new process will allow providers to contact the county and request payment directly.

Effective with the September 2014 quarter, the following time study codes have been updated to capture activities performed by caseworkers when processing provider reimbursements using the new process:

## **Time Study Instructions**

#### CODE 1034 PCSP/PLUS OPTION- CASE MANAGEMENT

Includes development, implementation, and management of the plan of treatment; assessing service needs for PCSP/Plus Option applicants; explaining, arranging for and

authorizing IHSS services when such activities are HR and provided to Medi-Cal eligible IHSS recipients; referrals to other agencies and programs; referring IHSS PCSP/Plus Option recipients to potential individual providers to assist them in selecting a provider; transporting or accompanying recipients to obtain services related to Medi-Cal personal care services; obtaining a completed doctor's certificate as part of the process of arranging State Plan covered services; outreach activities to inform IHSS Medi-Cal eligible recipients of available services and programs; statistical reporting; voter registration activities; and processing provider grievances; and managing provider reimbursements for incorrect Medi-Cal SOC pay warrant deductions.

## CODE 1042 IHSS - NON-HR/PCSP/PLUS OPTION

This includes IHSS activities not eligible for Title XIX funding. These activities are related to non-PCSP/non-Plus Option cases. This includes time spent explaining IHSS program benefits to applicants/recipients; explaining employee and employer responsibilities; assessing service needs; development, implementation and management of treatment plans; implementation activities for any IHSS court case; processing a claim form and calculating benefits related to a court case ruling; **managing provider reimbursements for incorrect Medi-Cal SOC pay warrant deductions**; data input of claims; preparing reports; participation in case reviews and audits; voter registration activities, appeals, case dictation and statistical reporting.

Counties may begin time studying prospectively from the date of this letter. As a reminder, counties may not time study retroactively. If you have questions regarding this letter, please direct your questions to fiscal.systems@dss.ca.gov.

Sincerely,

## Original Document Signed By

LILIA A. YOUNG, Chief Fiscal Forecasting and Policy Branch