

Breakout Session

In-Home Supportive Services (IHSS) Program and Waiver
Personal Care Services (WPCS)

Denise Miller
Senior Attorney,
Disability Rights California

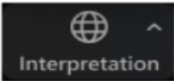
Nicholas Levenhagen
Litigation Counsel,
Disability Rights California

Crystal Padilla
Senior Disability Advocate,
Disability Rights California

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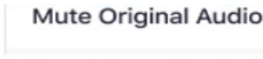
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The In-Home Supportive Services (IHSS) Program and Waiver Personal Care Services (WPCS) 2024

Presented by: Crystal Padilla, Denise Miller, Nicholas Levenhagen

Disclaimer

- The following presentation is meant for education only and does not constitute legal advice or counsel. Your situation may be unique and require careful attention.
- Keep in mind that the information in these slides could become out of date, as the laws and local practices relating to these matters are constantly developing

Today's Topics

In-Home Supportive Services (IHSS) Program

- What is IHSS?
- Who is eligible?
- How to apply for IHSS?
- When is the IHSS application complete?
- What kinds of services does IHSS provide?
- How to appeal and prepare?
- IHSS Program Updates
- Q & A

Waiver Personal Care Services (WPCS)

- What is WPCS?
- Who is eligible?
- How to apply for WPCS?
- What kinds of services does WPCS provide?
- Q & A

What is IHSS?

- Statewide Medi-Cal program for adults and children with disabilities to remain safely in their own homes
- Provides basic services to individuals who cannot safely perform the tasks themselves or need prompting
- An alternative to out-of-home placement
- Administered by each County under the direction of the California Department of Social Services (CDSS)

Who is Eligible for IHSS?

- Any California resident is eligible for IHSS if they are:
 - Blind, disabled, or age 65 years or older
 - SSI/SSP or Medi-Cal eligible
 - Living in a home or apartment (does not include a hospital, nursing home, or assisted living or licensed care facility)
 - Cannot live safely at home without assistance
- Otherwise, eligible if:
 - Living in an institution and wants to live in their own home
 - Can safely live at home with receipt of IHSS services
 - Demonstrated need for IHSS services
- Due to recent Medi-Cal expansion, eligibility is irrespective of immigration status

What is a “Home”?

- **IHSS Services may be provided in:**

- Recreational Vehicle (RV)
- Temporary Shelter
 - If management of the shelter allows recipient to remain there for a specified “period of time” and
 - Allows IHSS to enter shelter to perform IHSS assessment and provider to provide the needed services
- Family Member’s or Friend’s Home
 - If it allows the recipient to remain home for a specified “period of time.”

ACIN I-19-20

https://healthpathwaysexpansion.weebly.com/uploads/2/7/0/1/27013559/ihss_eligibility_own_home_guidance.pdf

How to Apply for IHSS?

- **Contact or visit your local IHSS county welfare office to apply**
 - Find your local county office at: www.cdss.ca.gov/inforesources/county-ihss-offices
 - Complete and submit Application for Social Services (SOC 295 Form)
- **The Health Care Certification Form SOC 873**
 - Completed by provider and must be returned within 45 days to the County
- **Prepare for the In-Home Assessment**
 - Document your functional limitations (i.e., breathing, walking, standing, loss of limb use)
 - Record how long it takes you to complete a task (i.e., bathing, dressing)
 - Determine your functional index rank which is how much help a person needs with an activity of daily living (ADL)
- **During your In-Home Assessment**
 - Help the IHSS worker understand your care needs and what it means in terms of time
 - Present credible evidence of how much time you need for each services

DRC Resource

<https://www.disabilityrightsca.org/publications/ihss-self-assessment-and-fair-hearing-guide>

When is the IHSS Application Complete?

- Your IHSS worker will verify your Medi-Cal eligibility
- Complete your In-Home Assessment
- Obtain additional information about your functional limitations and need for IHSS services
- Issue you an IHSS Notice of Action either:
 - Approving your IHSS Application
<https://www.cdss.ca.gov/cdssweb/entres/forms/English/NA1250.pdf> OR
 - Denying your IHSS application
<https://www.cdss.ca.gov/cdssweb/entres/forms/English/NA1252.pdf>
- IHSS has 30 days to process your application (MPP §30-759.2) or longer if you don't have Medi-Cal and need a disability determination
- After getting a IHSS Notice of Action, you have 90 days to request a hearing

What Kinds of Services Does IHSS Pay For?

Service Categories include:

- Domestic Services
- Related Services
- Personal Care Services
- Accompaniment
- Paramedical Services
- Time Limited Services
- Protective Supervision

Domestic Services

- Sweeping
- Vacuuming
- Washing and waxing of floor surfaces
- Washing kitchen counters and sinks
- Cleaning the bathroom
- Storing food and supplies
- Taking out garbage
- Dusting and picking up
- Cleaning oven and stove
- Cleaning and defrosting refrigerator
- Bringing in fuel for heating or cooking purposes from a fuel bin in the yard
- Changing bed linen

Personal Care Services

- Feeding
- Bathing
- Grooming
- Bowel and Bladder care
- Dressing
- Transfers
 - Getting in/out of bed, on/off seats, etc.
- Oral Hygiene
- Ambulation
 - Help with walking, getting in/out of cars, etc.
- Help with Prosthesis
 - Leg Braces, visual/hearing aids, artificial limbs
- Help with Medications
- Respiration
- Menstrual Care
- Rubbing Skin

Related Services

- Meal Preparation/Clean-Up
- Laundry
- Grocery shopping
- Other Shopping/Errands
 - Picking up prescriptions, buying clothes, or toiletries

Time Limited Services



Heavy cleaning



**Removing yard hazards
(weeds or high grass)**



Shoveling ice or snow



**Teaching and
Demonstration**

Not all services are eligible.

Limited to:

- Housework
- Meal prep/clean-up
- Laundry
- Bathing, feeding, dressing
- Yard work

3 month maximum

How are IHSS Hours Authorized?

- The IHSS hours you get are based on
 - Your Functional Limitations (1-5 and 6 for Paramedical)
 - IHSS Hourly Task Guidelines (limits on time you can get based on functional limitations)
- The County will assess a person's eligibility and need for IHSS Services using the following tools
 - Functional Index Rankings
 - https://www.cdss.ca.gov/Portals/9/ACIN/2017/I-82_17.pdf?ver=2019-06-18-163054-553 (Exhibit C, The IHSS Social Worker Field Assessment Handbook)
 - Hourly Task Guidelines
 - <https://www.cdss.ca.gov/Portals/9/Documents/2021%20Forms/FunctionalIndexRanksAndHourlyTaskGuidelines.pdf>
- Proration of Hours
 - Domestic and Related services such as Meal Prep, Meal Clean-up, and Laundry
- Alternative Resources (free services from other places)

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How is a Child's Need for IHSS Determined?

For children, the need for IHSS is based on disability not on age

- Child who needs a breathing machine
- A 5-year-old child that needs help with walking

See IHSS Social Worker Manual (102)

<https://www.cdss.ca.gov/Portals/9/IHSS/ITA/IHSS%20Tools/IHSS102CourseMaterials.pdf>

Children's Eligibility for IHSS Services



FUNCTIONAL INDEX RANKING FOR MINOR CHILDREN IN IHSS
AGE APPROPRIATE GUIDELINES TOOL
 Each child must be assessed individually.



Age	Housework	Laundry	Shopping and Errands	Preparation of Meals and Meal Clean-Up	Ambulation	Bathing/Oral Hygiene/Grooming	Dressing	Bowel and Bladder Care	Feeding	Transfer	Respiration
0-1	1	1	1	1 or 6	1	1	1	1 or 6	1 or 6	1	1, 5 or 6
2	1	1	1	1 or 6	1	1	1	1 or 6	1 or 6	1-5	1, 5 or 6
3	1	1	1	1 or 6	1	1	1	1 or 6	1 or 6	1-5	1, 5 or 6
4	1	1	1	1 or 6	1	1	1	1-6	1 or 6	1-5	1, 5 or 6
5	1	1	1	1 or 6	1-5	1	1-5	1-6	1 or 6	1-5	1, 5 or 6
6	1	1	1	1 or 6	1-5	1	1-5	1-6	1 or 6	1-5	1, 5 or 6
7	1	1	1	1 or 6	1-5	1	1-5	1-6	1 or 6	1-5	1, 5 or 6
8	1	1	1	1 or 6	1-5	1-5	1-5	1-6	1-6	1-5	1, 5 or 6
9	1	1	1	1 or 6	1-5	1-5	1-5	1-6	1-6	1-5	1, 5 or 6
10	1	1	1	1 or 6	1-5	1-5	1-5	1-6	1-6	1-5	1, 5 or 6
11	1	1	1	1 or 6	1-5	1-5	1-5	1-6	1-6	1-5	1, 5 or 6
12	1	1	1	1 or 6	1-5	1-5	1-5	1-6	1-6	1-5	1, 5 or 6
13	1	1	1	1 or 6	1-5	1-5	1-5	1-6	1-6	1-5	1, 5 or 6
14	1	1, 4 or 5	1	1 or 6	1-5	1-5	1-5	1-6	1-6	1-5	1, 5 or 6
15	1	1, 4 or 5	1	1 or 6	1-5	1-5	1-5	1-6	1-6	1-5	1, 5 or 6
16	1	1, 4 or 5	1	1 or 6	1-5	1-5	1-5	1-6	1-6	1-5	1, 5 or 6
17	1	1, 4 or 5	1, 3 or 5	1-6	1-5	1-5	1-5	1-6	1-6	1-5	1, 5 or 6

Notes:

- All minors should be assessed a functional rank of 1 when identified above unless extraordinary need is documented.
- Minors who live with their provider parents must be assessed a functional rank of 1 in Housework regardless of extraordinary need.
- For areas with ranges, the social worker should utilize the Annotated Assessment Criteria and Developmental Guide to determine the appropriate functional rank.
- Memory, Orientation and Judgment – FI ranks of 1, 2 or 5 should be assessed. The county staff must review a minor's mental functioning on an individualized basis and must not presume a minor of any age has a mental functioning score of 1. (ACL 98-87, MPP § 30-756.372; WIC §§ 12301(a), 12301.1.)
- The FI ranks listed above reflect the age at which a minor may be expected to complete all tasks within a service category independently and are based on the Vineland Social Maturity Scale. These rankings are provided as a guideline only. Each child must be assessed individually.

- The County uses the Functional Index Ranking For Minor Children's chart to determine a child's eligibility for IHSS services
- The chart is only a guideline
- County must complete an individual assessment of a disabled child's need for services
- Exceptions may be made on a case-by-case basis for special circumstances

What Services Can a Child Get?

An eligible child with a disability can get the following services:

- Related Services
- Personal Care Services
- Paramedical Services
- Protective Supervision
- Assistance with Travel to/from Approved Place

Protective Supervision Services

- For people who:
 - 1) Have a mental illness or mental impairment,
 - 2) Are non-self-directing, and
 - 3) Require 24-hour supervision to safeguard against self-injury, hazard, or accident
 - Behaviors are “unpredictable”
- Children under 18 years may get protective supervision services if they meet all the above requirements including:
 - 4) The child needs more supervision than another child of the same age without a disability

MPP § 30-757.17 -.172 and All County Letter (ACL) 15-25

<https://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl/2015/15-25.pdf>

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What Behaviors Warrant A Need For Protective Supervision?

- Wandering from home and getting lost
- Eating non-food items
- Wandering into the street without checking for cars
- Attempting tasks beyond his/her/their physical and/or mental capability (and not understanding the risk of injury)
 - Trying to move furniture or heavy objects
 - Climbing onto the counter
- Turning on stove and forgetting to turn it off
- Self-biting or scratching
- Lack of stranger-danger awareness

SOC 821: <https://cdss.ca.gov/cdssweb/entres/forms/English/SOC821.PDF>

When Is Protective Supervision NOT Available?

- **Friendly visiting or social activities**
- **When the need is caused by a medical condition and the form of supervision required is medical**
 - Example: Person has diabetes and needs supervision in case they become hypoglycemic
- **In anticipation of a medical emergency**
 - Example: Person has congestive heart failure and need for supervision is in anticipation of heart attack
- **To prevent or control anti-social or aggressive behavior**
 - Gets into fights or destroys property
- **To guard against deliberate, self-destructive behavior**
 - When the person knowingly intends to harm himself/herself²³

MPP § 30-757.172(a)-(e)

https://www.cdss.ca.gov/agedblinddisabled/res/SWTA/AssessmentAndAuthorization_PartIV.pdf

Paramedical Services

- **Services ordered by a licensed medical professional and provided under his/her direction. Examples:**
 - Administering medications or giving injections
 - Range of motion exercises
 - Pressure sore or wound care
 - Catheter insertion
 - Bowel program
 - Enemas, insertion of suppositories
 - Tube feeding
 - Tracheostomy care and suctioning
- **Requires a signed authorization from your provider (SOC 321 Form)**
<https://cdss.ca.gov/cdssweb/entres/forms/English/SOC321.pdf>

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Paramedical Services Criteria

- The person can't perform the service at all, and
- The activity is necessary to maintain the person's health, and
- The service requires training and judgment to perform
 - Examples: puncturing skin, inserting a medical device into a body orifice

IHSS Program Updates regarding Parent Providers

- Starting February 19, 2024, there are no provider eligibility requirements for minor recipients in the Community First Choice Option (CFCO), the IHSS Plus Option (IPO), and the IHSS Residual (IHSS-R) program
 - This change means that minor recipients in these programs have the right to select a provider of their choice, including parent providers
- Minor recipients in the Personal Care Services Program (PCSP)
 - Can only hire a non-parent provider
 - PCSP rules must follow federal law and don't allow the hiring of parent providers
- All providers must complete the provider enrollment process

IHSS Program Updates (cont'd)

- **IHSS Providers for Minors can only get reimbursed for the following:**
 - Related Services, Personal Care Services, Medical Accompaniment, Protective Supervision and Paramedical Services
- **If you have a minor (under age 18) in the CFCO, IPO, or IHSS-R and their hours were reduced because of the previous parent provider rules, you have two options:**
 - Counties will recalculate your minor child's authorized hours by their next scheduled reassessment, or
 - You can call the County office to ask to update your child's authorized hours before their next reassessment

What is a Notice of Action?

Adequate IHSS Notice of Action (NOA)

There are 3 Different Types of Notices

1. Application Approved
 - Effective date
 - Number of hours authorized per task
2. Application Denied
 - Bases for decision
 - Regulations supporting the action
3. Services Reduced, Terminated, or Altered
 - At least 10 days before effective date, MPP § 20-001(a)(1)
 - Reason for change and regulations supporting the action
 - Difference from previous authorized hours

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How to Appeal the Notice of Action?

- **Appeal Deadlines**

- Aid Paid Pending

- Must Request BEFORE the effective date of the change

- Effective Date is different than Notice date

- 90 days from Notice date to appeal (180 days for good cause)

- **State Hearings Division (CDSS)**

- <https://www.cdss.ca.gov/hearing-requests>

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How to Appeal the Notice of Action? (cont'd)

How to Request a Hearing (Appeal)

1. Fill out the back of the Notice and mail to the address indicated
2. Submit a Hearing Request Online
 - Create an ACMS account or select [Submit Appeal without an Account](https://acms.dss.ca.gov/acms/login.request.do) at <https://acms.dss.ca.gov/acms/login.request.do>
3. Mail a written letter to:
California Department of Social Services
State Hearings Division
P.O. Box 944243, Mail Station 9-17-442
Sacramento, California 94244-2430
4. Call State Hearings Division at (800) 743-8525

How do I Prepare for the Hearing?

- **After Requesting a Hearing**

- Confirmation Notice
- Hearing Notice with date, time, and location of hearing
 - At least 10 days before the hearing
- Contact County Appeals Worker
 - Try to resolve dispute without going to hearing

- **Preparing for a Hearing**

- Review your IHSS case file (MPP § 22-051.1)
 - Latest Needs Assessment form
 - Review functional index ranks about what you can/cannot do
 - IHSS worker case notes
 - Hourly Task Guidelines
 - Medical Records or physician reports

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How to Prepare for Hearing (cont'd)?

- **Preparing for a Hearing (cont'd)**
 - **Get updated information about your functional limitations**
 - Functional Limitations Assessment and Self-Assessment Worksheet
 - Obtain doctors' letters
 - Describe how your disability impacts your ability to complete tasks without assistance
 - Explain any changes in condition or varying conditions
 - **County Statement of Position**
 - At least 2 business days before hearing
 - Anticipate County's questions and prepare responses before hearing
 - **Draft your own Claimant Position Statement (optional)**
 - Present your case
 - Support with credible evidence about why you need more hours
 - Identify other evidence or witnesses you may need
 - **Postponements Available**

What to Expect During the Hearing?

- Hearings are INFORMAL
- County goes first
 - Explains why hours were cut and/or why more time cannot be granted
- Present evidence about your needs in categories where you and the County disagree
 - i.e., Testimony by witnesses, doctors' letters, diary log, medical records
- Evidence must show:
 - What you need and why you need more time
 - How long it takes to complete a task
 - Safety risk(s) without a higher level of service
- Witnesses
 - Friends, family, school staff, regional center counselors, former care providers

What to Expect After the Hearing?

- Hearing Decision is mailed to you and the County
- Request for Rehearing
 - Within 30 days after receiving the hearing decision
 - DISCRETIONARY
- Petition for Writ of Administrative Mandamus (CCP § 1094.5)
 - Request that a Superior Court review and reverse the final order
 - Must be filed within 1 year of the date of decision

Waiver Personal Care Services (WPCS)

- “Waiver personal care services” are personal care services which can be combined with IHSS.
- Designed to assist waiver participants in remaining safely in their homes and members of their community.
- To receive WPCS, you must: 1) be on the HCBA Waiver, and 2) receive personal care services through IHSS, and 3) have a doctor’s order saying the individual needs WPCS to remain safety at home.
- WPCS hours are determined after IHSS hours are determined.
- WPCS is not meant to replace IHSS and is more flexible than IHSS.

Waiver Personal Care Services (WPCS) cont.

- WPCS includes Adult Companionship (18+)
 - Individuals who are isolated or may be homebound due to medical conditions.
 - Includes non-medical care, supervision, and socialization provided to a waiver participant.
- Other services include verbal cueing, monitoring for safety, assisting with self-directed activities and ADLs, advising primary caregiver of any problems or concerns, providing information for updating POTs, and more.

Waiver Personal Care Services (WPCS) cont.

- WPCS providers include legally responsible relatives (spouses, parents of minor children)
 - Providers must be 18+ and complete IHSS provider enrollment process.
 - Must show that a minor or a spouse has extraordinary care needs.
See: <https://www.dhcs.ca.gov/services/ltc/Documents/HcBA-PL-24-003-WPCS-Parent-and-Spouse-Providers.pdf>
- IHSS overtime rules apply to WPCS as well.
See: <https://www.disabilityrightsca.org/publications/new-rules-for-ihss-overtime-and-related-changes>.
- See also: [DHCS Waiver Personal Care Services \(WPCS\) Frequently Asked Questions](#)

RESOURCES

- **DRC Online Resources**
<https://www.disabilityrightsca.org/resources/in-home-supportive-services-ihss>
- **DRC Intake line**
<https://www.disabilityrightsca.org/get-help>
- **IHSS Regulations**
<https://www.cdss.ca.gov/inforesources/letters-regulations/legislation-and-regulations/adult-services-regulations>
(starting at MPP 30-700)
- **CDSS**
<https://www.cdss.ca.gov/inforesources/guides>

QUESTIONS?



Thank you for

joining us!

When this session ends, you'll see the Event
Lobby webpage.

Join us for the 1:30 pm Closing Session.