SSA Intranet

ORANGE COUNTY SOCIAL SERVICES AGENCY ADULT SERVICES POLICY AND PROCEDURE MANUAL

Program: In-Home Supportive Services Number: SH 40.3.1.1

Subject: Variable Reassessment Date: 10/01/07

Approved: Signature On File **Replaces:**

Reformatted: MM-DD-YY

I. PURPOSE

The purpose of this procedure is to provide In-Home Support Services (IHSS) staff with instructions on the reassessment extension requirements for the IHSS Personal Care Services Program (PCSP) cases. IHSS Independent Plus Waiver (IPW) and Residual Cases are not eligible for reassessment extension.

II. POLICY

Orange County has adopted the State option to implement Reassessment Extensions for qualifying IHSS PCSP cases. Reassessments for certain IHSS/PCSP cases can be extended up to, but may not exceed, 18 months on a case-by-case basis if specified conditions that indicate that a stable situation exists in the case are met. IHSS Social Workers will review the monthly IHSS Case Management, Information and Pay-rolling System (CMIPS) Assessment Due Listing Report and identify cases that may qualify for reassessment extension.

Reassessments can be extended for up to six months beyond the regular twelve-month period.

IHSS Social Services Supervisors are responsible for reviewing and approving all cases for reassessment extensions.

III. BACKGROUND

Existing regulations require needs reassessments to be performed prior to the end of the twelfth calendar month from the last face-to-face assessment or anytime sooner if the IHSS Social Worker recognizes the need for an earlier reassessment. SB 1104 allows for exceptions to the 12-month reassessment standard under certain conditions, which are described here as "Reassessment Extension".

IV. PROCEDURE

- A. Criteria For Reassessment Extension
- 1. Case is IHSS PCSP.
- 2. The recipient has had at least one reassessment since the initial intake assessment
- 3. The recipient's living arrangement has not changed since the last annual reassessment and the recipient lives with others or has regular meaningful contact with people other than the recipient's provider (i.e., people who know the client such as family members, neighbors, church members, etc).
- 4. The recipient, or if a minor, his or her parent or legal guardian, or if mentally incompetent, his or her conservator or authorized representative, is able to satisfactorily direct the recipient's care.
- 5. There has been no change greater than 10 hours in the recipient's supportive service needs within the previous 24 months or recipient has demonstrated understanding of the need to report when his/her situation changes.
- 6. There have been no reports to, or involvements of, the Adult Protective Services Agency since the last IHSS assessment.
- 7. The recipient has not had a change in provider(s) or, if there is a change in providers, no break in service for the previous six months.
- 8. The recipient has not been hospitalized within the previous three months.
- 9. If some, but not all, of the above conditions are met, other factors may be considered in determining whether a reassessment extension is appropriate. The factors include, but are not limited to:
- Involvement of a social worker, case manager, or other similar representative from another human services agency, such as Linkages, Multi-purpose Seniors Services Program (MSSP), Regional Center, County Mental Health program, Adult Day Care (ADC), SCAN, Feedback, or Meals on Wheels (MOW) in the care of the recipient.
- · Communications or other instructions from a physician or other licensed health care professionals prior to the end of the twelfth calendar month confirming that the recipient's medical condition is unlikely to change.

If any of the above criteria is questionable, the social worker will contact the IHSS recipient for clarification.

For cases with an Authorized Representative the Social Worker will need to obtain a renewed Authorized Representative form.

B. Reassessment Extension Form

IHSS Social Worker will complete the IHSS Reassessment Extension Request (**Attachment**) to determine eligibility for extension.

Social Workers should explain in the comments section whenever it is necessary to justify the extension, especially when clients do not meet all of the above-mentioned criteria but the social worker determines that an extended assessment interval is appropriate.

Approved IHSS Reassessment Extension Requests shall be filed on top of the Medi-Cal Acco.

- C. Reviewing And Documenting Reassessment Extensions
 IHSS Social Services Supervisors are responsible for reviewing and comparing
 information on the Reassessment Extension Requests to the information found in the
 case file. If the case qualifies for reassessment extension, the Supervisor will sign the
 request and return the form and case to the Social Worker for processing.
- D. Entering Reassessment Extensions In CMIPS

Once the reassessment extension request is approved, the Social Worker will complete the following entries on the SOC 293, IHSS Assessment:

- 1. Line P(4) COUNTY USE Enter "18 EXT".
- 2. Line ZZ(3) BEGINNING DATE Enter the first day of the month following the existing end date. For example, if the case was scheduled for reassessment with the end date 02/28/2006, the new beginning date should be 03/01/2006.
- 3. Line ZZ(4) ENDING DATE Enter the new end date that extends the case reassessment up to six months beyond the existing ending date. In reference to the previous example, the new end date would be 08/31/2006.
- 4. The new reassessment due date will appear on the monthly IHSS CMIPS Assessment Due Listing report. The case shall be reassessed at that time in accordance with SH 40.3.1 Needs Assessment Overview.

V. REFERENCES

VI. ATTACHMENTS

IHSS Reassessment Extension Request

