

CHAPTER 2 ELIGIBILITY & CASE MANAGEMENT

ANNUAL REASSESSMENTS

General Information

Eligibility to IHSS services must be redetermined (recertified) and a face-to-face home visit completed every twelve months. When completing a recertification, all aspects of the case must be reviewed by the Social Worker. The data from the previous assessment can be used as a base of information, but all needs should be reviewed as if a new application was being processed. For exceptions to the 12-month face-to-face requirements, see section 2-F “Variable (18 Month) Reassessments.

CMIPS II allows the Social Worker to copy or “clone” the most recent assessment information available in the system and use that information as a base for the new needs assessment. It eliminates the need to re-enter information that hasn’t changed. The Social Worker must review each category of the needs assessment and edit or change according to the results of the new needs assessment.

Social Worker Responsibilities

Reassessments are identified in the “Monthly Assessment Due” report generated from CMIPS II. Each Social Worker is responsible for generating his/her own “report. The Social Worker is responsible for:

- Accessing CMIPS II to generate the Monthly Assessment Due report
- Reviewing the report and scheduling the face-to-face home visit(s)
- Ensuring that all forms and necessary actions for recertification are completed on time

Prior to the Home Visit

Prior to the home visit, the Social Worker will:

1. Obtain and review his/her Monthly Assessment Due report
2. Review the MEDS QM screen (or the Meds Eligibility Information screen in CMIPS II) for changes to the following information affecting IHSS eligibility:
 - a. Medi-Cal aid code
 - b. Medi-Cal eligibility status
 - c. Address
 - d. Conservator/Authorized Representative
3. If the case is status eligible, review the MEDS QX screen (or the Meds Eligibility Information screen in CMIPS II) for changes to the following information affecting IHSS eligibility:
 - a. SSI Living Arrangement Codes (Attachment) indicating receipt of “Non-Medical Out of Home Care”
 - b. SSI Living Arrangement Codes indicating receipt of the “No cooking facilities rate”
Marital Status

The Social Worker will always review case notes/narratives for issues from previous home visits or contacts. A copy of the current, active evidence from CMIPS II may be generated to use at the home visit and to compare with changes in assessed need.

At the Home Visit

At the home visit, the Social Worker will:

1. Verify the identity of the recipient and the provider (if the provider is present) by:
 - a. Viewing the individual's original photo identification
 - b. Viewing the individual's original Social Security Card
2. Explain the provider enrollment processes to the recipient and the provider (if the provider is present)
3. Explain the payroll process to the recipient and the provider (if the provider is present)
4. Ensure that all forms and necessary actions for reassessments are completed timely. (For the list of required forms, refer to section 2-A "Forms Completion".)

After the Home Visit

After completing the home visit, the Social Worker will:

1. Enter evidence in CMIPS II by selecting the "Evidence" folder from the left navigation menu and update the following sections:
 - a. "Household Evidence" (with any new information from the home visit)
 - b. "Service Evidence" (enter assessment information)
 - c. "Program Evidence"
 - d. "Share-of-Cost Evidence" (if applicable)
2. Complete the "Assessment Narrative".

The Social Worker must create a new narrative that will include the current assessment information. The *Assessment Narrative Template* (Attachment) can be used as a tool to create the new narrative, spell-check the information for edits, and then cut and paste into the *Assessment Narrative* screen. Once a narrative entry is saved, it cannot be edited.

Supervisory Review

The Social Worker will submit the following cases for review at both intake and recertification:

- All approvals
- All denials
- All Protective Supervision cases must be reviewed at both application and renewal
- Paramedical Services
- Increases/Decreases of more than 25%
- Medical Transportation (more than 4x/monthly or 4 hours monthly)

The Social Worker will immediately notify his/her supervisor *if at any time* they become aware that:

- A personal or business relationship exists with an applicant, recipient, or provider
- An applicant, recipient, or provider is an employee of the County of San Diego or a relative of an employee of the County of San Diego

For detailed procedures refer to "Confidential/Secured Cases, Chapter 7.

Social Work Supervisor Responsibilities

The Social Work Supervisor will monitor CMIPS reports, ensure that all reassessments are completed on a timely basis and conduct case reviews as indicated above. In addition, the Social Work Supervisor will:

- Review all casework for new staff.
- For all other staff, review cases submitted per requirements outlined above.
- Monitor CMIPS reports and ensure all reassessments are completed timely.

The Social Work Supervisor will immediately follow standard procedures outlined in Chapter 7 for confidential/secure cases if at any time he/she becomes aware that:

- A Social Worker, or any other IHSS staff member (including his/herself), has a personal or business relationship with any applicant, recipient, or provider of the IHSS program.
- An applicant, recipient, or provider of IHSS services is an employee of the County of San Diego or a relative of an employee of the County of San Diego.