

# INTRODUCTION

## PROGRAM DEFINITIONS

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This section defines terms commonly used in the IHSS program. The definitions contained in this section are intended to serve as a resource to staff, not to provide regulations.

#### Abbreviations

<b>ABD</b>	Aged, Blind or Disabled
<b>APB</b>	Adult Programs Branch
<b>APS</b>	Adult Protective Services
<b>BMFEA</b>	Bureau of Medi-Cal Fraud and Elder Abuse
<b>CCLD</b>	Community Care Licensing Division
<b>CDSS</b>	California Department of Social Services
<b>CHDP</b>	Child Health and Disability Prevention Program
<b>CIN</b>	Client Index Number
<b>COLA</b>	Cost of Living Adjustment
<b>CMS</b>	County Medical Services
<b>CSU</b>	Child Support Unit
<b>CWD</b>	County Welfare Department
<b>CWDA</b>	County Welfare Directors Association of California
<b>EDS</b>	Electronic Data Systems
<b>FFP</b>	Full Financial Participation
<b>FPL</b>	Federal Poverty Level
<b>HIC</b>	Social Security Health Insurance Claim Number
<b>HMO</b>	Health Maintenance Organization

<b>ICF</b>	Intermediate Care Facility
<b>IEVS</b>	Income and Eligibility Verification System
<b>IHSS</b>	In-Home Supportive Services
<b>INS</b>	Immigration and Naturalization Service
<b>IP</b>	Individual Provider
<b>IPW</b>	IHSS Plus Waiver
<b>IRCA</b>	Immigration Reform and Control Act
<b>IRWE</b>	Income Related Work Expenses
<b>LTC</b>	Long Term Care
<b>LTCO</b>	Long Term Care Ombudsman
<b>MASH</b>	Management and Assessment of Social and Health Needs
<b>MCCA</b>	Medicare Catastrophic Coverage Act
<b>MEDS</b>	Medi-Cal Eligibility Data System
<b>MFBU</b>	Medi-Cal Family Budget Unit
<b>MI</b>	Medically Indigent
<b>MN</b>	Medically Needy
<b>MPG</b>	Medi-Cal Program Guide
<b>MSSP</b>	Multipurpose Senior Services Program
<b>NMOHC</b>	Non-medical Out of Home Care
<b>NOA</b>	Notice of Action
<b>NSI</b>	Non-Severely Impaired
<b>OBRA</b>	Omnibus Budget Reconciliation Act

<b>PA</b>	Public Authority
<b>PHP</b>	Prepaid Health Plan
<b>PRUCOL</b>	Permanently Residing in the U.S. Under Color of Law
<b>QA</b>	Quality Assurance
<b>QC</b>	Quality Control
<b>QDWI</b>	Qualified Disabled Working Individual
<b>QMB</b>	Qualified Medicare Beneficiary
<b>RD</b>	Renal Dialysis
<b>RSDI</b>	Retired Survivor, Disability Insurance
<b>SAVE</b>	Systematic Alien Verification for Entitlements
<b>SDHS</b>	State Department of Health Services
<b>SI</b>	Severely Impaired
<b>SLMB</b>	Special Low Income Medicare Beneficiary
<b>SNF</b>	Skilled Nursing Facility
<b>SOC</b>	Share-of-Cost
<b>SSI</b>	Supplemental Security Income
<b>SSN</b>	Social Security Number
<b>SSP</b>	State Supplemental Payment
<b>TAD</b>	Turnaround Document
<b>VA</b>	Veterans Administration

Definitions

<b>Adjusted Need</b>	The total assessed need of the applicant/recipient, reduced by prorating (when appropriate) and/or alternative resources, including family, friends, housemates, etc.
<b>Adult</b>	A blind or disabled person who is 18 years of age or older.
<b>Advance Pay</b>	Advance Pay is an option for eligible severely impaired recipients to receive a warrant for the value of their services in advance, enabling them to directly reimburse their Individual Provider for hours worked.
<b>Adverse Action</b>	An action taken that discontinues/denies services, increases a recipient’s share-of-cost (SOC) or decreases the amount of authorized service hours.
<b>Aid Code</b>	The two-digit number that indicates the aid category under which a person is eligible to receive IHSS.
<b>Alternative Resource</b>	Any agency, program, or person that may be available to meet the assessed needs of an applicant/recipient.
<b>Applicant</b>	The individual making an application or the person on whose behalf an application is made.
<b>Application</b>	A request for an IHSS eligibility determination.
<b>Board and Care</b>	Receipt of board, room, personal care and designated supplemental services related to an individual’s needs in a nonmedical living environment.
<b>Buy Out</b>	The amount of Medi-Cal Recognized Expenses that CDSS will pay on behalf of the IHSS applicant/recipient. A Buy-Out occurs when the Medi-Cal SOC is higher than the IHSS SOC. The buy-out amount is equal to the difference between the two SOC's.
<b>Child</b>	A child means an individual, who is neither married, nor the head of household, and who is under the age of 18, or under 22 and a student regularly attending school, college, or university, or a course of vocational or technical training designed to prepare him/her for gainful employment.
<b>Client Index Number</b>	An alphanumeric value assigned by the State Client Index to uniquely identify an individual to various California state agencies or programs.
<b>CMIPS</b>	The In-Home Supportive Services (IHSS) Case Management, Information, and Payrolling System. Timesheet information and authorizations are entered at the local level. Payments and timesheets are generated at the State level.
<b>Cognitive</b>	Awareness with perception, reasoning, judgment, intuition, and memory; the mental process by which knowledge is acquired.
<b>Companion Case</b>	A case involving two or more applicants/recipients that are residing at the same address.
<b>Compensable Services</b>	Those services for which an Individual Provider can legally be paid.

<b>Dependent Adult</b>	A dependent adult is any person residing in the state, between the ages of 18 and 64 years, who has physical or mental limitations that restrict their ability to carry out normal activities or to protect their rights including, but not limited to, persons who have physical or developmental disabilities or whose physical or mental abilities have diminished because of age.
<b>Dexterity</b>	Skill in using the hands, usually requiring both fine and gross motor coordination.
<b>Direct Advance Payment</b>	The payment used to purchase IHSS that is sent directly to a severely impaired recipient in advance of the service actually being provided.
<b>Elder</b>	Any person residing in this state who is 65 years of age or older (W&IC 15610.27)
<b>Employer</b>	The applicant/recipient of IHSS when such services are purchased under the Individual Provider service delivery method.
<b>Financial Abuse</b>	Abuse perpetrated by a person who has the care or custody of an elder or dependent adult, or who in a position of trust to an elder or dependent adult, takes, secretes, or appropriates his or her money or property for a wrongful use or with the intent to defraud.
<b>Fraud</b>	The intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to themselves or some other person.
<b>Guardian/Conservator</b>	A person appointed by the Superior Court to manage the affairs of individuals pursuant to the provisions of Probate Code Section 1514.
<b>Heirloom</b>	Any item of personal property, other than cash and securities, that has sentimental value, has been owned by a family for at least two generations and is intended to be retained by the family in succeeding generations.
<b>Home</b>	Real or personal property, fixed or mobile, located on land or water, in which a person or family chooses to reside. It does not include an acute care hospital, skilled nursing facility, intermediate care facility, community care facility, or a board and care facility.
<b>Hours Worked</b>	The time during which the Individual Provider is subject to supervision by the IHSS applicant/recipient; includes all the time the Individual Provider uses to provide services within the hours authorized to work, but excludes the time spent traveling to and from work.
<b>Housemate</b>	A person who shares a living unit with an applicant/recipient. An able and available spouse or a live-in provider is not considered a housemate.
<b>Income Eligible</b>	An applicant who is within the allowed IHSS income and property limits. These limits are the same as Medi-Cal and SSI/SSP limits. Income over the allowed limit becomes a “share-of-cost”.
<b>Intercounty Transfer</b>	A transfer of responsibility for the provision of IHSS services from

	one county to another when the applicant/recipient moves to a new county and continues to be eligible for IHSS.
<b>Inter-program Transfer</b>	A transfer of eligibility from one aid category to another aid category, in which the first digit of the aid code changes.
<b>Licensed Health Care Professional</b>	A person who is a physician as defined and authorized to practice in this State in accordance with the California Business and Professions Code. 30-701 1 (2)
<b>Live-In Provider</b>	A person who is not related to an IHSS applicant/recipient and who lives in the applicant/recipient’s home expressly for the purpose of providing services.
<b>Mandated Reporter</b>	Any person who has assumed full or intermittent responsibility for the care or custody of an elder or dependent adult, whether or not that person receives compensation. This includes administrators, supervisors, and any licensed staff of a public or private facility that provides care or services for elder or dependent adults, or any elder or dependent adult care custodian, health practitioner, clergy member, an employee of a county adult protective services agency or local law enforcement agency. (W&IC 15630)
<b>Medi-Cal</b>	California’s medical assistance program and the benefits available under the program.
<b>MEDS Printout</b>	A screen print of information found in the Medi-Cal Eligibility Data System (MEDS) displaying SSI/SSP benefits. It is used to verify receipt of SSI/SSP benefits to determine IHSS eligibility.
<b>Minor</b>	Any person under the age of eighteen who is not emancipated by marriage or other legal action. 30-701 (m)
<b>Neglect</b>	The failure of attention to personal hygiene, health and safety, medical care, food, clothing, and shelter needs of an elder or dependent adult by any person who they are in care and custody of is considered neglect.
<b>Notice of Action (NOA)</b>	A document given to an applicant/recipient to advise him/her of a decision made by a county employee affecting IHSS/PCSP assessments and authorizations.
<b>Overpayment</b>	The amount paid by the State Department of Health Services to an Individual Provider or applicant/recipient that is in excess of the amount for authorized services.
<b>Paramedical Services</b>	Services that include the administration of medications, puncturing the skin or inserting a medical device into a body orifice, activities requiring sterile procedures, or other activities requiring judgment based on training given by a licensed health care professional.
<b>Paraplegia</b>	Paralysis of the lower portion of the body and legs.
<b>Personal Care Services Program (PCSP)</b>	The program provides for the provision of personal care services to eligible Medi-Cal applicants/recipients subject to all other provisions of Medi-Cal statutes and regulations.
<b>PCSP Provider Appeal</b>	A process established to hear and resolve issues in a systematic and objective manner if a PCSP Individual Provider has a complaint

	concerning the processing or payment of money for services rendered. This appeal right is not available for IHSS Residual Program Individual Providers.
<b>Physical Abuse</b>	Any assault, battery, assault with a deadly weapon or force likely to produce great bodily injury, or unreasonable physical constraint, or prolonged or continual deprivation of food or water. It also includes use of a physical or chemical restraint or psychotropic medication for punishment, for a period beyond that for which the medication was ordered, or for any purpose not authorized by the physician.
<b>Point of Service (POS)</b>	Recipients may meet the share-of-cost obligation with any medical service including payments for prescriptions, health plan co-payments and payments to their Individual Providers. Payments made at the “Point” that services are received.
<b>Provider List</b>	Any formal, informal, or registry listing of the names of prospective IHSS Individual Providers maintained by the County Agency or social services staff, a contractor, or any public or private agency for purposes of referring prospective Individual Providers for employment.
<b>Quadriplegia</b>	Paralysis of the body trunk, arms and legs.
<b>Quality Assurance</b>	Review of IHSS cases to ensure the proper determination of eligibility.
<b>Recipient</b>	A person receiving IHSS.
<b>Referral</b>	The activities performed to inform another service agency that a person desires or requires that agency’s services and the assistance to the person to avail him/herself of such services.
<b>Residual: In-Home Supportive Services- Residual (IHSS-R)</b>	IHSS applicants/recipients not eligible to the Personal Care Service Program or IHSS Plus Waiver. Not Eligible to Full Financial Participation (FFP).
<b>Restaurant Meal Allowance</b>	A monetary allowance for meals to an aged or disabled applicant/recipient who has adequate cooking facilities, but whose disabilities prevent the applicant/recipient from using them.
<b>Severely Impaired</b>	A applicant/recipient with a total assessed need of more than 20 hours per week in one or more of the following areas: <ul style="list-style-type: none"> <li>• Personal care services</li> <li>• Preparation of meals</li> <li>• Meal clean-up when preparation and feeding are required</li> </ul> Paramedical services
<b>Sexual Abuse</b>	Sexual battery, rape in concert, spousal rape, incest, sodomy, oral copulation, or penetration of a genital or anal opening by a foreign object.
<b>Share-of-Cost</b>	An individual’s non-exempt net income in excess of the applicable SSI/SSP benefit level, which must be paid toward the cost of IHSS that has been authorized by the county.

<b>Shared Living</b>	A situation in which one or more applicants/recipients reside in the same living unit with one or more persons. A shared living arrangement does not exist if an applicant/recipient is residing only with their able and available spouse.
<b>Signature</b>	Writing or other mark that is placed upon a document for the purpose of authenticating it or giving it legal effect.
<b>Spenddown</b>	Spenddown refers to those medical services equal in value to the IHSS share-of-cost.
<b>Spouse</b>	A member of a legally married couple under the law of the state of the couple’s permanent home at the time they lived together or a person considered to be a member of a married couple for SSI/SSP purposes.
<b>Status Eligible</b>	An IHSS applicant/recipient that receives SSI/SSP. Financial, age, or disability factors of eligibility have been determined by the Social Security Administration and are accepted by IHSS.
<b>Step Parent</b>	A person who is married to the parent of a child and who is not the natural or adoptive parent of the child.
<b>Substitute Payee</b>	An individual who acts as a financial agent for the applicant/recipient.
<b>Turnaround Timesheet</b>	A three-part document issued by the State consisting of the paycheck, the statement of earnings, and the timesheet to be submitted for the next pay period.
<b>Verbal/Mental Abuse</b>	Fear, agitation, confusion, severe depression, or other forms of serious emotional distress that is brought about by threats, harassment, or other forms of intimidating behavior.
<b>Verification</b>	The process of obtaining acceptable evidence that substantiates statements made by an applicant/recipient.
<b>Voluntary Services</b>	Any IHSS PCSP, IPW, or IHSS-R compensable service provided voluntarily to an IHSS applicant/recipient.

