

**GENERAL ASSISTANCE HANDBOOK**

**MONTEREY COUNTY  
DEPARTMENT OF SOCIAL AND EMPLOYMENT SERVICES**

**GENERAL ASSISTANCE  
HANDBOOK**

# GENERAL ASSISTANCE HANDBOOK

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## TABLE OF CONTENTS

<u>Section</u>	<u>Title</u>	<u>Page</u>
90-100	<a href="#"><u>General Provisions</u></a>	5
90-101	<a href="#"><u>Right To Hearing</u></a>	6
90-102	<a href="#"><u>Method of Payment</u></a>	9
90-103	<a href="#"><u>Recovery of Assistance/Liens</u></a>	10
90-200	<a href="#"><u>Aid Category Definitions</u></a>	13
90-300	<a href="#"><u>Eligibility Requirements</u></a>	14
90-400	<a href="#"><u>Application Process</u></a>	27
90-401	<a href="#"><u>Beginning Date of Aid</u></a>	29
90-402	<a href="#"><u>Need and Determination of Grant Amount</u></a>	30
90-403	<a href="#"><u>Application Processing Procedures</u></a>	32
90-404	<a href="#"><u>Board and Care Process</u></a>	34

## GENERAL ASSISTANCE HANDBOOK

90-405	<a href="#">Immediate Need</a>	40
90-406	<a href="#">Budget Period</a>	40
90-407	<a href="#">Redetermination</a>	41
90-408	<a href="#">Determining Household Composition</a>	41
90-409	<a href="#">Determination of County Responsibility</a>	41
90-410	<a href="#">Overpayments</a>	41
90-411	<a href="#">Underpayments</a>	42
90-412	<a href="#">Definition of Income</a>	43
90-413	<a href="#">Treatment of Income</a>	43
90-414	<a href="#">Incapacity</a>	44
90-415	<a href="#">Notification Requirements</a>	47
90-500	<a href="#">Interim Assistance Program</a>	47

## GENERAL ASSISTANCE HANDBOOK

90-501	<a href="#"><u>Reimbursement for Special Cases</u></a>	51
90-502	<a href="#"><u>Reimbursement of Federal Money on Special Cases</u></a>	51
90-503	<a href="#"><u>Instructions for Completing Vouchers</u></a>	51
90-504	<a href="#"><u>Case Filing Instructions</u></a>	54
90-505	<a href="#"><u>Counting Case Actions</u></a>	56
90-506	<a href="#"><u>Special Program</u></a>	57
90-507	<a href="#"><u>Caseload Management</u></a>	66
90-508	<a href="#"><u>General Assistance Audit Process</u></a>	70
90-509	<a href="#"><u>Supervisor Review Process</u></a>	71

# GENERAL ASSISTANCE HANDBOOK

## 90-100 GENERAL PROVISIONS

[Table of Contents](#)

### .1 General

General Assistance and Emergency Aid are programs established by Resolution of the Board of Supervisors in accordance with Section 17000-17409 of the Welfare and Institutions Code. Assistance is to be granted to needy persons in accordance with rules and regulations adopted by the Board of Supervisors and policies and procedures established by the Director of the Department of Social and Employment Services.

### .2 Program Costs

Program costs, including assistance granted and costs of administration are entirely County Funds. There is no State or Federal Participation.

Reimbursement may be obtained for those cases granted Interim Assistance from the recipient when approved SSI/SSP.

Federal reimbursement may be obtained for certain legal permanent residents under the Immigration Reform and Control Act of 1986.

### .3 Right to Apply for Aid

Any person who believes himself/herself to be eligible for General Assistance or emergency Aid has the right to apply and shall be allowed to complete an application.

### .4 Right to Manage Own Affairs

The applicant/recipient has the right to determine his/her own living situation and make his/her own arrangements.

### .5 Promptness Requirement

.51 Eligibility must be determined and action taken to grant or deny assistance within thirty (30) days of the date of application.

.52 Denial action may be taken sooner if the applicant fails to cooperate, withdraws the application, or fails to keep an appointment.

.53 In any action to reduce or discontinue a General Assistance case, the recipient must receive 10-day noticing from the County prior to the action taking affect.

## GENERAL ASSISTANCE HANDBOOK

### 90-101 Right to Hearing-Appeals Process

[Table of Contents](#)

If an applicant/recipient is dissatisfied with any action taken in regard to his/her eligibility, amount of grant, or method of payment, he/she may request a hearing in the following manner:

- .1 The applicant/recipient may request a conference with a unit supervisor, to discuss a Notice of Action, in writing, by phone or in person. At the conference, the unit supervisor shall explain the reason for the action and shall permit the applicant/recipient to show that the action is incorrect. If the applicant/recipient is able to show the action is incorrect, or is able to establish a good cause for the failure, the action shall be rescinded within three (3) working days.

If the unit supervisor does not change the Notice of Action, the applicant/recipient may file for an appeal to have the decision reviewed again. Requesting a conference with a Unit Supervisor does not affect the applicant/recipient's right to appeal. Applicants/recipients do not need to have a conference before filing an appeal.

Applicant/recipients have only 30 days to ask for an appeal hearing. The 30 days starts on the effective date on the Notice of Action. If the applicant/recipient has good cause as to why they were not able to file for a hearing within the 30 days, they may still file for a hearing. If the applicant/recipient provides good cause, a hearing may still be scheduled.

.2

#### Appeal Hearing-

Applicants/recipients may appeal an action directly to the Department of Social Services. The request for an appeal must be in writing (for example, by completely filling out and returning the original Notice of Action form requesting an appeal), within the 30-day window (or show good cause for failure to do so), including, but not limited to, reasonable accommodations for persons with disabilities. A hearing will be scheduled where applicants/recipients can present their case. The hearing will be heard in front of a hearing officer. The Department of Social Services, through the hearing officer, will record the hearing. Applicants/Recipients are allowed to present written evidence or witness testimony on their behalf. Applicants/Recipients are allowed to have someone represent them (stand in their shoes) at the hearing, if the representative is authorized by the Applicant/Recipient.

#### The Appeal Request Must:

- (1) Be requested in writing (and include the case number) or by filling out the back side of the Notice of Action notifying of intent to appeal and return the form.
- (2) State the reasons for disagreement with the action and include the case number.
- (3) Be signed and dated.
- (4) Be filed within thirty (30) calendar days of the effective date on the Notice of Action.

## GENERAL ASSISTANCE HANDBOOK

- a. Applicants/Recipients have the right to ask for an appeal if they disagree with any county action. Applicants/Recipients have only 30 calendar days to request an appeal. The 30 calendar days' appeal request period starts from the date marked as the "Effective Date" on the Notice of Action and ends on the date the appeal is date stamped as received at the Department of Social Services, or the postmark date on the envelope, if the request is mailed. If the postmark date cannot be determined, the date the request was received can be used. All requests for an appeal shall be date stamped on the day the request is received at the Department of Social Services.
  - b. **Last Date to File:** If the last date to file the request for an appeal falls on a day when the Department of Social Services offices are closed, then the Applicants/Recipients shall have until the next working day to file the request.
  - c. **Claimants:** Applicants/Recipients will be referred to as the claimant after they have filed the appeal request.
  - d. **Good Cause:** If Applicants/Recipients have good cause as to why they were not able to request an appeal within the 30 calendar days, they may still request an appeal and include evidence in their request that shows good cause. An appeal hearing may still be scheduled, if they are found to have shown good cause. Examples of good cause are; Applicant/Recipient was in jail, or in the hospital, during the 30 calendar days when they should have requested the appeal, and have documentation of it; an Applicant's/Recipient's family member died during this time frame and they have a copy of the obituary, or death certificate, etc..
- (5) **Claimants may represent themselves at the Hearing:** The claimant may represent themselves during all aspects of the hearing process, *or* they may be represented by an attorney, an authorized representative, or any other person they designate, by signing a written statement to notify all parties of the claimant's intent to have a representative speak on their behalf during the appeal hearing. The claimant must authorize the person to be their representative in writing *prior* to the hearing if they do not attend the hearing.
- (6) **Overview of Appeal Hearing:** Claimants will receive a notice explaining the date, time and location of the appeal hearing. At the hearing, they will have an opportunity to present evidence (written and witnesses) and may be asked questions about the facts of their case. The Department of Social Services will record the appeal hearing. A decision will not be made at the appeal hearing. The appeal hearing officer will mail the claimant the decision within 30 days after

## GENERAL ASSISTANCE HANDBOOK

the appeal hearing. If the claimant still disagrees with the decision of the hearing officer, they may file a written request for review by the Director of Monterey County Department of Social Services or their designee. The Director, or their designee, will review the decision and the case file and make a final decision. For more details on each of these steps, please continue to read the information below.

### (7) **Appeal Hearing Rules:**

- (a) The claimant and/or authorized representative shall have the right to review the relevant sections of the case record, including any documents submitted by claimant and/or any other evidence used in making a determination of eligibility. Such review and copies of the relevant sections of the file shall be made available prior to the hearing.
- (b) Appeals shall be conducted in accordance with departmental procedures. All testimony shall be given under oath or by affirmation.
- (c) Witnesses may only testify at the hearing in the claimant's or authorized representative's presence. Witnesses for the Department of Social Services or for claimant may submit a written declaration if they are unable to testify. For an acceptable format for such written declaration, see your eligibility worker.
- (d) The claimant or authorized representative shall have the right to testify, present witnesses, present written documentation and cross/examine witnesses.
- (e) Decisions by the Appeals Hearing Officer are adopted by the Department of Social Services.
- (f) Claimants may file a petition for administrative mandamus in the Monterey County Superior Court within 90 days after the date the decision becomes final.

### (8) **Denial of a Request for a Hearing:** A claimant's request for an appeal hearing (or any portion of the request), may be denied in writing by sending a letter to them when:

- (a) The issue is not within the jurisdiction of the Department of Social Services appeals process.
- (b) The request for hearing is filed beyond the 30-calendar day time limit (with no good cause found).
- (c) The Appeals Hearing Officer determines at the hearing that the claimant or authorized representative is unwilling to present the case.
- (d) The Appeals Hearing Officer determines that the identical facts have been the subject of a previous hearing involving the claimant, within the previous



## GENERAL ASSISTANCE HANDBOOK

twelve months (such as the same excuse for non-compliance) and are not part of recurring issue.

- (e) The requestor of the hearing does not have standing to request the hearing.
- (f) The claimant abandons the hearing by failing to confirm or appear at the hearing without good cause.
- (g) If the appeal is denied or dismissed, the claimant may file a written request for a review by the Director of the Monterey County Department of Social Services or their designee within ten (10) calendar days of the date the decision was adopted. The filing date shall be determined by the date the written request is received and date stamped by the Department of Social Services. Claimants will be informed within fourteen (14) calendar days if a request for review is granted.

## AID PAID PENDING

- a. When the recipient filed an appeal prior to the effective date of the Notice of Action, aid shall be continued in the amount that the recipient would have been paid according to Department of Social Services procedures.

Recipients who file an appeal and receive aid paid pending shall be required to comply with and cooperate with all General Assistance eligibility and program requirements including participation in Job Search/Work Experience Program, pending the appeal decision.

- b. Any aid paid pending the appeal decision becomes part of the repayable General Assistance amount. Aid paid pending an appeal is adjustable from future General Assistant grants when the decision supports the Department of Social Services' action.
- c. **Exceptions:** Aid paid pending shall not be paid or shall cease when:
  - (1) The appeal hearing is withdrawn or abandoned.
  - (2) The appeal hearing is denied or dismissed.
  - (3) The Appeal Hearing Officer determines that the issue is one of law or regulation or change in law or regulation and not of incorrect application of the law or regulation.
  - (4) The claimant, without good cause, requests that the appeal hearing be postponed.

## **GENERAL ASSISTANCE HANDBOOK**

- (5) The appeal hearing is rescheduled after the claimant and/or the authorized representative failed to appear without good cause.
- (6) A final decision has been adopted.
- (7) Negative action unrelated to the hearing issues is proposed after an appeal has been filed and the claimant does not file a timely appeal on the new issue.
- (8) The eligibility renewal period expires.
- (9) If the appeal to the Director involves the suspension, reduction, or termination of assistance, as distinct from an original application, the original amount of the assistance shall be restored to the appellant pending the disposition of his/her appeal if it was suspended, reduced, or terminated, and if the appeal involves an issue of judgment as opposed to fact.

### **90-102 METHOD OF PAYMENT**

[Table of Contents](#)

Aid shall be given either by county warrant or vendor payment in the form of a voucher. Vendor payments shall always be used in the following situations:

- .1 Where it is determined that grounds exist for believing that the applicant will not apply money aid exclusively toward the purchase of the necessities of life.
- .2 Where it is determined that the applicant is in immediate need of the necessities of life and a vendor payment can be made more quickly than a county warrant.
- .3 When an emergency need arises, and a vendor payment is not possible, a manual warrant can be produced through the Immediate Need Voucher Process.

### **90-103 RECOVERY OF ASSISTANCE**

[Table of Contents](#)

- .1 The County is authorized to pursue collection and recovery of all aid payments made through the G. A. Program from existing resources and resources which may be acquired in the future.
  - .11 Aid payments made through the GA-WEP program are not recoverable unless paid as a result of error or fraud.
  - .12 The County uses the services of the Fiscal Division of the Monterey County Department of Social and Employment Services for collection purposes.

## GENERAL ASSISTANCE HANDBOOK

- .13 The County uses the Interim Assistance Program for recovery of payments made on a pending SSA application.
- .2 All applicants will sign the Agreement to Reimburse and Grant of Lien, form CO 58-G, in the presence of a deputized worker.
  - .21 The CO 58-G is filed in the case record and no further action taken if the customer is repaying through work in the GA-WEP.
  - .22 If the status of the case changes or the customer refuses to work for payments already received, collection action is pursued.
- .3 Collection action is pursued through a referral to the Fiscal Division no later than thirty days after the case is discontinued.
  - .31 A copy of the CO 58-G is attached to a CO 747-E, Collections Transmittal.
    - .311 Collection is pursued on cases which are closed and the following exists:
      - a. Whereabouts of the customer is known.
      - b. Customer has resources available for payment.
    - .312 Collection is pursued on active cases when the County becomes aware that the customer has newly acquired or unreported income.
    - .313 The CO 747-E is completed using the Excel program, one copy is retained for the case record and a copy is sent to Fiscal.
  - .32 Liens are filed on cases where the customer has real property or pending cash settlements or entitlements.
    - .321 Liens cannot be filed on the following types of property:
      - a. Cash less than \$50
      - b. Personal goods less than \$500
      - c. Interment space or burial trusts up to \$500
      - d. Income used to meet living expenses.
    - .322 Obtain a legal description of the real property. Review Microfiche property rolls to obtain name of owner/owners, parcel number, date recorded, and page number. Record on the CO 58-G.

## GENERAL ASSISTANCE HANDBOOK

- .323 Obtain employer identification number, attorney information, date of injury, and insurance company for pending injury/accident settlements. Record on CO 58-G.
- .324 Complete the CO 747-E in triplicate. Retain one copy for the case record and forward two to Fiscal with a copy of the CO 58-G for liens.
- .325 Mark the outside of the case file, **LIEN-DO NOT DESTROY**. Once case is discontinued, forward case to warehouse for storage in a separate area.
- .33 Provide needed information to Fiscal Division when needed for collection or to enforce the lien.
  - .331 Forward needed information using the CO 747-E.
  - .332 Retain one copy for the file and send to Fiscal.
- .34 Notify Fiscal Division of the following types of information on cases which have been referred:
  - .341 Customer files a request for Pre-Lien Enforcement Hearing through the County Administrative Office.
  - .342 Customer obtains additional property or income.
  - .343 Customer moves or whereabouts changes.
- .35 Fiscal will take the following actions on referrals.
  - .351 Forward CO 747's to Revenue Division
  - .352 Authorize Release of Lien as appropriate.
    - a. When the case record cannot be located on old liens preventing us from collecting required payment data.
    - b. When instructed to do so by administrative decision.
  - .353 Maintain a file box of established liens on prior cases. Do not prepare file cards on new cases.
  - .354 Obtain case record when Title Company or attorney requests information on closed case.

## GENERAL ASSISTANCE HANDBOOK

- .36 Fiscal Division will take the following actions:
  - .361 File the lien on property as instructed.
  - .362 Contact the GA Eligibility Worker when payment data is needed.
  - .363 Post collections to account # 551-6600-5101.
  - .364 Suspend lien process when notified that customer has filed a request for pre-lien enforcement hearing.
  - .365 Once collection is completed, direct the Warehouse to take the “Lien Enforcement” designation off of the existing case file and dispose of case file as appropriate.

### 90-200 AID CATEGORY DEFINITIONS

[Table of Contents](#)

#### .1 General Assistance Regular

Aid to eligible residents of Monterey County who are not eligible for a categorical aid program and whose income and resources are inadequate to meet basic needs according to the County Standards as established by the Board of Supervisors.

#### .2 General Assistance Temporary

Aid to persons who are not Monterey County residents shall be given only pending the return of such persons to the State or County of their residence, and, in any event, for a period of not more than fifteen (15) calendar days, and in an amount not to exceed one hundred dollars \* (\$100) per person.

- .21 The eligibility standard of non-residents shall be determined by the same standards as are prescribed for County aid to its residence, except that residence in the County is not required.
- .22 The County will incur all reasonable and necessary expenses in transporting eligible non-residents to their places of residence if no other funds are available for such purpose. Staff will call a contact individual for the customer in the prior county to ensure that the customer has a place to return to before allowing the transportation expense.
- .23 Employable single persons and couples without children are not eligible. They may apply for Regular General Assistance and must meet those eligibility standards.

## GENERAL ASSISTANCE HANDBOOK

### .3 Emergency Aid Payments (Voucher Payments)

Except for prohibitions and limitations listed below, Emergency Aid may be granted for the limited relief of a financial crisis related to the urgent needs of an individual or individuals for food, shelter, clothing, utilities, transportation, employment, health or safety.

- .31 Such Emergency Aid is non-continuing and on a one-time basis when income is not immediately available for the relief of urgent needs.
- .32 Such Emergency Aid may not be used to (a) augment need items covered by State or Federally shared programs, (b) cover poor money management, or (c) augment Regular General allowances.
- .33 Eligibility for Emergency Aid shall be determined by the same standards as are prescribed for County Aid to its residents, except that (a) residence in this County is not required, (b) proof of citizenship and legal permanent residence requirements may be waived, (c) personal and real property limitations may be waived, and (d) the maximum amount of aid may not exceed one hundred dollars \* (\$100.00) per person.
- .34 The value of Emergency Aid shall not be considered when determining eligibility and benefits amount for Regular General Assistance.

\* In extenuating circumstances, the Director, Assistant Director, or Deputy Director of Income Maintenance may authorize an amount not to exceed the payment standard for that size household. The person requesting the authorization must prepare a narrative summary to justify the payment. This will include all pertinent information concerning eligibility, available resource, and the continuing plan for services. That person's supervisor and Manager will approve this prior to submission to the Director.

## 90-300 ELIGIBILITY REQUIREMENTS

[Table of Contents](#)

To be eligible for aid, every person, shall meet the following requirements:

### .1 Residence

Be a resident of Monterey County. No duration period of residence in the County is required. A person established residence in the county by physical presence for purpose not temporary in a nature. Residence, once established, continues until the person leaves the County and establishes residence elsewhere.

- .12 Exceptions to physical presence factor in residence:

## GENERAL ASSISTANCE HANDBOOK

- .121 Persons sent from the first county to a second county for the purpose of receiving medical care or treatment for drug or alcohol abuse remain the responsibility of the prior county.
- .122 A person who comes to Monterey County of his/her own volition for such care but who maintains a home in another county, or who considers another county to be his/her residence and intends to return here, retains residence in that county.
- .123 Persons described in .121 and .122 will be referred to their county of residence to apply for General Assistance.

**Note:** Care must be taken to thoroughly explore place of residence of persons referred for a period of convalescence in rest homes and nursing homes upon discharge from hospital. These persons sometimes are not Monterey County residents.

### .13 Verification of residence:

- .131 Applicant's statement or evidence showing address in which the person states they reside.

### .14 Non-Residency in Drug/Alcohol/Mental Health Treatment Facility:

Must not be a resident in a drug and/ or alcohol and/or mental health residential treatment facility which is a community care facility that requires a license under Chapter 3 (commencing with Section 1500) of Division 2 of the Health and Safety Code of the State of California.

Some treatment facilities in which residence precludes eligibility for General Assistance are Genesis House, Sun Street residential facility, Door of Hope, Victory Outreach, and Interim (mental health) crisis and transitional housing. Those facilities which do not qualify as residential treatment facilities are Sun Street day care facility and the Interim satellite houses.

## .2 Citizenship and Legal permanent residence

### .21 Be a Monterey County resident who is either:

- .211 A citizen of the United States (defined for eligibility purposes to include persons who, though not United States citizens, are nationals of the United States by reason of

## GENERAL ASSISTANCE HANDBOOK

their birth in certain unincorporated United States territories, such as American Samoa or the American Virgin Islands),

or

.212 A legal permanent resident admitted for permanent residence,

or

.213 A legal permanent resident permanently residing in the United States as a conditional entrant (refugee) pursuant to Section 207(c) of the Immigration and Nationality Act (INA),

or

.214 A legal permanent resident lawfully in the United States for an indefinite period as a parolee pursuant to Section 212 (d) (5) of the INA,

or

.215 A legal permanent resident lawfully in the United States under the Immigration Reform and Control Act of 1986 pursuant to Section 245A, 210, and 210A of the INA.

.22 Aid shall not be granted to Ineligible non-citizens pending verification of their legal permanent resident status. The status of undocumented legal permanent residents shall be verification by referring the legal permanent resident to the local INS office to obtain verification of current legal permanent resident status. The verification will be attached to the G-845 and referred to INS for Secondary Verification under the SAVE program.

The CA 64A must accompany these documents if the legal permanent resident is present under SAWS or Amnesty Legal Permanent Resident programs.

.23 Aid shall be granted up to a period of 90-days pending verification of citizenship. Questionable citizenship shall be treated as in .22 above.

(a) EW shall implement a Vital Records Request, CO198 or CO 199, to assist customer in obtaining proof of citizenship.

(b) After 90 days, if verification not received, case review will be completed and a good cause/no good cause determination will be made. Case status will stand until verification is received.



## GENERAL ASSISTANCE HANDBOOK

- .24 Federal reimbursement is available to counties who aid certain legal permanent residents through the General Assistance Program. Counties must complete the DFA 876, State Legalization Impact Assistance Grant Funds Climable Based on Expenditures for Eligible Legalized Legal permanent residents General Assistance (SLIAG) report. Eligible legal permanent residents include:
- .241 Pre-1982 legal permanent residents granted temporary resident status under Section 245A of the INA. The legal permanent resident will be issued a Temporary Resident Legal permanent resident Card, I 688-A, to verify legal permanent resident status. When permanent status is granted, an I-551 will be issued.
  - .242 Special Agricultural Workers (SAWS) will receive the I-688-A card when granted temporary residence status. Permanent residence status may be granted after one year. At that time, the I-551 will be issued.
  - .243 Replenishment Agricultural Workers (RAWS or a SAWS) will be issued an I-688 and I-688-A when granted temporary status. After three years, the legal permanent resident may apply for permanent residence status. At that time, the I-551 will be issued.

The following procedure will be used to report eligible legal permanent residents in order to obtain reimbursement.

- .244 Eligible legal permanent residents will be coded with the Assistance Unit (AU) number of -8. The legal permanent resident will be in a separate case if there is more than one member in the GA case.
  - a. The payment amount for the individual will be the payment standard for one.
  - b. The other household member will receive an amount, which reflects the difference in the payment standard between the total in the household and the individual legal permanent resident.

### **EXAMPLE:**

Father (SAWS) applies for aid for his wife and child who are U.S. citizens. We will establish two cases: one for the father and one for the wife and one child. Father will receive the maximum for one

## GENERAL ASSISTANCE HANDBOOK

with his case coded-8 AU number. Other two family members will receive Regular GA in the amount of the difference as follows:

Payment Standard for 3: \$ 611

Father (aid for 1): - 340

Family (aid for 2): \$ 271

- c. Both cases would be carried by the same EW. Forms would be photocopied, so the family does not have to complete duplicate forms.
- d. Shelter and utilities would be pro-rated between the cases.
- e. Persons not exempt are required to do GA-WEP.
- f. The report, DFA 876, will be completed by Fiscal on the 20<sup>th</sup> of each month.
  - (1) These cases will appear on the payroll as aid code 90, AU # -8.
  - (2) A copy of the payroll must be attached to the report.
  - (3) A copy of the report will be sent to the GA Analyst.
  - (4) Retroactive reimbursements will be shown as adjustment on the payroll.

### .3 Property limits for the Household

.31 Applicants/recipients who are youth transitioning out of the Independent Living Program (ILP), due to age, and have an ILP account may be eligible if all the following conditions are met:

- a) The youth was a dependent of the County, has “aged out” of Foster Care and now resides, or continues to reside in the County.
- b) The youth was an active participant in the ILP during the time of their dependency and continues to receive ILP aftercare services.
- c) The youth has a realistic emancipation plan that has been developed and approved by the ILP Coordinator.
- d) The youth’s ability to follow through with their approved emancipation plan is abruptly disrupted due to an unexpected, short term, verified disability.

## GENERAL ASSISTANCE HANDBOOK

- e) The youth has a verified emancipation savings account with a balance of \$1,000 or less.
  - f) The youth meets all other criteria for aid set forth in the G.A. regulations, including income.
  - g) The waiver authority process would begin with the ILP Coordinator, following a thorough assessment of the youth's situation to determine if the above conditions have been met. Once met, the ILP Coordinator would discuss the request with the Family and Children's (FCS) Program Manager and the Deputy Director before requesting the property waiver from the G.A. program.
  - h) A memo from the County's ILP Coordinator will be completed to document the steps taken by the Coordinator that authorizes the applicant as a candidate of this provision. The memo will be sent to the FCS Deputy Director, or his/her designee, for signature to complete the authorization process.
  - i) Once the waiver process is complete, the County's ILP Coordinator will send a copy of the waiver and supporting documents to the assigned Eligibility Worker.
- .32 The legal or equitable owner of real or personal property shall have a combined net market value of \$ 2,250 or less. The following types of property shall be exempt for purpose of determining said limit:
- .321 Real or personal property used as a home.
  - .322 Household furniture and appliances
  - .323 Clothing
  - .324 Tools and vehicles necessary for the individual's trade.
  - .325 Equity in a motor vehicle of \$ 2,250 or less.
  - .326 Burial plot, vault, or crypt for use by any member of the family.
  - .327 Up to but not exceeding \$1500 equity in property belonging to the legal permanent resident's individual sponsor.
- .33 The net market value (NMV) of real or personal property in the owner's equity in that property. Determine NMV by subtracting the encumbrances of record from the market value.
- .34 Market Value of older vehicles shall be determined as follows:

## GENERAL ASSISTANCE HANDBOOK

- .331 Multiply the annual license fee (which does not include the registration or weight fees) by 50.
- .332 If the license fee is not available, the value shall be established by consulting the vehicle license fee chart provided by the Department of Motor Vehicles for that purpose.
- .333 If the value cannot be established by the license fee, the customer must provide one quick-sale bid
- .35 Household owns \$340 or less in liquid resources. This includes cash on hand or in bank accounts, and other financial instruments including but not limited to securities, stocks, bonds, mutual fund shares, cash surrender value of insurance policies, promissory notes, mortgages, deeds of trust, and pensions.
- .36 Property deemed available to the legal permanent resident from the sponsor shall be determined as follows:
  - .361 Add the net value of personal property owned by the sponsor and sponsor's spouse.
  - .362 Subtract \$1500
  - .363 Divide the remainder by the number of legal permanent residents which are sponsored by the sponsor.
  - .364 Determine if remainder deemed to the legal permanent resident and determine if it exceeds the property limit.
- .4 Utilization of Property

Property other than the home must be utilized to provide for the needs of the applicant/recipient.

- .41 Utilization is defined as rental or bonafide attempts to rent or sell the property concerned at fair market value.
  - .411 A reasonable return on utilization of property is established as 6% of the total market value, not net market value. Property tax rolls or tax statements must be reviewed.
  - .412 Applicants will be allowed three months from the beginning date of aid in which to make and initiate a plan for utilization of property.
  - .413 An applicant/recipient who refuses to consider development of a plan for utilization property becomes ineligible immediately.

## GENERAL ASSISTANCE HANDBOOK

.414 An applicant or recipient may be given one year (including the initial three months) in which to successfully implement the plan of utilization.

### .42 Sale of Property as Utilization

.421 If other means of utilization prove unfeasible, sale of property may be indicated. Sale is considered to be an adequate plan of utilization if the property is listed or advertised for sale at an amount consistent with current market value and on terms of sale that are consistent with the requirements of reasonable contribution toward current needs.

- a. Sale is not considered reasonable if the property is a multiple dwelling, one unit of which is used as the home of the applicant or recipient.
- b. Sale is not considered feasible if the net return would not exceed the General Assistance property maximum.

### .5 Employment / Training:

.51 May not refuse, without good cause, to register for and accept employment, manpower services, or training with the Californian Employment Development Department or Refugee Services Program of the Monterey Bay Counties. Good cause includes, but is not limited to, physical or mental illness, disability, injury, pregnancy, age or the required in-home care of children under the age of six.

.511 The referral process to EDD is as follows:

- a. The customer will be given the form, CO 25, to be used as the proof of registration document and record of contacts with EDD.
- b. EDD will explain the expiration period for work registration. Registration must be renewed prior to the end of the period.
- c. EDD will use the GEN 827 to notify the worker when the customer registers, refuses to register, or refuses to cooperate.
- d. EDD will stamp the CO 25 when the customer renews the registration.

.512 Individuals may be deferred based upon an evaluation of their age, skills, personality and behavior. If deferred, referrals for other services will be made as appropriate.

.513 If EDD requires an appointment in order to register for work aid will not be delayed pending registration for work with that agency.

## GENERAL ASSISTANCE HANDBOOK

- .52 Does not refuse to work, as a condition of aid, on a work experience program under the direction of the Board of Supervisors pursuant to Section 17200 of the Welfare and Institution Code. Persons exempt from work registration may be exempt from this requirement.
- .521 Work performed by a recipient under the Work Experience Program (GA-WEP) shall be considered to be reimbursement of the amount of aid granted at the value of the current Federal or State minimum wage, whichever is higher.
- .522 Applicants shall not be required to reimburse the county for payments received under the GA-WEP when eligibility is established. An overpayment may be computed and collection action taken if aid was paid based on fraudulent or erroneous information.
- .523 Individuals, who have received G. A. prior to participation in the work program, will have to complete their assignment before any further payments will be issued.
- .524 In cases where there is no assignment due to unavailability of placements, eligibility will continue as long as other requirements are met. The customer will still be required to complete the Job Search document, have the CO 25 completed by EDD, and they will be obligated to reimburse the County for GA payments received in this situation.
- .525 To determine the placement hours, the G. A. aid amount is divided by the current State minimum wage amount. The number of hours cannot exceed the amount of the payment.
- a. A person cannot work more than 40 hours weekly regardless of the payment amount to the household.
  - b. A person failing to complete the work assignment will be paid only for the number of hours worked.
  - c. A person working for the household's grant amount will be paid the grant amount if the number of assigned hours is worked. Any amount of grant paid in excess of the hours worked is considered a loan.
- EXAMPLE:  
A man, receives \$340 monthly for G. A. The man works 31 hours a week in return for the full grant. If he fails to work the assigned hours, without good cause, he will be paid only for the hours worked. See b. above.
- .526 Participants must find their transportation to and from the work site. Bus tickets or gas vouchers may be issued for this purpose under the following guideline:

## GENERAL ASSISTANCE HANDBOOK

- a. Bus tickets are to be used for the intended purpose of assisting the customer complete the GA-WEP assignment.
- b. Customers who abuse the use of tickets will not be issued additional tickets until the value of the abused tickets is repaid. Good cause can be allowed for illness or family emergency beyond the control of the customer.
- c. Customers who abuse or misuse the bus tickets will be issued tickets weekly.
- d. The need for bus tickets will be made on a case-by-case basis. The worker will evaluate the need and the expense as follows:
  - (1) Bus tickets will not be issued if the customer lives within one mile of the work site
  - (2) The transportation allotment in the GA budget (\$10) is allocated for bus ticket use. For example, currently a bus ticket has a value of \$2, so the \$10 dollar allotment would buy 5 tickets, if the customer has a job site work location to go to and will need 10 bus tickets, staff are to have the customer use their \$10 allotment to purchase tickets, and then the GA EW would give 5 more tickets to complete the job assignment.
  - (3) If the transportation allowance is not include in the aid payment due to high expenses for housing, bus tickets may be needed to augment the aid. However, the worker will discuss the number of tickets needed and minimize the number of tickets.
  - (4) Customer will be required to conduct job search while doing GA-WEP to reduce the number of tickets needed.
  - (5) The number of bus tickets cannot exceed the number of trips needed for each assignment.

.527 An attendance record/timesheet, CO 673-S, will be completed in triplicate. One copy will be retained in the case record, the original and a copy will be taken to the job site by the customer. The original will be completed by the job supervisor and given to the customer. A copy will be retained by the worksite supervisor. The customer must bring the original to the Eligibility Worker so that payment can be processed. The assigned EW or their

## GENERAL ASSISTANCE HANDBOOK

supervisor are the only individuals who may adjust the customer's hours on the CO 673-S. It is not to be changed by the customer or the site supervisor.

(a) The participant must notify his/her worker prior to not showing up for GAWEP and explain why he/she is unable to work. If a customer is sick and unable to work he/she may be reassigned hours. Hours will be reassigned in the same month (if there are enough days remaining to complete assigned hours). If the participant does not notify the worker first, he/she cannot make up missed hours. If participant has a job interview, he/she must notify his/her worker and job site supervisor of the appointment prior to going to the appointment. If the participant does not notify worker/supervisor he/she cannot make up missed hours. Sick/injured/job interviews are the only valid reasons for not showing up for work.

(b) Recipients who work their hours in a Community Benefits Office must do the following:

- Assigned hours must be completed timely
- Recipient must review, sign and date a letter of confidentiality AD# 95-02. Original is given to customer, and copy goes into the case.
- Recipient must be supervised by someone other than the GA worker/supervisor. This individual will sign all timesheets, and recipient will report to that individual.

.528 Recipients who lack language skill common to the area may be enrolled in English as a Second Language (ESL) class as a substitute for the GA-WEP assignment. Job Search will be required if class time is less than 80 hours per month. Maximum term is 9 months or when minimum proficiency is reached as verified by the instructor.

.529 Recipients must complete the unsupervised Job Search requirement prior GA-WEP assignment. The number of job search contacts will be established by the worker but may not exceed 24 per month.

(a) Recipient must work assigned GAWEP hours first then complete a job search for the rest of the month. Job search is completed and returned to the EW at the end of the month. The new GAWEP hours are assigned for the upcoming month.

.53 Recipients may not be participating in training (unless approved under the Training Assistance Program) including but not limited to, on-the-job training and/or schooling. Recipients must be available to work assigned GAWEP hours, without restrictions

.531 Recipients enrolled but not participating the CWES program are not exempt from GA-WEP.



## GENERAL ASSISTANCE HANDBOOK

- .532 GA-WEP hours are not counted towards the CalWORKs requirement for connection with the labor force.
- .54 The following procedures will be instituted when a GA-WEP participant is injured on the job:
  - .541 The customer must report the injury immediately to the worksite supervisor.
  - .542 The worksite supervisor will phone the DSES placement worker the same day to report the injury. The DSES placement worker will make an entry on the CO 21-G in the case file. A tickler will be made for the following day to contact the work site supervisor to insure the forms have been given to the injured worker.
  - .543 Within 24 hours, the worksite supervisor will provide the injured employee with the Form 5020, Report of Occupational Injury or Illness, form DWC-1, Employee's Claim for Worker's Compensation Benefits, and the "Brief Summary of Worker's Compensation Benefits".
    - a. The work site supervisor will complete the supervisor's section of each form.
  - .544 If the employee is unable to receive the forms, the worksite supervisor will contact the DSES placement worker who will follow-up the same day to get the forms completed by making a home visit or hospital visit.
  - .545 The date the forms were given will be entered on the Industrial Injury Log and the Log forwarded to the DSES placement worker.
  - .546 Inform the injured worker to return the forms within five calendar days (including weekends) to the DSES placement worker.
    - a. If the forms were mailed or picked up by an authorized representative for the injured worker, instruct the worker in writing of the five-day return requirements.
  - .547 The DSES placement worker will set a control for the 5<sup>th</sup> day to insure the forms are received.
    - a. If the forms are not received, the injured worker will be contacted by phone or a home visit to obtain the forms.
  - .548 Upon receipt of the forms, the DSES placement worker will make copies of the forms for the case record, complete the Industrial Injury Log to indicate the date received, and forward the following forms to DSES Personnel at the Quadrangle by the 8<sup>th</sup> day of the injury:

## GENERAL ASSISTANCE HANDBOOK

- a. DWC-1
- b. State form 5020
- c. Industrial Injury Log

- .549 DSES Personnel will follow existing procedures for distribution of the forms.
- .550 ALL FORMS MUST BE DISTRIBUTED WITHIN 10 DAYS OF THE DATE OF THE INJURY.
- .551 If recipient is injured on the job, they will be paid the balance of their hours that were pending at the time of their injury.

### .6 Utilization of Other Resources:

- .61 Agrees to take all actions necessary to obtain unconditionally available income, including public assistance, a relative's offer of contribution benefits available to veterans of military service, Social Security and Unemployment Benefits, possible Sponsor contributions, and retirement or pension plans.
- .611 Applicants/recipients who appear to be eligible for other aid programs (e.g. SSI) must follow-through with the eligibility determination. All applicants/recipients must be informed of the SSI Advocacy services available through DSES. Failure to follow-through without good cause will result in ineligibility for GA.
- .612 Verification of application for SSI denial must be submitted, the EW then makes a determination if an appeal needs to be submitted.
- .62 If, when owed a legal duty of support by another, does not unreasonably neglect or refuse to enforce, or permit the enforcement of such duty of support.
- .621 Does not refuse to provide requested information regarding the income and resources of a sponsor, or sponsor's spouse.

### .7 Exploration of Resources Available from Relatives:

Willingness and ability to contribute to the support of a relative will be explored. However, if a relative, other than a spouse, is unwilling or unable to contribute, there is no requirement that they do so, even though the applicant/recipient may be living with a relative.

- .71 General Assistance applicant/recipient living with SSI/SSP relative (including spouse): no income may be considered from the SSI/SSP relative unless there is a voluntary contribution. If there is not, housing and utilities will be computed on a shared basis.
- .72 General Assistance applicant/recipient living with a CalWORKs recipient

## GENERAL ASSISTANCE HANDBOOK

(including his/her spouse) the CalWORKs recipient may not be required to make a contribution to the General Assistance applicant/recipient whether or not they are related except for the earned income exemption.

### .8 Age:

- .81 Unmarried minor (under age 18) voluntarily residing outside their parent's home are not eligible to General Assistance. In extenuating circumstances, they may be eligible to Emergency Aid. Refer these children for other appropriate programs and services.
- .82 Persons age 65 and over must sign the SSP 14 and apply for Interim Assistance in order to be eligible. They may be eligible for SSI/SSP and the county may require automatic reimbursement as a condition of eligibility.
- .83 Legally married couples and emancipated minors regardless of age may be eligible for General Assistance (Regular).

### .9 Income:

- .91 Applicant/recipient has money/income, from all sources, which is less than the basic standard of assistance as established by the Board of Supervisors.
- .92 Applicant/recipient receives support, other than money, from others, the immediate cash value of which, by itself or when added to his/her money income does not exceed the standard of assistance as adopted by the Board of Supervisors.
  - .921 Applicant/recipient has income deemed from a sponsor which does not exceed the payment standard for the legal permanent resident when an amount equal to the payment standard for the number of legal permanent residents sponsored is deducted.

## 90-400 APPLICATION PROCESS

[Table of Contents](#)

- .1 The applicant is expected to apply, complete all necessary forms, provide all necessary information, and fulfill all applicable requirements.
  - .11 If the applicant is unable to complete the application forms, an authorized representative who has knowledge of the application forms, and knowledge of the applicant's income and resources may do so.
- .2 The applicant will be advised of the responsibility for reporting:
  - .21 Change of address

## GENERAL ASSISTANCE HANDBOOK

- .22 Receipt of income and/or resources and family and household composition changes within 5 working days either verbally or in writing.
  - .221 Income and resources of sponsor each month when the income and resource have been deemed available to the applicant/recipient legal permanent resident.
- .23 Job Search activities in cases in which Job Search is a requirement of eligibility. The customer is required to submit the form CO 551-S, Job Search Report, to the worker. The worker may vary the Job Search requirement depending upon the GA-WEP assignment, jobs available, and the personal needs of the customer. Customer must find his/her own transportation to look for work. The transportation allowance can be increased to meet this need, the increase comes in the form of bus tickets. However, the G. A. payment cannot exceed the standard.
- .24 Assigned EW is to request an IEVS via ISAWS if a Food Stamp application, or MEDS if solely a G.A. application.
- .25 If the customer becomes irate/unpredictable while being interviewed, the GA worker is to take the following action:
  - .251 The GA worker is to excuse themselves from the interview and call the Duty Supervisor and request that they come to the interview room and intervene. The EW is to wait outside the interview room until the Duty Supervisor arrives. Once the Duty Supervisor arrives, the EW is to explain the situation and let the Duty Supervisor discuss the issues with the customer.
  - .252 If the Duty Supervisor is unable to calm the customer, they are to confer with the Program Manager as to next steps. If the customer is unwilling to comply and work with the EW, the Duty Supervisor is to call the local law enforcement for assistance.
  - .253 Once the customer complies or is asked to leave/is removed from the premises, they are to complete an incident report, describing the situation and the outcome.

### 90-401 BEGINNING DATE OF AID

[Table of Contents](#)

- .1 Payments shall be made by County warrant, directly to the recipient through the appropriate 278-M action.
  - .11 Once initial payment is made, all subsequent payments for GA-WEP cases may be issued via the General Assistance Online Automated

## GENERAL ASSISTANCE HANDBOOK

System (GAOS). Continuing grants are completed via M-Sheet process for all other aid codes.

- .2 Beginning date of aid is the date of application if all eligibility requirements are met or the first day of the month following the date of application in which all eligibility requirements were met. The date all eligibility requirements are met is the date of application if eligibility is present at that time.

- .21 The beginning date of aid is not delayed because documentation/verification is not present on the date of application through no fault of the applicant.

EXAMPLE: Customer applies on November 26<sup>th</sup>. Customer thinks he has about \$49 in the bank. The applicant cannot provide verification until December 2<sup>nd</sup>. When aid is granted, it is granted from the 26<sup>th</sup> of November.

EXAMPLE: Customer applies on November 26<sup>th</sup>. Applicant has a vehicle valued at \$2000. Applicant disagrees with the valuation and obtains an estimate from a car dealer. He brings in the estimate, which is \$800 on December 2<sup>nd</sup>. When aid is granted, it is granted from the November 26<sup>th</sup>.

EXAMPLE: Customer applies on November 26<sup>th</sup>. GEN 827 is given to applicant to register for work. EDD cannot see the applicant until after the 1<sup>st</sup> of December. Aid is granted from the 26<sup>th</sup> of November. GA-WEP hours are combined for November and December. GA-WEP hours cannot exceed 160 hours per month. Customer may be working in arrears to account for beginning date of aid.

- .22 A check for cash may be computer-issued immediately and held for the applicant to pick up the following day.
- .23 Vouchers issued prior to the granting of the case do not affect the beginning date of aid. Aid would be granted for the month the voucher is issued but regular payment is pro-rated from the beginning date of aid.

EXAMPLE: A food voucher is issued in late November. Eligibility requirements are met in December. Aid is granted effective with the date of application. However, regular assistance is pro-rated from the 1<sup>st</sup> of December.

- .22 Aid will not be allowed in those instance in which:

- .221 The applicant becomes ineligible before action is taken to allow the aid;

- .222 The applicant leaves the area before action is taken to allow aid, even though it may appear that he/she may have been eligible at the time of application.

# GENERAL ASSISTANCE HANDBOOK

## 90-402 NEED AND DETERMINATION OF GRANT AMOUNT

[Table of Contents](#)

A person or family is determined to be needy for purpose of General Assistance if net non-exempt income is less than the Standard of Assistance set by the Board of Supervisors.

- .1 The amount of monthly payment for an eligible person residing in his/her own home shall be determined as follows:
  - .11 Determine the combined total anticipated expenses for shelter, utilities, transportation, household operations, food and personal needs; however, under no circumstances shall this amount exceed the maximum Standard of Assistance established by the Board of Supervisors.
  - .12 Determine the net non-exempt income anticipated to be available to the applicant/recipient.
  - .13 Subtract the net non-exempt income from the amount determined in .11 above.

The difference, if any, shall be the amount of aid a person or family is entitled.

### Example # 1 (Single Ind.)

### Example # 2 (Single Ind.)

#### Anticipated Needs:

#### Allowable Needs (Max Grant):

Shelter	- \$ 250.00
Utilities	45.00
Food	81.00
Personal	10.00
Household	15.00
Transportation	22.00
<hr/>	

\$ 207.00
00.00
113.00
10.00
00.00
10.00
<hr/>

TOTAL: \$423.00

\$ 340.00

#### Anticipated Income:

#### Anticipated Income:

Earnings: \$ 200.00

Earnings: \$ 200.00

#### Lesser of Anticipated Needs or Maximum Standard of Assistance:

\$ 340.00 Maximum Stand  
- 200.00 Earnings

\$ 340.00 Anticipated Need  
- 200.00 Earnings

\$ 140.00 G. A. Payment

\$ 140.00 G. A. Payment



## GENERAL ASSISTANCE HANDBOOK

- .2 Eligibility Worker will complete General Assistance Application CO 107-E, with the assistance of the applicant, in the computer system. After reviewing the completed CO 107-E, the applicant will sign and date the document
- .3 Review General Assistance-Statement of Rights and Responsibilities (CO 604-E) and What is Welfare Fraud (CO 800-E). Applicant signs these forms.
- .4 Granting Cases:
  - .41 An Authorization Document (278-G) is completed.
  - .42 A Records of Contact and Documents (CO 21-G) is completed.
  - .43 All completed papers, plus forms CO 262-G, CO 107-E, CO 58-G, CO 800-E, CO 239-E, and CO 261-G are clipped together and routed to clerical to be boarded and a case file set-up.
- .5 Interview Requirement
  - .51 A face-to-face interview is required on all applications except those cases in which a Board and Care or Personal Need Payment is authorized upon placement by the Public Guardian/Conservator's Office.
- .6 If the applicant is financially eligible and:
  - .61 Potentially employable, a Work Registration (GEN 827) is issued and he/she is required to register for work with the Work Experience Program and EDD. Work Registration at EDD is confirmed with the completion of the CO 25, including a stamp from EDD

### OR

- .62 States he/she is unable to work for medical reasons, a Medical Report, form CO 840-E, is issued and the individual is advised to take it to Natividad Medical Center or a private physician if the applicant/recipient states they have one. If and when the CO 840-E is returned verifying an inability to work the applicant is eligible to receive General Assistance for the length of disability as reported on the CO 840-E.
  - .621 If the disability appears to be permanent, the applicant is referred to Social Security with an SSP 14 to apply for SSI/SSP. The services of an SSI Advocate are also offered to the applicant/recipient.
  - .622 If the CO 840-E is returned with a "work with limitations" designation from the doctor, the applicant/recipient has two options



## GENERAL ASSISTANCE HANDBOOK

.6221 The applicant/recipient may be assigned a worksite slot, as long as it is deemed appropriate for the limitations the applicant/recipient currently has. If this is selected, the case is assigned a FBU of -5 as an employable individual and reimbursement is not pursued when the case is discontinued. Ten (10) job searches are mandatory at initial month of application, twenty-four (24) each month thereafter. Once the job search and job site assignment are completed and approved/signed-off timesheet are submitted by the applicant they are paid a pro-rated amount (if application date is after the first of the month) in a GA allotment. Each month thereafter, when the twenty-four job searches and completed job site assignment are submitted, the customer will be paid for the number of hours they have worked.

.6222 If the applicant/recipient chooses not to work, or an appropriate assignment cannot be located for the limitations listed on the CO 840-E, the applicant/recipient may still receive GA benefits as a FBU of -2, though they must be informed that any payments issued under the -2 designation must be reimbursed once the GA case is discontinued. Staff may also inform the applicant/recipient of the SSI Advocacy Program and that the SSI Advocacy staff are potentially available to assist them in applying for SSI and guiding them through the process.

### .7 Home Visits

.71 Home visits will be made when necessary to verify information or to clarify conflicting information prior to the issuance of Emergency Aid or General Assistance.

### .8 Coding of General Assistance:

- 2790-000000-1 Other (Student, ESL, deferred GA-WEP, etc.)
- 2790-000000-2 Incapacitated (Temporary Disability)
- 2790-000000-3 GA paid to a CalWORKs/SSI recipient
- 2790-000000-4 General Assistance Worker's Compensation (GA-WEP Job Injury)
- 2790-000000-5 General Assistance Work Experience Program
- 2790-000000-8 Amnesty Legal permanent resident Subject to 100% Federal Reimbursement
- 2790-000000-9 Interim Assistance (Totally Disabled)
- 279T-000000-0 Pregnancy

## GENERAL ASSISTANCE HANDBOOK

2790-000000-Z One Stop Services (AIDS/HIV cases)

2791-000000-1 County Only Foster Care to Students (Not GA)

2792-000000-5 Time-Expired Refugees

2792-000000-9 Time-Expired Refugee Interim Assistance

279B-000000-1 Pending CAPI Applications

2799-000000-1 Training Assistance Program Cases

.9 Inactive Cases-Cases that have not received aid for one calendar month shall be discontinued.

.91 Beginning date of aid rules apply if the customer reapplies in the month of discontinuance after action has been taken.

.92 The discontinuance may be rescinded and aid restored if the customer has good cause of failure to cooperate.

### 90-404 Board and Care Process

[Table of Contents](#)

.1 The amount of monthly payment for an eligible person residing in a foster home, Board and Care (B&C) home, nursing home, or similar facility shall be at the amount negotiated with the facility less the amount of the recipient's net non-exempt income from other sources for that month, subject to:

.11 To be eligible to B&C placement, the customer must meet the following criteria:

.112 Be an indigent patient currently admitted to Natividad Medical Center (NMC) and ready for release.

.113 A Medical Social Worker at NMC must complete the CO 107, GA application, with the client's assistance.

.114 Customer must be potentially eligible to GA.

.115 Discharge Planner at NMC must contact B&C facility to inquire as to availability of a bed for placement.

.116 Once confirmed, the Discharge Planner is to give the customer documentation to present to the B&C operator.

.117 When the placement is confirmed, the Discharge Planner will contact the assigned GA EW and inform them of the placement and expected duration.

## **GENERAL ASSISTANCE HANDBOOK**

- .12 The pertinent maximum payment levels established by and appropriate rate-setting body, including:
  - a. The Federal Government for Supplemental Security (SSI)
  - b. The State Government for Supplemental Security Program (SSP); and
  - c. The Board of Supervisors
- .2 The amount of payment for a partial month of aid shall be prorated using a 30-day month, regardless of the number of days in the application month.

### DSES Eligibility Staff

- .21 An eligibility determination shall be made within one working day from date the application is received from NMC staff.
  - .22 Notify the NMC Social Worker by phone on the day the eligibility determination is made.
  - .23 Issue an appropriate Notice of Action to the applicant.
  - .24 If eligible, mail the GA voucher for Board and Care to the facility on the date eligibility is determined.
- .3 INDIVIDUALS REQUIRING BOARD AND CARE UPON RELEASE FROM NATIVIDAD MEDICAL CENTER (See Current Program Directive #94-02)

The following instructions are to be used when the indigent person is being discharged from NMC and needs Board and Care.

### NMC SOCIAL WORKER

- .31 Medical Social Worker (M.S.W.) obtains referral from physician/staff regarding possible Board and Care placement due to patient's medical condition and current living situation.
- .32 M.S.W. does written psychosocial assessment and submits to physician. A summary of the assessment is attached to the referral to Adult Protective Services (APS) when a referral is deemed necessary.
- .33 CO 840-E, Medical Report is completed by physician to include length of time Board and Care is needed and diagnosis.
- .34 MSW discusses plan with patient and/or family. Discussion to include cost of Board and Care, patient's obligation to pay, and other alternatives for payment.

## **GENERAL ASSISTANCE HANDBOOK**

- .35 If there is an open APS case, the NMC SW will discuss the discharge plan with APS SW.
- .36 If the patient unable to pay for Board and Care, a General Assistance Application is completed by patient and /or Social Work Clerk.
- .37 The Medi-Cal Supervisor at NMC will be contacted to obtain a signed Agreement to Reimburse/Lien document. Only deputized DSES staff can witness the document.
- .38 The NMC SW will contact the DSES EW as soon as possible to alert them that a request is forthcoming. When possible, the basic information can be faxed to DSES to begin the eligibility determination process when it must be established the same day.
- .39 G. A. Application, medical report, and supporting documents are taken to DSES for G. A. eligibility determination. A memo is attached to state the name, address of placement, cost, and anticipated duration.
- .391 If APS are identified, a referral to APS is made for care following discharge.
- .392 If same-day payment is needed, the NMC SW will phone the DSES Office and explain the urgency to provide advance notice to DSES staff.

### DSES Adult Services Staff

- .4 Follow administrative directions for Emergency Response.
- .41 Accept referral from NMC in cases when APS services are identified.

### DSES Eligibility Staff

- .5 An eligibility determination shall be made within one working day from date the application is received from NMC staff. If urgent response is needed, a conference may be needed with the EW Supervisor and the Program Manager.
- .51 Notify the NMC Social Worker by phone on the day the eligibility determination is made.
- .52 Issue an appropriate Notice of Action to the applicant.
- .53 If eligible, mail the authorization document to the facility on the date eligibility is determined. In urgent situations, the document may be delivered to the NMC SW or delivered with the patient.
- .54 When the completed document is received from the vendor for payment, it will be reviewed for correctness.

## GENERAL ASSISTANCE HANDBOOK

- .541 The customer must have signed the document. If not, return it to the vendor with denial notice for payment. The document must be the original.
- .542 Authorize payment for the number of days the customer stayed in the facility. If different from the authorized stay, the amount may be less.
- .6 Authorize payment uses the Transmittal to Clerical. The facility is shown as the payee on the 278-G form.
  - .61 The amount is shown as a supplement; a continuing grant amount is not shown
  - .62 Aid Code 90 is used and a separate CO 278-G prepared for this program which can be kept in the GA case folder with GA 278-G forms.
  - .63 The Special Claim code "BC" is used to designate this payment. It is entered by the EW on the Supplement Line of the Transmittal. Circle the code.
- .70 Prepare a notice of action to the facility which explains the payment period and the amount.
- .71 Enclose an authorization document for the next month if the customer is still present at the facility.
- .72 Updated lists of phone number for G. A. staff involved in this process will be provided to NMC as needed.
- .73 Random site visits will be made to insure that the customer is residing at the facility.
  - .731 Contact the facility the day before the visit to announce the time that the visit will be made the following day.
  - .732 Obtain identification from the customer to verify identify.

### DSES Eligibility Supervisors:

- .80 Review all authorization for board and care payment.
- .81 Insure the payee name and address appear on the CO 278-G. This will be the facility.
- .82 Insure that the special claim code "BC" is entered on the Transmittal.

## GENERAL ASSISTANCE HANDBOOK

- .83 Insure that the correct authorization document is in the case and signed by the customer.

### DSES Administrative Support Staff:

- .90 Obtain the monthly report which identifies these cases by aid code and with Special Claim Code "BC".
- .91 Enter the information for each facility in the database for tax reporting.
- .92 At the end of the year, prepare data to submit to Auditor for IRS 1099 report. Only those facilities, which were paid \$600 or more, are submitted.

### LOANS FOR TEMPORARY ASSISTANCE AND BOARD AND CARE

- .921 The following procedures are to be followed when an indigent person under conservatorship is in need of temporary assistance for personal needs and/or Board and Care.

#### CONSERVATOR:

- .922 Conservator receives recommendation for Board and Care or unmet personal needs from social work staff person.
- .923 If patient has limited financial resources, the Conservator requests the account clerk to apply for General Assistance.
- .924 The account clerk completed a CO 262 (DSES Reception form) and a Face Sheet for GA/Loan Grant (Public Guardian's form.) The Sheet contains all the information pertinent to the determination for a GA Loan or Grant. See attached.
  - .9241 If the request is for a Board and Care loan, the Face Sheet will include the name and address of the Board and Care placement, cost (not to exceed the current SSI/SSP Board and Care rate), and anticipated duration (not exceed 90 days.)
  - .9242 If the request is for a personal needs allowance for a Conservatee being placed in a locked facility, the amount shall not exceed the combined \$100 Temporary Assistance Payment and \$75 Emergency Assistance Payment.
- .925 The CO 262, Face Sheet and supporting document (if required) are forwarded to DSES for a General Assistance eligibility determination.

## GENERAL ASSISTANCE HANDBOOK

- .926 Phone DSES to inform them the request is coming if expedited processing is needed.
- .927 Upon receipt of the SSI funds or any other source of income, the Conservator will complete and submit a MCHD MH-91 (Pay/Out Form) to the account clerk.
- .928 The account clerk will issue a check to: Monterey County Department of Social and Employment Services Overpayment Clerk/1000 S. Main, #208  
For \_\_\_\_\_ (Conservatee's Name)  
Salinas, Ca 93902

### DSES ELIGIBILITY STAFF:

- .929 An eligibility determination shall be made within one working day from the date the application is received from the Public Guardian under the following aid categories:
- .930 Regular Assistance for Board and Care (not to exceed the current SSI/SSP rate)
- .931 Temporary and/or Emergency Assistance for personal needs (not to exceed \$ 175 total Temporary / Emergency Assistance combined.)
- .932 Phone the Conservator the day eligibility is determined to inform them of the decision. Find out when the loan is needed.
- .933 If eligible, authorize the warrant for payment to the Public Guardian's Office. Vouchers to providers may be issued if timeliness is a factor and authorization of a warrant would cause delay. Warrants should be made as follows:

Monterey County Department of Health Public Guardian/LPS  
Conservatorship Office For \_\_\_\_\_ (conservatee name)

320 Church Street  
Salinas, Ca 93901

- .934 The case will be set up as a Regular/Temporary/Emergency G. A. case using code designator **#-5**.
- .935 The case will be hand-carried to the Board Clerk for expedited processing.
- .936 Issue an appropriate Notice of Action to the applicant in care of the Conservator

## GENERAL ASSISTANCE HANDBOOK

### 90-405 IMMEDIATE NEED:

[Table of Contents](#)

- .1 Immediate need exists if the application:
  - .11 Has no resources to meet current living expenses and or personal needs.
  - .12 Has no place to stay
  - .13 Has received an eviction notice or a 24-hour utility shut-off notice.
  - .14 Is without food or cash on hand with which to purchase food.
  - .15 Is stranded and in need of transportation or other assistance.
- .2 General Assistance eligibility not yet established.
  - .21 Needs will be met by:
    - .211 Emergency Aid (\$100.00 maximum)
    - OR**
    - .212 Food Stamps
    - .213 Emergency Vouchers
      - a. Voucher for food or essentials
      - b. Voucher of gas. Client must have a vehicle and destination
      - c. Voucher for hotel/motel

### 90-406 BUDGET PERIOD

[Table of Contents](#)

- .1 General Assistance budgets will be computed on a concurrent basis with income applied to needs in the month the income is received.
  - .11 If there is a realistic expectation that a recipient will work during a future month, income should be predicted and applied against future needs for that month.
  - .12 If the needs increase within a month, a revised budget is computed for that month. An underpayment is established for that month if appropriate. The GA-WEP hours are adjusted accordingly if possible to reflect the increased payment amount.
  - .13 If the needs decrease within a month, a revised budget is computed for that month. An overissuance is established if appropriate.



## **GENERAL ASSISTANCE HANDBOOK**

- .14 A recipient must be given 10 day notice in writing prior to a grant reduction or discontinuance of their General Assistance case.

### **90-407 REDETERMINATIONS**

[Table of Contents](#)

- .1 A redetermination of eligibility, via completion of the CO 107-E, will be made at least once every twelve months.
- .2 Controls will be set for quarterly review of the SSI/SSP status of recipients of Interim assistance. Including EW contact with the SSI Advocate assigned to the recipients case.
- .3 The PBC50115A, GA Caseload Composition Report, is to be used to ensure all cases are accounted for and renewals are completed on a timely basis.

### **90-408 DETERMINING HOUSEHOLD COMPOSITION**

[Table of Contents](#)

- .1 Two people living together as husband and wife will be treated as one unit regardless of marital status.
- .2 Parents with minor children (under the age of 19) or with minor children attending high school shall be treated as one unit.
- .3 Parents living in the home with minor children shall be treated as one unit regardless of spousal relationship.

EXAMPLE: Unmarried mother and father with minor children claim not to be living as husband and wife but as boarders. This case would be treated as one unit because of the relationship to the children.

- .4 Unmarried father of unborn child where mother receives CalWORKs is eligible to GA until the birth of the child. At which time the father is possibly CalWORKs eligible. The father would receive the payment standard differential, not a full allowance.

### **90-409 DETERMINATION OF COUNTY OF RESPONSIBILITY**

[Table of Contents](#)

- .24 There are no inter county transfers of General Assistance cases.
- .25 Care must be taken to determine the applicant's place of residence. Persons in this County solely for the purpose of medical care, alcoholic, or drug abuse treatment, and who have a home or intend to return to their county of residence, are referred to the originating county for assistance.

## GENERAL ASSISTANCE HANDBOOK

### 90-410 OVERPAYMENTS

[Table of Contents](#)

- .1 When an overpayment occurs due to the GA recipient receiving a GA payment they are not eligible to an overpayment will be calculated against the client's GA case.
  - .11 An overpayment is calculated for all months in which a client received GA and did not work the assigned hours or the applicant/recipient had unreported income that was not used in the calculation of their GA grant. Once reviewed and approved by the EW's supervisor, the calculating EW will then send the overpayment NOA to the client at their last known address. Once the GA case is closed and the O/P reviewed and approved, the assigned EW will forward the information, and CO 747E to Finance.
  - .12 An adjustment shall never exceed 10% of a person's monthly grant unless the recipient requests that a larger amount be adjusted.
  - .13 It will be adjusted against the General Assistance grant for the first month following the month of discovery, or in the first month in which action can be taken with 10 day noticing in writing prior to the negative action.
    - .131 For customers participating in GA-WEP, the adjustment will be taken from the grant payable and hours will be assigned to the balance.
  - .14 The recipient will be notified of the action, 10 day advance notice is required. EW is to send a CO113 for Overpayment Collections.
  - .15 If aid is discontinued, and there is an outstanding overpayment, the recipient will be notified in writing of the amount due and requested to make arrangements for repayment. This information will be forwarded to Finance and the O/P Unit for assignment
  - .16 At discontinuance, all cases that have active/existing overpayments must be flagged and sent to the warehouse for storage. A notation on the outside of the case file must state "CO58E, Lien on File, do not destroy".
- .2 Reimbursements of GA funds
  - .21 Customers who received GA and did not work in return for their GA payment will have a reimbursement calculation written up and submitted to Finance, along with the CO747-E. These individuals may receive SSI in the future and the County will be eligible to receive reimbursement when SSI is granted, as long as all documentation is completed and submitted timely to SSA (e.g. SSP14 submitted to SSA at application, CO58-G, etc).

## GENERAL ASSISTANCE HANDBOOK

### 90-411 UNDERPAYMENTS

[Table of Contents](#)

- .1 If an underpayment occurs, either because of over-estimation of income, or because of some other factor, the underpayment will be adjusted within 5 working days of discovery.
  - .11 Balance the underpayment against any unadjusted overpayment outstanding within twelve months of the underpayment.
  - .12 Any remaining supplemental payment, after recoument of an existing O/P, shall be issued to the customer.
  - .13 If a supplement is issued to a client, and they have an active Food Stamp case, and the supplement is received in the month intended, it must be included in the Food Stamp budget.

### 90-412 DEFINITION OF INCOME

[Table of Contents](#)

- .1 Income is defined as any benefit, either in cash or in kind, which is received by an applicant/recipient.
  - .11 Earned income is income which is received in return for work performed by the applicant/recipient.
  - .12 Unearned income are benefits such as UIB, DIB, Worker's Compensation, a contribution by relatives, friends, or sponsors deemed income, sponsor contribution, Income-in-Kind, and pensions.

### 90-413 TREATMENT OF INCOME

[Table of Contents](#)

- .1 Earned Income-mandatory deductions and reasonable and necessary work expenses will be deducted from gross earnings. The remainder is net non-exempt income.
- .2 Unearned Income-all income, other than earned income, is net non-exempt income.
- .3 Charitable Contributions, income-in-kind received in November and December from a tax-exempt source is exempt.
- .4 Emergency vouchers for housing or utilities paid by other agencies, or issued by a Social Worker, are not considered income.
  - .41 If issued by a GA Worker the amount of the voucher is subtracted from the expense. Any balance in the expense is allowed as a need item. Any excess income after the expense is paid which is available to the customer is income.

## GENERAL ASSISTANCE HANDBOOK

- .5 Educational grants, loans, and scholarships, are treated as in the Food Stamp regulations. Educational expense is allowed as a need item. Any excess income after the expense is paid which is available to the customer is income.
- .51 Any monies retained for school expenses is not counted as a resource once counted as income.
- .52 Any monies existing after school has ended or the customer has dropped out of school will be considered a resource and counted towards the total allowable limit.
- .53 If there is a convicted drug felon in the household, not eligible to GA, income is to be deemed to the spouse GA recipient. Example: Felon's income is \$500, and two are in the household, divide \$500 by 2 and count \$250 in the budget process.
- .6 TREATMENT OF LUMP SUM INCOME
  - .61 Non-recurring lump sum payments are those accrued over more than one month and not expected to be received in the same intervals in the future, or payments whose receipt is not related to any time period.
  - .62 Non-recurring lump sum payments shall be considered income in the month of receipt and personal property/resource on the first of the following month.
  - .63 When, as a result of the receipt of the receipt of such payment, the applicant/recipient's total personal property/resource on the first of the following month exceeds the maximum allowable, the case shall be discontinued.
  - .64 Tax returns, Earned Income Tax Credits (EITC), Renters Credit are also considered non-recurring lump sum payments.

### 90-414 INCAPACITY

[Table of Contents](#)

- .1 Definition:

#### Temporary Disability:

- .11 A physical or mental condition which is not severe enough or expected to continue for a long enough period of time that he/she would be eligible to SSI/SSP, but which renders the applicant/recipient unable to obtain or continue sufficient employment to maintain him/herself on the G. A. payment standard, at any occupation for which he/she is qualified by education, training or experience. The cases of these individuals are designated with a FBU of -2.

## GENERAL ASSISTANCE HANDBOOK

### Permanent Disability

.12 A physical or mental condition which is severe enough, or has continued for or is expected to last, 12 months or more in duration that the individual may be eligible to SSI/SSP. The disability must also render the applicant/recipient unable to obtain/maintain sufficient employment to maintain him/herself on the GA payment standard, at any occupation for which he/she is qualified by education, training, or experience. The cases of these individuals are designated with a FBU of -9.

### .2 Medical Evidence Required:

.21 A statement of incapacity must be submitted on a CO840-E and include:

.311 Diagnosis, and

.312 Expected duration of illness

.22 Statement of incapacity may be accepted from:

.221 The patient's physician, or

.222 Natividad Medical Center

### .3 Verification of Incapacity:

.31 For all applicant/recipients, incapacity and duration of such, must be verified by a physician. Examinations shall be performed by qualified personnel of the Natividad Medical Center, unless, for good cause, the Director requires or permits such examinations elsewhere. Customers have the right to obtain an examination by a physician of their choice if they pay for the examination. Application for Social Security benefits is not verification of incapacity.

.311 Verification will be obtained prior to the end of the period of disability for customers not permanently disabled.

.312 If disability ends mid-month, the period of eligibility will extend through the end of that month. A new medical report or enrollment in GA-WEP must occur in order to continue eligibility into the following month.

.313 Verification will be obtained every twelve months for those customers permanently disabled.

.314 The first examination of verification of incapacity will be absorbed by DSES if the examination is completed by Occupational Medicine at NMC.

## GENERAL ASSISTANCE HANDBOOK

- .32 Participation in rehabilitation program does not automatically qualify an applicant/recipient as incapacitated. However, in those cases of marginal incapacity, the applicant/recipient's participation in a rehabilitation program can be made a mandatory eligibility requirement.
- .4 Medical statements or forms will be evaluated and the decision regarding incapacity as the reason for receiving GA will be completed by the GA EW and Supervisor (if needed) and is to be recorded in case comments.
- .5 The applicant/recipient shall be informed that, if incapacitated, he/she may be referred to the Department of Rehabilitation. The applicant/recipient shall also be informed that, if referred to the Department of Rehabilitation, his/her participation in that program may be a mandatory condition of eligibility for General Assistance.
- .6 The applicant/recipient may be required to report to a Work Experience Program to learn new skills to enable him/her to work within restrictions of the affliction from which he/she suffers.
- .7 The applicant/recipient will be required to apply for and avail himself/herself of all other benefits to which he/she may be entitled.
- .71 Veteran's Benefits
  - .711 If the applicant/recipient is a veteran or a survivor or dependent of a veteran, refer to the Veteran's Representative. The applicant/recipient will be given a CA5 to complete and return within 10 working days. This form will determine if the individual may be eligible to Veteran's benefits.
- .72 The applicant /recipient will be required to apply for State Disability Insurance Benefits (SDI) if there is any work history, and must present evidence that he/she has done so.
- .73 If the incapacity is such that it appears the applicant/recipient may qualify for a categorical aid program (e.g. Social Security Disability, Social Security Retirement, etc.), he/she must apply for that aid. The applicant/recipient does not have the right to choose General Assistance over another type of aid.
- .74 All customers who will be disabled a minimum of six months will be referred to Social Security (SSA) to apply for disability benefits. See Section 90-500 for instructions.
  - .741 Failure to follow-through with the SSA application process will result in ineligibility for G. A.
  - .742 Prior to terminating or denying aid, a service referral will be made to the SSI Advocate assigned to the applicant/recipient. The referral will explain

## GENERAL ASSISTANCE HANDBOOK

the cause of the disability, the worker's observances of the behavior, and the circumstances surrounding the failure to follow-through with the application.

.743 A service referral will be made when the SSA application is denied and the SSI Advocate assigned to the applicant/recipient feels there is evidence to indicate the customer is eligible. The social worker will determine if intervention is needed to assist the customer in the appeal process. Interim Assistance will be continued while the customer is in the appeals process. SSI Advocacy Referral forms are; CO221 and CO222, which are available on DSES Shortcuts.

.744 The SSI Advocate will take appropriate action within five working days when a referral is received. The social worker will inform the EW of the status of the case and the customer's progress in following through with the application

### 90-415 Notification Requirements

[Table of Contents](#)

- .1 An applicant/recipient will be notified in writing, on Form CO 239-E Notice of Action of any actions taken to:
  - .11 Grant or deny General Assistance or Emergency Aid (CO112).
  - .12 Decrease amount of General Assistance (CO239E)
  - .13 Discontinuance of General Assistance (CO111)
- .2 Adverse actions, such as discontinuance or a decrease in benefits, it is required that the applicant/recipient receive 10-day negative notice and must be notified in writing prior that action. In the case of the change in the method of payment, the Notice of Action must be sent or delivered to the recipient no later than the effective date of the action.
- .3 A copy of the NOA issued will be maintained in the case file.
- .4 Case comments on all case actions are mandatory.

### 90-500 INTERIM ASSISTANCE PROGRAM (SSI/SSP REIMBURSEMENT) [Table of Contents](#)

- .1 This program allows the county to recover GA payments made to recipients during the time their SSI/SSP application is pending in the SSA.
  - .11 The initial payment is sent to the County from Social Security Administration (SSA).

## GENERAL ASSISTANCE HANDBOOK

- .12 The initial payment may be in more than one check as the SSA does not authorize checks for more than \$ 9,999.00.
  - .13 There must be a break in aid of more than twelve months if the customer has received SSI/SSP previously.
  - .14 There is no initial payment if SSI/SSP is granted presumptive eligibility by SSA.
  - .15 When SSI/SSP was paid for part of a month, the G. A. payment will be pro-rated by the number of days in that month to determine the reimbursable amount.
- .2 Form SSP 14, Authorization for Reimbursement for Interim Assistance Granted while SSI/SSP application is pending, is completed by the E.W. when the client appears to be eligible for SSI/SSP. The SSP14 signed by both the applicant/recipient and the interviewing EW. These persons include:
- .21 Person is 65 years of age or older
  - .22 Person is 18 years of age or older and a disability prevents him/her from doing substantial gainful employment for a period of 12 months or more or will result in death.
  - .23 A child under the age of 18 with a disability comparable in severity to one that would prevent an adult from working or would result in death.
  - .24 Regardless of age, a person who is mentally challenged or blind and would meet Social Security's definition of disabled.
  - .25 Income does not exceed the SSI payment standard\*.
  - .26 Resources do not exceed the SSI resource limits \*.
  - .27 Person meets residence requirement.
  - .28 Disabled/addicts/alcoholics must accept vocational rehabilitation or treatment.
  - .29 Applicant/Recipient is recommended to cooperate in full with the SSI Advocate in completion of the SSP 14 and all supporting documentation.
- \* Refer to the current resource and income standards in Article 10 of the Medi-Cal Manual for actual figures.



## GENERAL ASSISTANCE HANDBOOK

- .3 Copy of the SSP 14 is mailed to the SSA Field Office on a flow basis, where the application was made when the Interim Assistance (I. A.) case is granted. The SSP 14 is not mailed to the SSA if the case is denied. Customer is given a copy of the SSP14 as well as a copy is filed in the GA case.
- .4 Transfer the case to General Assistance from Interim Assistance if the SSA application is denied and the customer does not appeal.
- .5 Interim Assistance may be continued when the customer files an appeal on the SSA denial. A new SSP 14 is not needed. The SSI Advocate will assist the customer in the process of challenging the SSI denial.
- .6 If the customer applies for Interim Assistance after a SSA denial, a new SSP 14 is needed.
- .7 The total aid paid, including warrants and vouchers, beginning with the month of application for SSI/SSP (or the first month of Interim Assistance, whichever is later) is provided to Fiscal upon request by the EW or EW's supervisor.
- .8 Fiscal will receive the SUPPLEMENTAL SECURITY INCOME NOTICE OF INTERIM ASSISTANCE REIMBURSEMENT ELIGIBILITY AND ACCOUNTABILITY REPORT, (SSA-8125), from the SSA within three days of receipt of the initial payment.
  - .81 Fiscal will phone the EW's supervisor to obtain financial information and clarify payee and address. The SSA Field Office may be phoned to clarify discrepancies.
  - .82 If there is no eligibility to reimbursement, three copies of the SSP14, Notice of Action on Interim Assistance, will be completed. Original copy is mailed to the customer, one copy of E.W. and one copy is filed with Fiscal documents.
  - .83 Upon receipt of the initial payment, the balance of the payment must be forwarded to the customer within ten working days from the date the SSI/SSP check is received by the county.

**IF THIS CANNOT BE DONE, THE ENTIRE AMOUNT OF THE PAYMENT MUST BE FORWARDED TO THE CUSTOMER.**

- .831 A cash receipt is completed the same day the initial payment is received. The white copy is retained with the claim form the yellow copy goes to the E. W. and the pink copy if filed with Fiscal documents.
- .832 A copy of the SSA-8125 will be attached to the yellow copy of the cash receipts for the E.W, and filed in the case.

## GENERAL ASSISTANCE HANDBOOK

- .833 When amount of reimbursement has been determined, the SSP-14 will be completed in triplicate. The original and copy will be sent Auditor for mailing to customer with check, one copy and copy of claim goes to the E.W. and one copy is retained with the claim in Finance.
- .834 The County claims form is completed in triplicate and distributed as above. Included on the claim is the customer identification information, computation of SSI/SSP grant and reimbursement, receipt number, and deposit number, date of receipt and statement:

THIS CLAIM MUST BE PAID WITHIN 10 WORKING DAYS FROM THE DATE THE CHECK WAS RECEIVED.

Part II of the SSA-8125 is completed and copy sent to:

Social Security Administration  
SSI Program Section  
P.O. Box 4206  
Richmond, Ca. 94804

THE SSA-8125 MUST BE COMPLETED AND RETURNED TO THE STATE WITHIN THIRTY WORKING DAYS OF RECEIPT OF THE INITIAL CHECK.

- .84 If the SSA-8125 is not received from SSA by the time the initial payment is received, the SSA Field Office is contacted in order to obtain the information to process the payment within the ten working days.
- .841 If the initial payment is received and the customer cannot be located, the balance of the payment is returned to the SSA Field Office. The SSA-8125 will be used to explain remittances to that office.
- .842 If another agency in our county has submitted a SSP-14 to SSA after we submitted ours, we are the department authorized to receive the reimbursement first. The other agency will send us a copy of the SSP-14 and we will forward their share of the payment to them.

This also works if we submitted our document after the other agency was designated at the "fiscal agent" of the SSI/SSP payment.

## GENERAL ASSISTANCE HANDBOOK

- .9 The General Relief and Interim Assistance Monthly Caseload and Expenditure Report, GR 237, is completed by the 8<sup>th</sup> working day of the following report month. The report is mailed to:

DEPARTMENT OF SOCIAL SERVICES  
Statistical Services Branch  
744 P Street, M.S. 12-81  
Sacramento, Ca 95814

### **90-501 REIMBURSEMENT FOR SPECIAL CASES (CaWORKs-FC CASES)** [Table of Contents](#)

#### .1 General

- .11 EAS Manual Section 46-337.5 provides for SSI/SSP reimbursement for State and County funds expended for minors in a Foster Case setting when:
- .111 The child is in a non-Federal case, and
  - .112 Costs are paid from General Assistance funds, or
  - .113 Costs are paid from non-Federal CaWORKs-FC funds.

### **90-502 REIMBURSEMENT OF FEDERAL MONEY ON SPECIAL CASES** [Table of Contents](#)

- .1 Refugee cases (aid code 92) are subject to Federal reimbursement when the refugees have been in this county 12 months or less from the date of admission.
- .2 Amnesty Legal permanent residents and SAWS Legal permanent residents (AU Code 8) who have been granted temporary resident status are subject to Federal reimbursement until granted permanent status.

These include the pre-1982 Amnesty Legal permanent residents, Special Agricultural Workers, and Replenishment Agricultural Workers.

### **90-503 VOUCHER COMPLETION AND PROCESSING INSTRUCTIONS** [Table of Contents](#)

- .1 The Voucher, CO 105, is completed by authorized Eligibility Workers or Emergency Social Workers during Standby hours as follows:
- .11 Standby hours are defined as Monday through Friday between 5 P. M. and 8 A.M., Saturdays, Sundays, and holidays.

## GENERAL ASSISTANCE HANDBOOK

.12 Completion of the CO 105 Voucher is as follows:

Div: Enter "GA" followed by the name of the District Office from where the voucher is issued.

To: Enter the complete name of vendor.

Address: Enter the address of the vendor-street or box number and city.

Date: Enter the date the Voucher is issued to the recipient or vendor.

Name: Enter the complete name of the recipient last name first.

Address: Enter the recipient's address-street number or P.O. box and city.

Case No.: Enter the case number (11 digits) if known. If not, enter aid code and clerical will enter case number.

Persons: Enter the number of persons in the case.

Description: Describe the articles or services being purchased. For purchases that cover a period of time, enter the beginning and ending date.

Example: Rent

Amount: Enter the total amount of the purchase.

Tax: Put a line through this item.

Dollars: Print onto the form the amount of the Voucher.

Example: One Hundred –Two and 50/100 dollars.

By: Worker who authorizes the Voucher enters his/her name and worker number. (Either GA worker or Emergency Social Worker)

Signature: Recipient Signature:

Vendor Section: Self-explanatory, to be completed by Vendor, and signed by the employee of the business accepting the voucher or the business owner.

Once completed and signed, the issuing County employee gives the vendor the white copy of the CO105 and informs the vendor to submit it to DSES for reimbursement. The yellow copy is retained by the issuing employee and submitted to the clerical supervisor the next working day. The Clerical Supervisor enters this information on the CO876-G for tracking purposes.

## GENERAL ASSISTANCE HANDBOOK

- .2 The Voucher Form, CO 105 (rev 05-01), is completed following instructions for vouchers by authorized Eligibility Workers or Social Workers during Standby hours.
- .3 The Authorization Document, CO 278-G, is to be completed on all vouchers and grocery orders issued and filed in the case record.
- .4 All Vouchers and Grocery Orders are to be treated as cash and will be stored in a locked cabinet or file during non-working hours.
  - .41 Each District Office Manager and Standby Supervisor will assure that security measures for vouchers are met.
  - .42 The Office Manager and Standby Supervisor will check Voucher disposition and security by his/her staff each month and take appropriate corrective action as necessary.
- .5 Each District Office Manager and Standby Supervisor will provide a list to the Finance Director or his/her designee with the names and signatures of all employees under his/her supervisor that he/she wants authorized to issue GA Vouchers. This list shall that be resubmitted each time a change in staffing is made.
- .6 Each District Office Manager and the Standby Supervisor will appoint two persons to be authorized to requisition Vouchers from the Benefit Issuance Clerk in the Salinas District Office.
  - .61 The names and signatures of these individuals shall be provided to the Finance Director or his/her designee.
  - .62 To requisition Vouchers, designated staff shall go to the Salinas District Office where the Benefit Issuance (BI) Office is located and request Vouchers from the BI Clerk.
  - .63 Vouchers shall be issued in increments of \$50.
  - .64 The Benefit Issuance Clerk shall complete the GA Voucher Requisition Control Log, CO 875-G, and have the authorized staff person sign the Control Log prior to issuance of the Vouchers.
  - .65 The Benefit Issuance Clerk and the person requisitioning the Voucher shall inspect them to assure the correct amount of Vouchers with correct serial numbers are being issued.

## GENERAL ASSISTANCE HANDBOOK

- .7 Persons authorized to requisition Vouchers in each office shall also control the issuance of Vouchers within their office on the GA Voucher Requisition Control Log.
  - .71 The Control Log shall remain with the supply of Vouchers and be completed each time Vouchers are removed.
- .8 Persons authorized to issue Vouchers shall control the issuance to recipients through the use of the GA Vouchers Issuance Control Log, CO 876-G.
  - .81 Vouchers that are voided shall be entered on the Log prior to forwarding to Accounting Section.
  - .82 A separate Log shall be maintained for each calendar month by each District Office and Standby unit.
  - .83 The Logs shall be retained in the District Office for 12 months from the issuance month, and then may be destroyed.

All vouchers completed by the emergency Social Workers will be forwarded to the GA supervisor who will submit the paperwork as a "pend to deny" so as to create a papertrail for accounting purposes.

### 90-504 CASE FILING INSTRUCTIONS

[Table of Contents](#)

- .1 For GA cases in which there is a companion ISAWS folder, staff are to do the following:

Staff are to follow the current ISAWS case-filing guide, issued August 1, 2006.

.12 GA L-sheets, Bus Ticket Logs, etc are to be filed on the left hand side of the ISAWS case folder.

.13 GA NOA, Budgets, etc. are to be filed on the right hand side of the ISAWS case folder

- .2 For cases in which there is no ISAWS companion folder, staff are to use the following case-filing guide.

#### **LEFT SIDE (top to bottom)**

- ✓ CO 718-E Tickler Control
- ✓ CO 278-G Authorization Sheet
- ✓ CO 21-G Contact Sheet
- ✓ Bus Ticket Log
- ✓ CO28G GA budget
- ✓ Shelter Divider Housing and utility receipts

## GENERAL ASSISTANCE HANDBOOK

### Correspondence Tab (chronological order)

- ✓ CO-106 Motor Voter form
- ✓ Pending List
- ✓ CO 58-G Grant of Lien
- ✓ CO864-G Confidentiality Statement

### Income Verification Tab

- ✓ CA5 Veteran's Benefits application
- ✓ Verification of earned and/or unearned income

### EDD Tab

- ✓ Gen. 827 Work Registration and DVR Referrals and Correspondence
- ✓ CO-25-E EDD Referral Verification
- ✓ CO114 Authorization for Release of Information

### Medical Tab

- ✓ CO 840-E Medical Reports
- ✓ Social Services and SSA documents pertaining to incapacity
- ✓ SSP14 Authorization for Reimbursement of Interim Assistance

### Fraud/Overissuance/Refund Tab

- ✓ Documentation regarding O/P's or fraud
  - CO747-E
  - CO28-E O/P calculation form
  - CO239-E O/P NOA

### Vital Statistics

- ✓ Identification
- ✓ Birth certificates
- ✓ Legal permanent resident status
- ✓ Social security card, social security number application.

### RIGHT SIDE (top to bottom)

- ✓ CO 239-E Notice of Action
- ✓ CO 109 GA Granting NOA
- ✓ CO108 GA Renewal NOA
- ✓ CO 97-E Board and Care Authorization Form
- ✓ CO 243-E Transmittal

## GENERAL ASSISTANCE HANDBOOK

- ✓ CO 551-S Work Search Report
- ✓ CO 673-S GA-WEP Report

### Property Tab

- ✓ All relevant property information
  - Car Registration
  - Bank Account information (savings/checking, etc)
  - Real Property

### Applications/Recertification Tab

- ✓ Current CO 107-E
- ✓ Current SAWS1
- ✓ CO 107-E Application
- ✓ CO 58-G Agreement to Reimburse and Grant of Lien
- ✓ CO 604-E Rights and Responsibilities
- ✓ CO 800-E Welfare Fraud
- ✓ CO 262-C Reception Form

## 90-505 COUNTING CASE ACTIONS

[Table of Contents](#)

- .1 Cases in which assistance has not been that granted in any form shall be pended.
- .2 Cases will not be pended prior to approval if any type of emergency assistance has been issued, such as a voucher issued by eligibility or standby staff.
  - .21 These cases will be discontinued at the end of the month if Emergency or Temporary Assistance has been granted on a one-time only basis.
  - .22 These cases will be approved and held for ten days if it is expected the recipient will return for Regular Assistance. If the recipient does not complete the process within 10-days, the case will be discontinued at the end of the month through the current process.
- .3 GA-WEP cases in which work hours have been assigned but assistance has not been issued will be pended. Staff will not approve the case until the work hours are submitted or a voucher is issued.
  - .31 GA-WEP hours are assigned once the EW has determined the applicant is eligible, the job search is completed and the amount of the grant is calculated.
  - .32 If the applicant does not work the assigned hours and/or complete the job search, the application is denied.



## GENERAL ASSISTANCE HANDBOOK

- .4 Special Circumstances will be counted as an “Other Approval”. This will not be counted as a General Assistance approval.
- .5 Ongoing cases will be handled as follows:
  - .51 Cases will be discontinued at the end of the month if the recipient does not complete the assigned hours for that month. If the hours overlap into the next month, the case will be discontinued at the end of that month.
  - .52 The EW (or Employment Services Worker) will establish a control on active cases’ assigned hours. If the customer does not submit the timesheet within three days of the date the hours should have been submitted, the EW will contact the work site supervisor to determine if the hours were worked.
  - .53 If the customer comes in at a later date, a good cause determination can be made prior to rescinding the discontinuance. The customer can “make-up” the hours but will not have to complete a new application if circumstances have not changed and it has been less than thirty days since the discontinuance.
  - .54 Cases that have been granted and discontinued in the same month should be counted as active cases for the month of aid. These cases will also be counted as discontinued cases. This will capture the workload on cases issued voucher by standby and those granted Emergency Assistance.
  - .55 The worker who receives the case will count the case as a Transfer-In in the month received.
  - .56 A case will be counted as “transferred to another worker” by the worker sending the case. These two numbers should match on the countywide monthly report.
    - .561 These are not cases granted assistance by the standby worker and forwarded to eligibility.
    - .562 These are cases transferred between eligibility workers.

### 90-506 SPECIAL PROGRAMS

[Table of Contents](#)

#### .1 COUNTY-ONLY FOSTER CARE TO STUDENTS

On December 12, 1989, the Monterey County Board of Supervisors adopted a resolution to assist high school students not eligible to CalWORKs-Foster Care if they are not scheduled to complete high school prior to their nineteenth birthday, by being potentially eligible to continuing Foster Care.

## GENERAL ASSISTANCE HANDBOOK

The procedures are as follows:

- .11 Eligibility for Medi-Cal will be established through the Foster Care case.
- .12 Regular CalWORKs-Foster Care payments can continue in situations where the student remains in the home of the non-related legal guardianship was dismissed due to the student turning 18 years of age. Senate Bill 760 provide for continued CalWORKs-FC as long as the student remains in high school or the equivalent vocational or technical training and will graduate or receive a certificate of completion prior to the equivalent vocational or technical training and will graduate or receive a certificate of completion prior to the 19<sup>th</sup> birthday.

### CRITERIA:

- .13 A service plan must be completed prior to discontinuance of the CalWORKs-FC case to insure continuance of aid and reduce disruption.
- .14 Verification from the school must be obtained to indicate expected date of completion graduation and grade point average. Current enrollment status will be verified each month with a CO-51 (school verification form).
  - .141 Student must maintain passing grades and comply with Educational Plan to remain eligible.
  - .142 Student must meet regular attendance requirements.
- .15 Student and caretaker must agree for caretaker to be the payee.
- .16 Student will be paid at the existing Foster Care rate. The Group Home rate will not be paid.
- .17 Students will be required to attend summer school, participate in a training program, or obtain a job in the summer months. Any income received during this time is exempt.
- .18 Aid will terminated when the student obtains the high school diploma or equivalent, when eligibility for the program ends, when the student turns twenty years of age, or when payment has been made for a period of twelve months, whichever occurs first.
- .19 The foster family will sign an agreement to assume liability if payment is made incorrectly due to the failure of the student or the family to report changes in eligibility conditions.

## GENERAL ASSISTANCE HANDBOOK

### FOSTER CARE ELIGIBILITY WORKER (FC-EW):

- .20 The Foster Care Eligibility Worker (FC-EW) will notify the Social Worker (SW) and/or Probation Officer when the child is approaching 18-years of age and the school verification indicated the student will not graduate or receive a certificate of completion prior to the 19<sup>th</sup> birthday.
- .21 The FC-EW will discontinue the CalWORKs-FC case at the end of the month following the student's 18<sup>th</sup> birthday.
- .22 The FC-EW will obtain from the SW the recommendation to assist the student through County-Only Foster Care based upon the Social Worker's assessment.
- .23 The CalWORKs-FC case will be transferred to County-Only Foster Care (aid code 91) without a break in aid when the customer has cooperated in the assessment process. A separate 278-L Sheet will be carried in the assessment process. A separate 278-L Sheet will be carried in the case under the aid code "82" for State Medi-Cal. A separate application is not required.
- .24 The FC-EW will be responsible for determining ongoing eligibility. The requirements will be explained to the caretaker and student by the SW. The student must be attending regularly and be passing all of the subjects.
  - .241 Each school may have a different system for providing this verification each month. The student will contact the school to determine the procedure and notify the worker.
  - .242 If the student fails to provide this information, timely and adequate notice will be provided to hold the next payment and discontinue the case if the information which establishes eligibility is not provided.
  - .243 The SW will be notified that eligibility is in question.
- .25 In April, the FC Worker will notify the caretaker that the student is required to attend summer school, participate in a training program or obtain a job for eligibility to continue through the summer months. A tickler will be made to insure this requirement is met for payment to continue when the school term is in recess. This requirement does not apply during other school holidays.

## GENERAL ASSISTANCE HANDBOOK

- .26 Reporting requirements will be met through the Medi-Cal reporting process. (Reporting changes within 10 working days).
- .27 All other eligibility requirements for CalWORKs-FC will apply.

### SOCIAL WORKER AND PROBATION OFFICER:

- .27 When notified by the Foster Care Worker or when the situation becomes known, a meeting with the student and the school counselor will be held to determine if there is any way for the student to graduate by the 19<sup>th</sup> birthday.
  - .271 The student may earn extra credits by attending summer school.
  - .272 The student may earn extra credits by completing special assignments/projects.
  - .273 The student may transfer to Continuation School where credits may be earned at a faster rate.
- .28 At the age of eighteen, the SW will have the student sign the SOC 155B, Mutual Agreement for Eighteen Year Olds. The student will be enrolled in the Independent Living Skills program.
- .29 The SW will meet with the student and the caretaker to explain the requirements for eligibility under the county program. The agreement (CO 12FCSx) will be signed by the family and the student to insure that the family understands its liability if payment is made incorrectly due to failure to report changes in eligibility conditions.
- .30 The SW will assess the situation to determine if the student meets eligibility criteria and is a candidate for the program
  - .301 Will the student commit him/herself to the program?
  - .302 Is it likely that the student will obtain the diploma and in what length of time?
  - .303 Will the student be able to remain in the current home to avoid disruption in the program?
- .31 The SW will obtain supervisory approval prior to making a recommendation to the Foster Care E.W.

## GENERAL ASSISTANCE HANDBOOK

- .32 The SW will develop a plan and forward a recommendation to the FC-EW prior to discontinuance of the CalWORKs-FC case.
- .33 The SW will set the case for a six-month Administrative Review.
- .34 The SW will report any known changes to the FC-EW as needed to insure the integrity of the program.

### MONITORING:

An annual report will be completed and incorporated into the Annual Report to the Board by the Deputy Director for Family and Children's Services.

## .2 GLEANING PROGRAM

The Monterey County GA Program provides manpower provided by the Work-Experience Program participants for the gleaning program run by Ag Against Hunger.

Ag Against Hunger operates the gleaning project in Monterey County. It functions during the months that growers allow people to enter the fields to obtain the produce which is left after the field has been harvested.

The produce will be used by the Food Bank for Monterey County to provide fresh fruit and vegetables to emergency food providers. General Assistance customers will be allowed to retain some of the produce harvested or receive a compensatory bag of food from the Food Bank.

### CRITERIA:

- .21 This program is available for the following employable individuals:
  - .211 Those employable who have not been able to perform at the assigned work site and there are no appropriate work sites available.
  - .212 Those employable who need fill-in work to complete their assignment.
  - .213 Those employable who volunteer to work in the gleaning program.
- .22 Employable GA applicants/recipients will not be referred if there is a history of medical problems, which would make this assignment unsuitable. Example: back, neck, shoulder or arm injuries. The GA Worker will closely screen potential referrals.

## GENERAL ASSISTANCE HANDBOOK

- .23 Participants will be closely supervised while performing the gleaning assignment because there is a higher risk of injury in this type of work. All injuries will be reported to Risk Management using the Worker's Compensation form.
- .24 Participants will receive training by the work site supervisor on the harvesting process as well as training on how to prevent injury prior to beginning their job.
  - .241 Participants will be trained to use tools in the field to harvest the produce, or they will use baskets to carry the gleaned produce to awaiting trucks for transport to the produce to the coolers

### ELIGIBILITY PROCESS:

- .25 The GA Worker will explain the program.
  - .251 The requirement is for the participant be available for gleaning one or two three-hour days per month. **Credit of ten hours work will be given for each day of participation in the gleaning project.** If gleaning is not available that week, an assignment to another work site will be made. This work may include cleaning, sorting and boxing the produce that was gleaned.
  - .252 The participant will be closely screened for any physical condition which may preclude him/her from the program. The participants will self-certify their condition until medical verification can be obtained. Employable applicants/recipients will not be referred if they claim any injury or incapacity, which would preclude them from this type of work.
  - .253 The participant will be instructed to appear at the Ag Against Hunger cooler at 495 Brunken Ave. in Salinas at 9:30 A.M. on the designated day.
  - .254 Bus tickets to the Ag Against Hunger cooler (or the nearest stop) may be given to the participants to get to the cooler. Transportation from the cooler to the field and back will be provided by car pool by other volunteers from Ag Against Hunger.
  - .255 The participant(s) will be instructed to report any injuries immediately to the work site supervisor.
  - .256 Assignments will be made as follows:
    - a. The Ag Against Hunger Gleaning Coordinator will phone the GA Supervisor each Friday by noon to confirm the gleaning day for that week.

## GENERAL ASSISTANCE HANDBOOK

- b. Participants will be instructed to phone or come in to see the GA. Worker on Friday afternoons before 3: 00 P. M. during the gleaning season to receive their assignment.
  - c. If there is a cancellation of the week's gleaning, the gleaning coordinator will contact the GA supervisor immediately. This will allow for the possible rescheduling of assignments for GA-WEP participants to another worksite.
- .26 The CO 673-S, timesheet will be completed in triplicate. The pink copy is retained in the case record. The white and yellow copies are given to the participant to take to the work site supervisor. At end of the week's assignment, the recipient will return the completed form to the E.S. Worker.
- .27 Payment will be authorized when the work hours have been performed or the gleaning assignment is complete, whichever comes first. Job Search will be required to complete the participation requirement.
- .28 When an injury is reported, the Work Site Supervisor will immediately complete the forms 5020, accident report and EB 21, medical report.
- .281 The 5020 is completed by the participant and signed by the participant as well as the work site supervisor. The GA ES will review the form and forward to the Safety Officer at Human Resources at DSES, Quad in Salinas.
- .282 The EB 21 is completed by the Work Site Supervisor and given to the participant to take with them to the doctor. A copy will be made for the case record.

### WORK SITE PROCESS:

- .29 Gleaning training will be provided for all participants by the Ag Against Hunger gleaning coordinator.
- .30 Participants will be closely monitored to avoid injury. Participants who claim injury will be reported immediately to the Employment Services Worker.
- .31 The work site supervisor will complete the 5020 and in the event of injury provide transportation for the GA-WEP participant to receive medical attention. Depending on severity, this may be a Doctor's on Duty, or the closest hospital emergency room, depending on the severity of the injury.

## GENERAL ASSISTANCE HANDBOOK

- .32 The Ag Against Hunger will provide transportation to the work site via carpool.
- .33 The work site supervisor will complete the CO 673-S, timesheet will be completed at the end of the day of gleaning. The yellow copy will be retained for work site records. The white copy will be given to the participant to return to their GA worker.
- .34 The work site supervisor will notify the GA Worker if there are work-related problems with any participant. If problems occur which cannot be resolved, the participant will not be referred to the program in the future.
- .35 The work site supervisor will assign additional duties at the Cooler if the gleaning day is less than three hours to provide a three-hour workday.

### .4 HIV OR HIV-RELATED CONDITIONS (AIDS AND AIDS RELATED CONDITIONS {ARC})

#### ELIGIBILITY STAFF

- .41 When it becomes known to the agency that an applicant or recipient is suffering from this disease, a referral to Adult Services will be offered.
- .42 If the applicant is not physically able to come into the office to apply, an Authorized Representative of the applicant's choosing may be appointed. A face-to-face contact must be made at some point prior to approval of the application. Eligibility Staff may make this contact through a home visit or office visit. A documented contact by Services Staff can be acceptable to prevent duplication of contacts.
- .43 If the customer is employable but a work-site is not suitable, pursue alternate established work sites. Do not divulge the type of disease without written permission from the customer. Explain only work limitations to the work-site supervisor.
- .44 If a work site is not located, the customer will be eligible as long as the Job Search requirement is met.
- .45 The customer diagnosed with AIDS or ARC must be referred to the SSI Advocacy group to apply for SSA and/or SSI.
- .46 If the customer's Social Security application is denied, an appeal must be made via the SSI Advocacy group located within Adult Services.



## GENERAL ASSISTANCE HANDBOOK

### ADULT SERVICES

- .47 Referrals to Adult services may be made by calling the intake desk worker at either the Salinas or Peninsula Adult Services district offices.
- .48 The Desk Worker will provide information and referral services and screen for eligibility for all adult services programs and forward referrals to the appropriate programs.
- .49 Communication with the referring Eligibility Worker will be made to provide continuous coordination for aid programs while awaiting the eligibility determination form Social Security Administration.
- .50 SSI Advocacy may be provided on the customer's behalf should denial of SSI benefits take place.

### .5 INDIVIDUALS REQUIRING BOARD AND CARE UPON RELEASE FROM NATIVIDAD MEDICAL CENTER (NMC) (See current Program Directive# 94-02)

The following instructions are to be used when the indigent person is being discharged from NMC and needs Board and Care.

### NMC SOCIAL WORKER

- .51 Medical Social Worker (M.S.W.) obtains referrals from physician/staff regarding possible Board and Care placement due to patient's medical condition and current living situation.
- .52 M.S.W. completes a written psychosocial assessment and submits to physician. A summary of the assessment is attached to the referrals as deemed necessary.
- .53 CO 840-E Medical Report is completed by physician to include length of time Board and Care is needed and diagnosis.
- .54 The NMC M.S.W. contacts a Discharge Planner at NMC and requests that the planner contact the local Board and Care facility to inquire as to a vacancy
- .55 MSW discusses plan with patient and/or family. Discussion to include cost of Board and Care as needed and diagnosis.
- .56 If patient has limited financial resources, a General Assistance Application (CO107 E) is completed by patient and/or Social Worker.

## GENERAL ASSISTANCE HANDBOOK

- .57 G. A. application, medical report, and supporting documents are submitted to DSES for a G. A. Eligibility determination. A memo is attached to state the name, address of placement, cost, and anticipated duration.
- .58 If placement is to exceed thirty days or needs requiring APS are identified, a referral to APS is made for care following discharge.

### DSES Stand-By Staff

- .59 Follow administrative directions for Emergency Response.
- .60 Accept referral from NMC in cases in which the estimated period of placement will exceed thirty days, or needs requiring APS services are identified.
- .61 Follow administrative directions for completion of Board and Care voucher.

## 90-507 CASELOAD MANAGEMENT

[Table of Contents](#)

Staff are to use the following legacy reports to properly maintain their GA caseload

### .1 WEEKLY REPORTS:

#### .11 PENDING CASES - PBB50108

The PBB50108 – Pending Cases (See Example #1) is distributed each Monday in each office to the Program Manager, GA Supervisor, and in Salinas, to the A.S.A. who do the following:

The GA Supervisor follows up with the GA workers that have any GA cases pending that are due (30 days) in the upcoming week. The GA Workers report to the GA Supervisor when their pending cases are either granted or denied. In Salinas, the GA Supervisor alerts the A.S.A. when all cases are processed for the week who in turn alerts the Program Manager at the end of each week. If cases are processed after 30 days the GA Supervisor must write a memorandum of explanation which goes to the Program Manager and Deputy Director.

#### GENERAL ASSISTANCE WEEKLY CASELOAD REPORT – PBB50104

The PBB50104 – GA Weekly Assistance Report (See Example # 2) is distributed every Monday in each office to the Program Manager, GA Analyst, GA Supervisor, and in Salinas, to the A.S.A. who use it as a resource for the prior week's GA statistics as follows:

## GENERAL ASSISTANCE HANDBOOK

There are 4 pages, one for each office and one a County total.  
Each page lists that office's individual workers by caseload number.  
The report shows the number of pending cases and the number of active cases, including totals, separated by English and Spanish cases, for the following aid codes:

- ✓ 9B – CAPI (All 4 of these aid codes are totaled together)
- ✓ 9T - Pregnancy (Should be aided up to four months prior to EDC, then possible CalWORKs eligible)
- ✓ 90 – GA
- ✓ 92 - Refugee
- ✓ 99 – Training Assistance Program (T.A.P.)

The report also shows the subtotal of all pending and active cases for each office. The last page shows the total of all three offices in the County.  
The supervisor shall use this information to balance assignment of the intake and ongoing GA cases among the GA workers and ensure that all cases are accounted for.

### .2 MONTHLY REPORTS:

#### CASE WORKER REPORT - PBC50115A

The PBC50115A – Case Worker Report (See Example #3) is received at the beginning of each month in each office and distributed to the Office Secretary, Program Manager, GA Supervisor and GA Workers who do the following:

Check each case on the PBC50115A which are listed with a File Number as follows:

Example: 90-697000-260 \*01\*  
MR 050650 West St

90 = Aid Code  
697000 = ISAWS Case # or a Universal # (not in ISAWS)  
2 = GA Code (See Example #4) - For all GA FBU Numbers

60 = GA Person # (See Example #5)  
\*01\* = Cycle # - All counties are now cycle 01  
MR 0506 = Current Medical Report expiration date  
50 West St = Customer's Address

## GENERAL ASSISTANCE HANDBOOK

Check the following information as needed:

- ✓ Language
  - ✓ Eligible Person's person number
  - ✓ Missing Social Security Number (SSN)
  - ✓ If a significant age change has occurred that may impact benefits (over 60 years old and Social Security eligible)
- .21 Staff are to complete a reconciliation of all cases listed on the report with the cases in the bookcase. (See Procedure A-122 - GA Reconciliation Process)
- .211 Check all cases that are a GA Code 90. If any other cases with different codes are on the report they should be investigated and resolved.
- .212 Check all GA Code 90 cases for upcoming or overdue renewal dates.
- ✓ Send out renewal packets as needed
  - ✓ Close legacy case timely if renewal is not completed by the customer
- .213 Check any Medical Report (See Example #6) dates, and for any that are due to expire in a month send the customer a reminder that they need another examination.
- ✓ The CO951E- Referral for Work Limitations/Medical Evaluation letter is not sent at this time as it is only given out at Intake which is the one time that Social Services pays for the visit. (See Example #7)
- .214 GA Workers should use the 6 columns on the right hand side of the Case Worker Report to write notes, record their reconciliation findings, and note any actions taken on the case during the month.
- NO ACTIVITY FOR THREE MONTHS-PZC501711
- .22 The report will target any case that has had no activity (no M-Sheet submissions) for three consecutive months. Upon receipt of this report, staff is to:
- .211 Review their assigned caseload to ensure that there is a valid reason for a targeted case not having any activity for an extended period of time.
- .222 Annotate on the report the outcome of the case review and reason for non-activity:
- Sent a letter to the customer requesting information

## GENERAL ASSISTANCE HANDBOOK

- Gave an appointment date and time
- Disabled, and follow-up is needed
- Any other reason for non-activity

.223 Once the caseload is reviewed staff are to submit a copy of the report to their supervisor by the 5<sup>th</sup> of the following month the report is issued.

.224 If the assigned EW sends a letter to the customer for information to determine case eligibility, and there is no response staff may discontinue the case with 10 day notice. A copy of the NOA is mandatory for each case action.

### .3 CASELOAD STATISTICAL REPORT – PBJ50107S

.31 The PBJ50107S - The GA Caseload Statistical Report (See Example #8) is distributed at the beginning of each month to the Program Manager and GA Supervisor who use it as a resource for the prior month as follows:

.32 The report shows a breakdown by worker in two parts A) by Applications for Aid & Restoration Requests and B) by Caseload. Each of these sections is broken down by Aid codes and GA Codes as follows:

- ✓ Code 90 – GA Codes 1, 2, 3, 4, 5, 8, 9
- ✓ Code 92 – GA Refugee Codes 5, 9
- ✓ Code 9B – GA CAPI Code 1
  
- ✓ Code 9T – GA Pregnant Woman Codes 1, 2, 5, 9
- ✓ Code 99 - GA Training Assistance Program (TAP) Code 1

Each part, both A & B, show pending totals from prior month plus applications received or cases added during the month, less applications disposed of or cases terminated during the month, and new pending totals at month end.

### .4 Food Stamp Employment and Training Caseload Management

.41 The FSET Worker should check any cases that are not FSET (Aid Code 96) on their report and take immediate action to resolve the case discrepancy. The FSET Worker must locate the assigned GA Worker and ensure that it is properly transferred into their caseload.

.42 The FSET Worker should update renewal dates according to Food Stamp recertification dates in ISAWS (if a GA and Food Stamp case) and discontinue any legacy cases once the Food Stamp ISAWS case is closed.

- .1 The GA Analyst will conduct an audit on an annual and bi-annual basis. The audit will be completed during the month of April.
  
- .11 The Annual audit on odd years will consist of a full review of every active GA case in Monterey County, even years is a random sample audit. The audit will review the following criteria:
  - .111 Targeted demographics including verification of:
    - ✓ Applicant/recipient name
    - ✓ Applicant/recipient address, current
    - ✓ Applicant/recipient social security number
    - ✓ Birth Certificate
    - ✓ Disability documentation
    - ✓ Income; earned or unearned
    - ✓ Shelter costs
    - ✓ Utility costs
    - ✓ Household composition
    - ✓ Property limit review
    - ✓ U.S. Citizenship, alien status
    - ✓ If LPR, check for possible sponsorship
    - ✓ Current renewal date (no overdue renewals)
    - ✓ Correct aid code for the case situation
    - ✓ E&T paperwork, mandatory/exempt
    - ✓ GA-WEP worksite verification
    - ✓ GA-WEP timesheets (correct, current, complete)
    - ✓ Budget calculation (correct and complete)
    - ✓ GA-WEP work hours calculation (correct, complete)
    - ✓ Case transmittal (correct, current, complete)
    - ✓ If a stand alone GA case, Case Comments (current and up to date)

**Copies of the following documents**

- ✓ SAWS1 (current and complete with documentation in County Use Section)
- ✓ CO 262-G (Reception form)
- ✓ CO107E (current and up to date)
- ✓ CO 718-E (case tickler)
- ✓ CO 58E (Lien)
- ✓ CO 243-E Transmittal
- ✓ CO 278-L (L-Sheet Transmittal)
- ✓ SSP14 (SSA document for SSI application)
- ✓ CO 840-E (medical report)
- ✓ GEN 827 from EDD

## GENERAL ASSISTANCE HANDBOOK

- ✓ CO 25-EDD work registration verification (current and complete)
  - ✓ CO 673-S (GA-WEP timesheets)
  - ✓ CO21-G Case Comments sheet (current and up to date)
  - ✓ For a Worker's Comp issue:
    - DWC-1
    - State form 5020
    - Industrial Injury Log
  - ✓ CO 551-S GA-WEP Job Search form (current and accurate, annotated to show EW review)
  - ✓ CO 747-E if case has an existing O/P
  - ✓ Copies of proper NOA's for each case action (CO 239-E)
  - ✓ CO 604-E (GA R&R's)
  - ✓ CO 800-E (What is Welfare Fraud pamphlet)
  - ✓ CO 278-G (Case authorization document)
- .2 The Bi-Annual audit will consist of a random draw of each GA caseload in each District office.
- .21 Each office will have an accuracy rate calculated based upon total GA benefits issued divided by the total issued in error.
- .22 The accuracy rate has been established as 97% for all GA cases.

### 63-509 Supervisor Review Process

[Table of Contents](#)

- .1 This formal review process has a two-fold positive impact for staff as well as the Department. The review process allows the GA supervisor to set a foundation of accuracy to base future employee evaluations on, as well as identify possible training needs. For the Department, it acts as vehicle to quickly determine an overall County accuracy rate and ensures that all GA customers with active cases are eligible to receive benefits.
- .11 Number of cases to review per worker
- .111 GA supervisors will begin to complete formal General Assistance Supervisor Reviews. The number of cases to be reviewed will be based on the worker's current accuracy level as established in the Supervisor Review Guidelines dated June 29, 2006. In a given quarter a minimal number of General Assistance reviews will be completed and combined with other case reviews for the program assignment of that worker.
- .112 Level 3 (98.5% to 100% Accuracy Rate)
- A worker on Level 3 has three (3) formal case

## GENERAL ASSISTANCE HANDBOOK

reviews completed per month, the case review total for a quarter is nine (9) cases. Three of the nine cases per quarter will be reviewed for General Assistance.

### .113 Level 2 (97% to 98.4% Accuracy Rate)

- A worker on Level 2 has five (5) formal reviews completed per month, the case review total for a quarter is fifteen (15) cases. Five of the fifteen cases per quarter will be reviewed for General Assistance.

### .114 Level 1 (less than 97%)

- A worker on Level 1 has ten (10) formal reviews completed per month, the case review total for a quarter is thirty (30) cases. Ten of the thirty cases per quarter will be reviewed for General Assistance.

- .2 It is expected that the GA supervisor will complete all formal reviews, however GA EWIII's may assist the GA supervisor in completing non-formal case reviews, as well as complete formal GA case reviews if the GA supervisor is absent.

Program Managers must give approval for GA EWIII's to complete formal GA case reviews. Any dollar error cited by a GA EWIII must be approved by the GA supervisor prior to finalizing the case review.

### **Any exceptions must be discussed and approved by the Program Manager**

### .3 Accuracy Rate Calculation

- .31 Each month the GA supervisor will calculate the accuracy rate using the same formula used to calculate the Food Stamp case review accuracy rate (The document used for the GA Review is located in the Excel Program used for the Food Stamp Roll-ups (CO730E2).

- .32 At the end of each quarter the GA supervisor is to combine all three months of review into one accuracy rate for each GA worker.

- .33 The GA supervisor is to submit a CO727E (12-02) [Excel Supervisor Roll-Up] with the following:



## GENERAL ASSISTANCE HANDBOOK

- Worker Number
- Caseload Number
- Number of Cases Reviewed
- Number of Cases in Error
- GA Dollars Issued
- GA Dollars Issued in Error
- Accuracy Rate is calculated by the Excel Program

### .4 Types of Errors

The General Assistance Supervisor will submit the individual unit accuracy rates to the Program Managers by the 7<sup>th</sup> of the following month. The Program Managers will forward a copy of their respective office GA accuracy reports to the GA Analyst and the Deputy Director by the 15<sup>th</sup> working day of the following quarter.

.41 The formal GA review process began July 1, 2006 in all Community Benefits Offices. The Department accuracy goal for Intake and Ongoing staff members is 97% for General Assistance.

- ❖ Dollar Errors
- ❖ Procedural Errors
- ❖ Unable to Determine

.42 A GA case will be determined to have a **dollar error** (overpayment, underpayment) if any of the following are discovered lacking during a case review:

- ❖ Failure to verify citizenship/alien status.
  - ❖ Failure to verify income.
  - ❖ Failure to obtain SSN or proof of application for SSN.
  - ❖ Failure to determine correct HH composition.
  - ❖ Failure to determine resource level.
  - ❖ Mathematical computation errors which affect the GA allotment.
- Overdue or late renewal for a GA case with an FBU of other than -5. The warrant will continue to issue on these specific cases.

## GENERAL ASSISTANCE HANDBOOK

A GA case will be determined to have a **procedural error** if any of the following are discovered during a case review:

- ❖ Failure to document the CO107 (GA application) according to current policy and procedure.
- ❖ Failure to document all customer/department contact in case comments, in either ISAWS or on a CO21-G contact sheet.
- ❖ Overdue or late case renewal for –5 cases. (The GAAS system will not issue a warrant if the renewal date is passed).
- ❖ Failure to provide 10-day notice.
- ❖ Failure to retain a copy of current NOAs in the case file. This may include; denials, grantings, or change in GA grant amount.
- ❖ Failure to take action when information is reported in timely manner by the applicant/recipient, and an eligibility error has not occurred.
- ❖ Case ticklers/alerts not set for a future action, or not acted upon and an error has not occurred.
- ❖ Agency caused error for failure to process an application in a timely manner (within the prescribed 30 day window to take action on applications).

- .43 A GA case will be given a designation of Unable to be Determined (UTD) if the GA case file does not contain documentation/verification, at the time of the supervisor review to determine or verify eligibility as outlined in the GA Handbook.

Case review allotment verification

When reviewing a GA case, supervisors are to:

For active/discontinued GA cases:

- ❖ Refer to the Warrant register that corresponds with the month of the GA case review.
  
- ❖ Ensure that the L-Sheet and NOA in the case file correspond with the amount that shows on the Warrant register.

## GENERAL ASSISTANCE HANDBOOK

- ❖ If there is a discrepancy, deeper case review is mandatory
- ❖ Once rectified, the issued versus correct allotment will determine the actual error.

For denied GA applications:

- ❖ The dollar amount attributed to the accuracy level must correspond with the HH composition and other case variables.

For example:

- Single, homeless individual maximum allotment is \$340. If the case is denied, we can attribute \$340 to a properly denied GA case.
- Single individual, with housing costs, maximum allowable is \$340. If the case is denied, we can attribute \$340 to a properly denied GA application.