In-Home Support Services (IHSS)

What is IHSS?
IHSS is a statewide program administered by each county under the direction of the California Department of Social Services. It provides those with limited income who are disabled, blind or over the age of 65 with in–home care services to help them remain safely at home.

The four different IHSS programs
There are four different IHSS programs: The Community First Choice Option Program (CFCO), the Medi–Cal Personal Care Services Program (PCS), the IHSS Independence Plus Option Program (IPO) and the Original or Residual IHSS Program (IHSS–R). Each of these programs provides the same services, but have different eligibility criteria based, in part, on whether they are funded with federal money.

- **CFCO** – Recipients are eligible because they have qualified for Medi-Cal and would otherwise need a nursing home level of care. Most IHSS recipients are in the IHSS-CFCO program.
- **PCS** – Recipients are eligible because they have qualified for Medi–Cal on the basis of age, blindness or disability. Most IHSS recipients who do not qualify for the IHSS-CFCO program are part of the Medi-Cal PCS program.
- **IPO** – Recipients are eligible because they have qualified for Medi–Cal and are also part of one of the following groups: parent provider for a minor child, spouse providers, advance pay cases, meal allowance cases.
- **IHSS–R** – Recipients do not meet PCS or IPO requirements and are usually persons with Satisfactory Immigration Status, which denies them federal reimbursement. There are very few people in this category.

What services does IHSS provide?
Services include, but are not limited to:

- Domestic and Related Services: meal preparation, cleaning, laundry and taking out the garbage.
- Personal Care Services/Non–Medical Care: bathing, feeding, dressing, grooming and toileting.
- Paramedical Tasks: assistance with medications, injections, bowel and bladder care.
- Protective Supervision: monitoring persons with cognitive or mental impairments to prevent injury.
- Transportation and accompaniment to medical appointments.

Who is eligible for IHSS?
Any California resident is eligible for IHSS if they:

- Are SSI/SSP or Medi–Cal eligible.
- Are blind, disabled or 65 years of age or older.
- Are living in a home, apartment or abode of their choosing (not including a hospital, nursing home, assisted living or licensed care facility).
- Are unable to live safely at home without care.

*Note:* Residents of long term care facilities may not receive IHSS in the facility, but may apply if they are expected to be discharged so that IHSS is in place when they return to their homes.
What are the financial requirements for IHSS?

To be eligible for IHSS, a person must be enrolled in Medi-Cal. For more information on financial eligibility for Medi-Cal, see CANHR’s fact sheet on Community-Based Medi-Cal programs: http://canhr.org/factsheets/medi-cal_fs/PDFs/FS_Aged_and_Disabled_Medi-Cal_Program.pdf. Individuals who receive Medi-Cal with no share of cost (SOC) through SSI-linked Medi-Cal, the 250% Working Disabled Program, Aged and Disabled Program (income limit of $1,564 for an individual and $2,106 for a couple as of April 1, 2022), or expansion Medi-Cal, will also be entitled to IHSS with no SOC.

Individuals whose income is too high to qualify for IHSS with no SOC may still be eligible for IHSS and Medi-Cal with a SOC under the Aged-Blind-Disabled Medically Needy Program (ABD-MN). If so, they will have to pay their SOC to their IHSS provider (or other Medi-Cal providers) before getting covered in IHSS.

Those who qualify for IHSS and Medi-Cal with a SOC will receive two Notices of Actions (NOA). One NOA from the Medi-Cal program will state the SOC amount, and the other NOA from IHSS will state they are eligible for benefits.

How do I calculate my share of cost?

Share of Cost is based on countable income, including earned income and unearned income. Earned income includes salaries, wages, tips, professional fees, and other pay for physical or mental work. Unearned income includes social security, disability payments, and other income one receives without doing any work. Examples include disability benefits, income from a trust or investment, and profits or funds from any source other than work.

In determining Share of Cost, Medi-Cal deducts a Maintenance Needs Allowance (MNA) of $600 for a single person from the total countable earned and unearned income.

The following amounts are also deducted each month:

- $20 from unearned income
- Health insurance premiums
- Earned income deductions:
  - $65
  - An additional $20 can be deducted from earned income if there is no unearned income.
  - Work expenses related to disability (cost of items related to impairment that are necessary to becoming or remaining employed—maintenance of a van that fits your needs, certain clothing, attendant care services, transportation, medical devices, work-related equipment, etc.).
  - Half of the remaining earned income.

Example 1: Disabled Consumer Over Unearned Income Limit

Mr. Lee gets $1,650 from Social Security Disability Insurance (SSDI) every month. It is his only income.

\[
\begin{align*}
\text{Mr. Lee’s unearned income from SSDI} & = 1,650 \\
\text{General Income Deduction} & = 20 \\
\text{Countable Income} & = 1,630
\end{align*}
\]

Mr. Lee’s countable income is $66 above the $1,564 income limit for the Aged and Disabled Medi-Cal program. His share of cost for Medi-Cal would be $1,030, because of the $600 Maintenance Needs Allowance.
Allowance ($1,630 – $600 = $1,030). However, if Mr. Lee incurs $66 in additional medical premiums each month, he could reduce his share of cost to $0.

**Example 2: Aged Consumer Over Unearned Income Limit With Medical Deductions**

Ms. O’Connor is 84 years old and receives $1,800 a month in Social Security benefits.

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\begin{align*}
$1,800 & \quad (\text{Ms. O’Connor’s unearned income from Social Security}) \\
- $20 & \quad (\text{General Income Deduction}) \\
- $185 & \quad (\text{Medicare Supplemental Insurance}) \\
\hline
$1,595 & \quad \text{Countable Income}
\end{align*}
\]

Ms. O’Connor’s countable income is $31 above the $1,564 income limit for the Aged and Disabled Medi-Cal program ($1,595 - $1,564 = $31). That means Ms. O’Connor will be evaluated under the Medically Needy Program with a Share of Cost, outlined below.

Ms. O’Connor’s Share of Cost for Medi-Cal would be $995 ($1,595 – $600 MNA = $995). Thus, she must pay or incur $995 each month in medical expenses before Medi-Cal will cover her remaining medical expenses. Ms. O’Connor can reduce her Share of Cost to $0 if she reduces her income to $1,564 by purchasing additional insurance premiums (such as dental, vision, etc.) that cost at least $31 monthly. Proof of these must be submitted to the Medi-Cal office at the beginning of the month to ensure that the share of cost will not be taken out of the IHSS providers’ checks.

**Example 3: Aged/Disabled Consumer With Earned Income and Work Related Deductions**

Mr. Smith earns $1,000 at his part-time job monthly, and receives $500 from Social Security. He also pays his neighbor $200/month to drive him to work, because he cannot drive due to an injury to his legs.

\[
\begin{align*}
$1000 & \quad (\text{Mr. Smith’s earned income}) \\
- $65 & \quad (\text{Earned Income Deduction}) \\
\hline
$935 & \\
$467.50 & \quad (\text{Half of remaining earned income after the deduction} - 1/2 \times 935) \\
+ $500 & \quad (\text{Mr. Smith’s unearned income}) \\
\hline
$967.50 & \\
- $20 & \quad (\text{Unearned Income Deduction}) \\
- $200 & \quad (\text{Work Related Expenses due to Disability}) \\
\hline
$747.50 &
\end{align*}
\]

Mr. Smith is eligible for no Share of Cost Medi-Cal and IHSS because his income is under the Aged & Disabled income limit of $1,564.

**Who provides IHSS services?**

Each county can choose different modes of services delivery: **Contract, County Homemaker, or Independent Provider (IP)**. However, it is up to the individual to decide what mode of service delivery they wish to receive. In the Contract mode, the County contracts with an outside agency that employs IHSS caregivers. In the County Homemaker mode, the County trains and employs caregivers. Most IHSS clients use the IP mode of service, where the client hires, fires and supervises caregivers. In most counties, **Public Authorities** have been established to improve IP service delivery. IHSS pays IP’s who are hired and supervised by the recipient or the recipient’s guardian/authorized representative. Many IP’s are relatives of the client. Payments are issued by the State Controller’s Office, directly to the IP. Wages for IHSS caregivers vary from county to county. For a list of IHSS caregiver wages by county, please visit [https://www.cdss.ca.gov/inforesources/ihss/county-ihss-wage-rates](https://www.cdss.ca.gov/inforesources/ihss/county-ihss-wage-rates). In the Bay Area
Counties, Public Authorities have been able to negotiate higher wages and comprehensive health and dental benefits.

**How do I apply for IHSS?**

Call or visit your local Department of Social Services: [https://www.cdss.ca.gov/inforesources/county-ihss-offices](https://www.cdss.ca.gov/inforesources/county-ihss-offices) to complete an IHSS application. Once IHSS receives your application, a social worker will come to your home to conduct a needs assessment. During the needs assessment, the social worker will ask you questions about your physical and mental capacity to determine the types of services you need and the number of hours for each service. As part of the application process, you will need to have your health care provider fill out a medical certification form ([SOC 873](https://www.cdss.ca.gov/cdssweb/entes/forms/English/SOC873.pdf)) stating that you are not able to do some activities of daily living (ADLs) on your own and without IHSS you would be at risk for out of home placement. Your living situation will also be evaluated. After the needs assessment, the IHSS worker will contact you and let you know if you have been approved or denied the service. If approved, the IHSS worker will tell you how many hours were authorized for each service, and how many total monthly hours have been approved.

The [Disability Rights California In-Home Supportive Services (IHSS) Advocates Manual](https://www.disabilityrightsca.org/pubs/501301.pdf) provides detailed information about how to apply to IHSS and receive the most hours possible.

**How does IHSS calculate how many hours I get?**

The State has limited monthly services hours to 195 hours per month for non–severely impaired applicants and 283 hours per month for the severely impaired. The County Social Services Agency is responsible for doing a needs assessment for each client at the time of application, every twelve months thereafter, and whenever the county has information that the recipient’s physical/mental condition or living/social condition has changed. The number of hours authorized may change with each evaluation.

The assessment evaluates:

1. The client’s physical/mental condition, living/social situation and ability to perform various functions of daily life.
2. The client’s statement of need.
4. Other information the case manager may consider necessary and appropriate to assess the need.


**Appeals**

If you are denied Medi-Cal or IHSS or if you do not agree with the number of hours authorized, you may appeal the decision by filing for a fair hearing. The appeals procedure is outlined on the back of the notice you will receive. For assistance in filing an appeal, contact your local legal services office. (See CANHR’s page on **Helpful Links**: [www.canhr.org/Helpful_Links.html](http://www.canhr.org/Helpful_Links.html)).