



**California Association of Public Authorities
for In-Home Supportive Services**

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The California Association of Public Authorities is greatly alarmed by the Administration's proposal to provide IHSS only to the neediest consumers, defined as those recipients with functional index scores of 4.0 and above.

Essentially, a consumer's functional score (FIS) would determine eligibility. The FIS was never intended for that use, and such use would violate the "maintenance of effort" requirements of the American Recovery and Reinvestment Act of 2009 (ARRA). According to a survey of our member Public Authorities, under the proposed cuts, a startling 85% to 90% of consumers would be eliminated from the program.

In addition, the FIS simply won't work. An All County Letter (ACL) No. 88-118, dated September 6, 1988, explains that the purpose of the FIS was to achieve *uniformity* among social workers who conduct assessments. Consumers are assigned scores for the various activities of daily living on a scale of 1 to 5, with a 1 indicating that the consumer does not need help with that task, and 5 indicating the need for full physical assistance. There are exceptions to this scale, with a score of 6 possible in some categories:

- Heavy Cleaning
- Accompaniment to Medical Appointments
- Accompaniment to Alternative Resources
- Yard Hazard Abatement Snow Removal
- Protective Supervision
- Teaching and Demonstration
- Paramedical Services

However, scores of 6 in these categories, which can include paramedical help with breathing equipment or with tube feeding, do not factor into the FIS. Per the ACL:

"The functions which enter into the calculation of the FI Score are the physical functions (Housework through Respiration) of field H1 of the SOC 293. First, every score of 6 is converted to a 1. (By definition, Paramedical Services are not uniform and therefore are considered separate from the FI.) Then 1 is subtracted from each of the rankings. Each

resulting ranking is multiplied by the appropriate weight (see #10 below). These products are totaled and 1 is added to the resulting sum. This the FI Score.”

The FIS, by ignoring high scores for paramedical and other key services, can drastically under-calculate the level of need for any particular consumer. Attached find a list of the actual scoring, produced through CMIPS, of many consumers who have composite FIS lower than 4 and would thus be eliminated from the program.

Apparently, a set of high scores for individual tasks can yield a low composite FIS. Even allowing for the various weighting of tasks, the results are as inexplicable as they are alarming. We can produce similar data from several counties and have no doubt that this phenomenon goes system wide.

Even task-specific functional index scores in the 2 to 3 range are frightfully deceptive. For example, a functional index of 2 means “Able to perform [a task] but needs verbal Assistance such as reminding, guidance or encouragement.” Consider a person with dementia or psychosis who needs to be reminded or encouraged to take medication, eat properly, and bathe. Non-performance of those tasks can quickly lead to deterioration in health and ability to function.

For these reasons, we believe the FIS is fundamentally an inappropriate, invalid, and unfair tool for determining eligibility. It would not surprise us if it also proved to be actionable.

We appreciate the urgency of the State’s cash flow needs and the overall Budget problems. However, the proposed IHSS cuts will result in cost shifting to the health care system and nursing homes. And no matter what, even modest cuts to IHSS would threaten the independence and well-being of many Californians.

CAPA implores you and your colleagues to reject any cuts that are based on the Functional Index Score. There is a great difference between cuts that are deep and difficult but logically defensible, and cuts that are arbitrary and rash.

Sincerely,

The image shows two handwritten signatures in black ink. The signature on the left is 'Trula M. LaCalle Ph.D.' and the signature on the right is 'Bernadette Lynch'.

Trula M. LaCalle, Ph.D.
Executive Director

Bernadette Lynch
President