This publication explains how In-Home Supportive Services (IHSS) monthly hours are calculated. This publication assumes you have already applied for IHSS, gone through the in-home assessment with the IHSS Social Worker, and received a Notice of Action (NOA) approving hours. For more information on the IHSS application process, please see the IHSS Nuts and Bolts Manual, # 5470.01.

A) Background Information

(1) IHSS Funding

First, it is important to understand the different funding sources for IHSS because which funding source (also known as “program”) you are placed in will determine the maximum amount of monthly IHSS hours that are available to you. Note, that “hours available to you” does not mean that you will get all those hours. Factors determining the hours you receive will be discussed in this publication.

1 To the best of our knowledge, this is the formula the State uses to calculate IHSS services. “Return to Main Document”
There are four IHSS programs. Each program has different eligibility criteria and maximum monthly hours available, depending on whether you are considered Severely Impaired or Non Severely Impaired (more on this below). These programs are:

i. Personal Care Services Program (PCSP);
ii. IHSS Plus Option (IPO);
iii. In-Home Supportive Services Residual (IHSS-R); and
iv. Community First Choice Option (CFCO)

You can find information about what program you are on by looking at your Notice of Action3 approving your application for IHSS, or by asking your IHSS Social Worker.

The following chart lists the programs and the maximum available monthly IHSS hours:

<table>
<thead>
<tr>
<th>Program</th>
<th>If you are considered Severely Impaired (SI) – up to:</th>
<th>If you are considered Non-Severely Impaired (NSI) – up to:</th>
<th>Citation/source of information</th>
</tr>
</thead>
<tbody>
<tr>
<td>PCSP</td>
<td>283 hrs/mth</td>
<td>283 hrs/mth</td>
<td>All County Information Notice (ACIN) Number I-28-06</td>
</tr>
<tr>
<td>IPO</td>
<td>283 hrs/mth</td>
<td>195 hrs/mth</td>
<td>All County Letter (ACL) Number 11-19</td>
</tr>
<tr>
<td>IHSS-R</td>
<td>283 hrs/mth</td>
<td>195 hrs/mth</td>
<td>ACIN I-28-06</td>
</tr>
<tr>
<td>CFCO</td>
<td>283 hrs/mth</td>
<td>Up to 283 hrs/mth</td>
<td>ACL 14-60</td>
</tr>
</tbody>
</table>

i. PCSP:
To be eligible for PCSP, you must be receiving full-scope Medi-Cal4 and your IHSS provider cannot be your spouse or parent.

3 See Notice of Action In-Home Supportive Services (IHSS) Change for a sample NOA, “Return to Main Document”
4 Full-scope Medi-Cal means that you can access all the services available under Medi-Cal. “Return to Main Document”
ii. IPO:

To be eligible for IPO, you do not qualify for the PCSP program because of one of the following:
- your IHSS provider(s) is your spouse or parent,
- you receive Advance Pay,\(^5\)
- or you receive a Restaurant Meal Allowance.\(^6\)

iii. IHSS-R:

To be eligible for IHSS-R, you do not receive full-scope Medi-Cal, or do not receive full-scope Medi-Cal with federal financial participation.\(^7\) This generally means IHSS-R is for lawful permanent residents, or persons residing in the United States under color of law.\(^8\)

\(^5\) Advance Pay is an option for IHSS recipients to receive an advanced payment for their monthly services to pay their providers directly. For more information, see the California Department of Social Services publication, “In-Home Supportive Services (IHSS) Program Advance Pay” for more information. Available here: In-Home Supportive Services (IHSS) Program Advance Pay. “Return to Main Document”

\(^6\) Restaurant Meal Allowance is given to IHSS recipients who have adequate cooking facilities at home, but their disabilities prevent them from using the facilities. MPP 30-757.133(a). Note that if you receive Medi-Cal through Supplemental Security Income, and you do not have adequate cooking and storage facilities at home, you should be receiving Restaurant Meal Allowance through the State Supplemental Payments. For more information, see ACL No. 16-12, available at: Publication of the Regional Program Operations Manual System (POMS). “Return to Main Document”


\(^8\) For more information, see IHSS Personal Care Services Program, Independence Plus Waiver, and Residual Program. “Return to Main Document”
iv. CFCO: Community First Choice Option

To be eligible CFCO, you must be eligible for full-scope, federal financial participation Medi-Cal, and meet a nursing facility level of care based.9

If you are on IPO but can also be on CFCO, consider switching to CFCO. CFCO allows for a greater maximum of hours (which you would still need to prove eligibility for), and you may benefit from the spousal impoverishment rules (see DRC publication # 5392.01;10 and the “All County Welfare Directors Letter, No. 17-25.11)

(2) Severity:

IHSS establishes maximum monthly hours depending on whether you are considered Severely Impaired (SI) or Non Severely Impaired (NSI). According to IHSS regulations, whether you are NSI or SI is determined by adding the hours in these categories: Meal Preparation, Meal Clean Up, Respiration Assistance; Bowel, Bladder Care; Feeding; Routine Bed Bath; Dressing; Menstrual Care; Ambulation; Transferring; Bathing, Oral Hygiene, Grooming; Rubbing Skins, Repositioning; Help with Prosthesis; Paramedical Services.12

If you receive alternative resources13 providing any of the above services, then those hours are included in determining whether a recipient is NSI or

9 For more information, see ACL No. 14-60, available at: Implementation of the Community First Choice Option (CFCO) Program. “Return to Main Document”
10 Available at: DRC Medi-Cal Programs to Help You Stay in Your Own Home or Leave a Nursing Home. “Return to Main Document”
11 Available at: Home and Community-Based Services and Spousal Impoverishment Provisions. “Return to Main Document”
12 MPP 30-7-1(s)(1)(A)-(D); The Manual of Policies and Procedures are available here: Social Services Standards - Chapter 30-700 Service Program No. 7: IHSS; and Social Services Standards - Service Program No. 7: IHSS Cost Limitations. “Return to Main Document”
13 Alternative Resources are IHSS-like services you receive through other programs. MPP 30-757.171(a)(2), and MPP 30-763.611. “Return to Main Document”
SI, even though those same hours are not counted towards that consumer’s IHSS need.¹⁴

Example: if you go to an adult day care center and receive assistance with meal clean-up for lunch, then your IHSS monthly hours will not include the assistance you need in cleaning up after lunch. The lunch clean up assistance you receive at the adult day care center will count towards whether you are “Severely Impaired” or “Non Severely Impaired,” however. This means that your maximum monthly hours may be 283, or 195, depending on whether you are found to be “Severely Impaired” or “Non Severely Impaired.”

You are considered SI if you receive 20 hours or more in the above categories each week.¹⁵ You are considered NSI if you receive 19 or less hours in the above categories each week.

(3) Home Assessment

The Social Worker will assess you in your home to determine what services you need and how much time you need for each service. Thereafter, if applicable, the Social Worker will prorate certain services, and will deduct time if there are alternative resources. Proration and Alternative Resources are discussed more below. Note that protective supervision may be prorated depending on your circumstances. Please see the DRC publication # 5612.01, for more information.

(4) Proration

When IHSS services can be met in common among anyone in the home, the hourly need for that service should be prorated.¹⁶ For example, if multiple people benefit from the provision of a related or domestic service, then the time it takes to prepare that service is divided equally among everyone who benefits, including non-IHSS recipients in the household.

¹⁴ MPP 30-701(s)(1), 30-763.5, 30-761.273. “Return to Main Document”
¹⁵ MPP 30-701(s)(1). “Return to Main Document”
¹⁶ MPP 30-763.32. “Return to Main Document”
Example: if it takes a parent 100 minutes to do weekly laundry for all five members of the family (including the parent and the single IHSS beneficiary), then the amount of time allotted to the IHSS beneficiary is 20 minutes (100 ÷ 5 = 20 minutes).

These service categories are prorated:
- Domestic Services and Heavy Cleaning;\(^{17}\)
- Related Services,\(^{18}\) and
- Protective Supervision.\(^{19}\)

If a service is not provided to more than one person at a time, then it should not be prorated.

Example: if a parent in the above example does her son’s (and he is the IHSS recipient) laundry separately because of bowel and bladder issues, then the laundry does not benefit the other household members. Here, the son’s laundry is not prorated among the other four family members.

(5) **Alternative Resources:**

Alternative Resources are IHSS-like services you receive through other programs such as an adult day care program, or school.\(^{20}\) After determining the amount of alternative resources you receive, the Social Worker will deduct this time from your total assessed need.

Example: You live in a household with your IHSS provider. The provider cleans up after breakfast, and dinner for both of you. You go to an adult day care center where you receive assistance cleaning up after your lunch. In the meal clean-up category, there is a column

\(^{17}\) MPP 30-763.31 “Return to Main Document”
\(^{18}\) MPP 30-763.32. Related services includes meal preparation, meal clean-up, routine laundry, shopping, for food, and other shopping/errands. “Return to Main Document”
\(^{19}\) For more information on how protective supervision is prorated, see the corresponding DRC publication # 5612.01. “Return to Main Document”
\(^{20}\) MPP 30-757.171(a)(2), MPP 30-763.611. “Return to Main Document”
labeled “Services You Refused or You Get From Others.” Here, the County Social Worker would first add up the total amount of time spent cleaning up after breakfast, lunch, and dinner. Then the County Social Worker would make an adjustment, or proration, because the clean-up services your providers provides benefits both you and the provider. This means the Social Worker assigns your prorated time to you in the column “Amount of Service You Need.” Then, the County Social Worker indicates the clean-up assistance you receive from the alternative resource; this information is listed in the “Services you Refused or You Get From Others” column.

B) STEPS:

**Step 1 Determine program and severity:**

Determine the type of funding program you are on by looking at page two of the initial NOA you received when you were approved for IHSS.

Determine the severity by adding up the service hours in the relevant categories as mentioned earlier.

**Step 2 Determine weekly non-protective supervision IHSS need:**

Add up all the IHSS hours you receive, excluding protective supervision hours.

**Step 3 Determine weekly protective supervision need:**

To determine whether you qualify for protective supervision, please see the DRC publication #5493.01. If protective supervision is prorated, hours prorated will be included in the column “services you receive or refuse from others.”

See DRC. publication #5612.01 for more information on how to prorate protective supervision.

21 Available at: DRC In-Home Supportive Services Protective Supervision. “Return to Main Document”
Step 4 Find total Weekly IHSS need including protective supervision, then calculate the monthly amount:

The Social Worker will add the amount of weekly IHSS hours listed in your Notice of Action with the weekly protective supervision services. They will multiply that weekly total by 4.33 to find the monthly total.

Step 5 Compare result from Step 4 to the maximum monthly amounts:

The Social Worker will compare the result from Step 4 to the maximum allowable hours under the program you qualify for. The Social Worker must choose the lower number.

For example, looking at the chart on page 2, if you are NSI, are funded through the IPO program, and are authorized for protective supervision, you are only allowed a maximum of 195 hours per month. This means that even if your monthly total is greater than 195 hours per month, you are limited to 195 hours per month in IHSS with protective supervision. If your monthly total is less than 195 hours per month, then you will be authorized that lower amount. In this case, because you need more IHSS hours than the maximum IHSS hours allow your NOA should document the unmet need. The case narrative must also reflect any unmet need. The IHSS Social Worker should refer you to no-cost government programs, or community-based resources, that may be able to address the unmet need. These referrals should be documented in your case file.

C) EXAMPLES:

Example A

22 Because calculations are done using decimal units, you may need to convert the minutes into decimal units by dividing the number of minutes by 60. Then add the number of hours to find the total hours and minutes in decimal form. For example: 32 hours and 10 minutes. To find the decimal unit for the minutes: 10 ÷ 60 = .1666. Then add that to the hours. 32 + 0.16 = 32.16

23 ACL 13-66.
Kramer is an 85 year old man who needs IHSS with protective supervision. He lives at home with his son, and his son’s wife. His son is his IHSS provider. No one else in the household receives IHSS with protective supervision. Because he is a Legal Permanent Resident, he has IHSS-R-funded IHSS.

**Step 1 Determine program and severity:**

Kramer is funded through the IHSS-R program. In adding the relevant categories of the hours as listed on his Notice of Action, it is found he is NSI because he is receiving less than 20 hours in the applicable categories.

**Step 2 Determine weekly non-protective supervision IHSS need:**

In adding all the non-protective supervision hours on his Notice of Action, he has 15 hours per week.

**Step 3 Determine weekly protective supervision need:**

Using the DRC publication # 5612.01, we determine that Kramer has 143 hours per week of protective supervision.

**Step 4 Find total Weekly IHSS need including protective supervision, then calculate the monthly amount:**

\[ 15 + 143 = 158 \text{ hours per week} \]
\[ 158 \times 4.33 = 684.14 \text{ hours per month} \]

**Step 5 Compare result from Step 4 to the maximum monthly amounts:**

According to the chart listed on page 2, with IHSS-R at the NSI severity level, the maximum monthly hours Kramer may receive is 195 hours per month.

The result in Step 4 of 684.14 hours per month is greater than his regulatory maximum of 195 hours per month. Thus, the maximum monthly hours Kramer may receive is 195 hours per month. His NOA should
document the unmet need. The IHSS Social Worker should refer Kramer to no-cost governmental programs, or community-based resources, that may be able to provide him with services to further meet that unmet need.

Example B:

There are four children in one household. The children’s names are Andrew, Barbara, Carlos, and Dante. Each child is authorized to receive protective supervision. Andrew and Barbara attend school for 7.5 hours per day, or 37.5 hours per week. Carlos and Dante are home schooled. The mother and father are both IHSS providers. Because of the children’s severe needs, the father can only provide protective supervision to Andrew and Barbara at the same time. The mother can only provide protective supervision to Carlos and Dante at the same time.

Step 1: Determine program and severity:

Alexander: Alexander receives IHSS under CFCO. This information was found on a Notice of Action approving his application for IHSS services. By adding up the categories starred in red, we discover that Alexander is NSI because he is receiving less than 20 hours per week in the applicable categories determining severity. He receives 19.85 hours for the applicable categories.24

Barbara: Barbara also receives IHSS under CFCO. She is SI because she receives 20 hours or more per week in the applicable categories.

Carlos: Carlos receives IHSS under CFCO. He is NSI because he receives less than 20 hours per week in the applicable categories.

Dante: Dante receives IHSS under CFCO. He is SI because he receives 20 hours or more per week in the applicable categories.

Step 2: Determine weekly non-protective supervision IHSS need:

24 In situations like this, continue to do some fact finding to see if he can receive 20 or more hours per week in one of the categories to be considered “severely impaired.” “Return to Main Document”
**Alexander:** In adding all the non-protective supervision hours on his Notice of Action, he is authorized for 24.85 weekly IHSS hours.

**Barbara:** In adding all the non-protective supervision hours on his Notice of Action, Barbara is authorized for 25 weekly IHSS hours.

**Carlos:** In adding all the non-protective supervision hours on his Notice of Action, Carlos is authorized for 5 weekly IHSS hours.

**Dante:** In adding all the non-protective supervision hours on his Notice of Action, Dante is authorized for 21 weekly IHSS hours.

**Step 3: Determine weekly protective supervision need:**

**Alexander:** 46.5 hours of protective supervision per week  
**Barbara:** 46.5 hours of protective supervision per week  
**Carlos:** 84 hours per week of protective supervision  
**Dante:** 84 hours per week of protective supervision

**Step 4: Find total Weekly IHSS need including protective supervision, then calculate the monthly amount:**

**Alexander:** Add the amount of weekly IHSS hours listed in your Notice of Action, 24.85, with the weekly protective supervision services, 46.5. This totals 71.35 hours per week. Then multiple 71.35 x 4.33 to find the monthly amount. This totals 308.9 hours per month.

**Barbara:**  
25 + 46.5 = 71.5 hours per week  
71.5 x 4.33 = 309.5 hours per month

**Carlos:**  
5 + 84 = 89 hours per week  
89 x 4.33 = 385.3 hours per month

**Dante:**  
21 + 84 = 105 hours per week  
105 x 4.33 = 454.6 hours per month
Step 5: Compare result from Step 4 to the maximum monthly amounts:

**Alexander:** Because Alexander is NSI, but has CFCO-funded IHSS, he is eligible to receive IHSS up to 283 hours per month. Because his actual monthly total is 308.9 hours per month, his authorized monthly IHSS hours with protective supervision is the lower amount of 283 hours per month.

**Barbara:** Because Barbara is SI, and has CFCO-funded IHSS, she is eligible to receive IHSS up to 283 hours per month. The result from Step 4 is 309.5 hours per month. The lesser of the two is 283 hours per month, so Barbara is authorized for 283 hours per month.

**Carlos:** Because Carlos is NSI, but has CFCO-funded IHSS, he is eligible to receive IHSS up to 283 hours per month. Because his actual monthly total is 385.3 hours per month, he is authorized for the regulatory maximum of 283 per month of IHSS hours with protective supervision.

**Dante:** Because Dante is SI, but has CFCO-funded IHSS, he is eligible to receive IHSS up to 283 hours per month. Because his actual monthly total is 454.6 hours per month, he is authorized for the regulatory maximum of 283 per month of IHSS hours with protective supervision.

**Example C**

Hui, his younger sister Isabella, and his younger brother Jasper receive protective supervision. They live with their father. Hui, Isabella, and Jasper have such high needs that their father can only look after Hui and Isabella simultaneously. The father hires an IHSS provider to look after Jasper. Hui and Isabella receive protective supervision in common (or have a common need for protective supervision) because their father can provide protective supervision to them at the same time. Hui and Jasper attend school for six hours per day, or 30 hours per week. Isabella is homeschooled, but during that time Isabella’s father must watch her.
Step 1 Determine program and severity:

**Hui:** Hui is IPO, and NSI because he receives less than 20 hours per week in the applicable categories.

**Isabella:** Isabella is also IPO, and NSI because she receives less than 20 hours per week in the applicable categories.

**Jasper:** Jasper is SI because he is receiving 20 hours or more in the applicable categories.

Step 2 Determine weekly non-protective supervision IHSS need:

**Hui:** In adding all the non-protective supervision hours on his Notice of Action, Hui has 12 hours per week in non-protective supervision IHSS.

**Isabella:** In adding all the non-protective supervision hours on his Notice of Action, Isabella has 15 per week in non-protective supervision IHSS.

**Jasper:** In adding all the non-protective supervision hours on his Notice of Action, Jasper has 20 per week in non-protective supervision IHSS.

Step 3 Determine weekly protective supervision need:

**Hui:** 54 hours per week of protective supervision  
**Isabella:** 84 hours per week in protective supervision  
**Jasper:** 138 hours per week in protective supervision

Step 4 Find total Weekly IHSS need including protective supervision, then calculate the monthly amount:

**Hui:**

- $12 + 54 = 66$ total IHSS per week;  
- $66 \times 4.33 = 285.78$ total IHSS per month
Isabella:
15 + 85 = 100 total IHSS per week;  
100 x 4.33 = 433 total IHSS per month

Jasper:
20 + 138 = 158 total IHSS per week;  
684.14 total IHSS per month

**Step 5 Compare result from Step 4 to the maximum monthly amounts:**

**Hui:** Because Hui is NSI with IPO-funded IHSS, his monthly maximum is 195 hours per month. Because the result in Step 4 is higher than the monthly maximum, Hui is limited to receiving 195 hours per month.

**Isabella:** Because Isabella is NSI with IPO-funded IHSS, her monthly maximum is 195 hours per month. Because the result in Step 4 is higher than the monthly maximum, she is limited to receiving 195 hours per month.

**Jasper:** Because Jasper is SI with IPO-funded IHSS, his monthly maximum is 283 hours per month. Because the result in Step 4 is higher than the monthly maximum, he is limited to receiving 283 hours per month.

**Note:** The father must be careful to not violate the IHSS overtime rules. Please see DRC Publication # 5603.01.  

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25 Available at: [New Rules for IHSS: Overtime and Related Charges](#).  
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