

**County of Orange Social Services Agency  
Family Self-Sufficiency & Adult Services Division**

**Program/Area:** Adult Services/In-Home Supportive Services  
**Title:** Case Denials  
**Number:** 1028 **Status:** Final  
**Effective Date:** 2/17/2022 **Revision Date:**  
**Approved:** Signature on File

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**PURPOSE** The policy provides guidelines for In-Home Supportive Services (IHSS) case denials.

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**POLICY** When an IHSS applicant does not meet the eligibility criteria for IHSS, an IHSS case should be denied.

The following are the denial reasons provided by the California Department of Social Services (CDSS):

- *SSI Board & Care Rate* – The applicant lives in a relative’s home and receives the board and care rate in their payment from Social Security.
- *Citizenship* – The applicant is a non-citizen not lawfully admitted for permanent residence in the U.S.
- *Non-California Residency* – The applicant does not have State of California residency.
- *Not in own home* – The applicant does not live in their own home. ([See Policy 1044 Own Home](#)).
- *Whereabouts unknown* – The applicant has not told the county where they are currently living and the County has conducted due diligence to locate the applicant.
- *Residing in a hospital* – The applicant is in a hospital and will not be returning home.
- *Residing in an intermediate care facility* – The applicant is in an intermediate care facility and will not be returning home.
- *Residing in a skilled nursing facility (SNF)* – The applicant is in a skilled nursing facility and has will not be returning home. *Residing in a community care facility (CCF)* – The applicant is in a community care facility and will not be returning home.
- *Not 65, Blind or Disabled* - The applicant is not 65 or older, blind, or disabled.
- *Refuse to pay Share of Cost* – The applicant was assessed under the IHSS Residual program and stated they will not pay their Share of Cost.
- *Applicant assessed but has no need* – The applicant does not need any services to safely stay in their home.
- *Share of Cost exceeds need* – The applicant was assessed under the IHSS Residual program, and their IHSS Share of Cost is more than the cost of their IHSS services.
- *Needs are being met through Alternative Resources/Voluntary Services/Refused Services* – All of the applicant’s individual assessed needs are being met through Alternative Resources, Voluntary Services, or they have refused Services.

- *Death* – The applicant passed away before the completion of the intake process.
  - *Did not provide adequate information* – The applicant did not provide the County with enough information to allow the County to fully assess them for services.
  - *Non-Compliance with Medi-Cal eligibility* – The County has been informed that the applicant did not provide the Medi-Cal Eligibility Technician with the required information to complete a Medi-Cal eligibility determination which is one of the requirements for IHSS eligibility.
  - *Application withdrawn* – The applicant/authorized representative asked to withdraw the application for IHSS.
  - *IHSS Residual Excess Resource* – The applicant cannot receive IHSS because they have more personal/real property than allowed under Supplemental Security Income/State Supplementary Payment (SSI/SSP).
  - *Invalid Social Security Number (SSN)* – The SSN provided for the applicant was invalid.
  - *Duplicate SSN* – The SSN provided has been determined to belong to someone else.
  - *No SSN / No ITIN* – The applicant does not have a valid SSN or no Individual Taxpayer Identification Number (ITIN).
    - If the applicant is in the process of applying for an SSN / ITIN and can provide proof, the case should not be denied.
  - *Health Care Certification (HCC) not received* - The applicant did not provide the County with a medical certification as required to authorize services.
  - *HCC-No Need* – The County received an HCC that states the applicant does not need any services to stay safely in their own home.
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