

**CASELOAD TARGETS AND RELATED FISCAL ALLOCATIONS IN SAN MATEO
COUNTY**
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"Happiness Is A Positive Cash Flow" - Fred Adler

INTRODUCTION

For my BASSC Executive Development Project, I selected exploring the relationship between the fiscal allocation received from the State and eligibility caseload targets. San Mateo County offered me an opportunity to do that and more. My intent was to examine and analyze their processes and procedures and determine how applicable they might be to Sonoma County. In addition to a broader understanding of the multiple elements of the fiscal process and an overall view of another county's management style, I learned that there is no "magic" answer. The difficulty I discovered is in trying to compare two counties with different operating methods. While I did learn a great deal about how San Mateo County's allocation is viewed in connection to their eligibility caseloads and staffing, this information was not directly transferable to Sonoma County.

During my site visits with my host county, I had the opportunity to attend various meetings with both management and line staff, interview and question a number of staff at different levels with various areas of expertise, observe and/or participate in meetings with State and County staff and most importantly, receive a great deal of time and guidance from my project facilitator, John Meermans, Revenue Enhancement Manager for San Mateo

County.

With this quest in mind, I began "a mission to find a solution." The purpose of this paper is twofold:

1. Outline what I learned during the time I spent with San Mateo County
2. Formulate recommendations to present to my Director regarding caseload targets and staffing levels.

HISTORICAL PERSPECTIVE

In Sonoma County, the fiscal responsibility for determining staffing levels in the Economic Assistance Division has historically been assigned to the Fiscal Division. When additional positions were needed or some other fiscal question arose, we looked to Fiscal to provide the answers. In recent years, E.A. Division Managers have taken on more responsibility in this area. We are working more closely with Fiscal in trying to understand the allocation process and in being able to anticipate upcoming changes. Our Director was asking us to take a closer look at our staffing practices and caseload levels and develop a formula to use in anticipating growth or reduction when needed. This begs the question, "Could we be doing a better job of anticipating our needs?"

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FINDINGS

San Mateo County has recently reorganized their department operations. They are a great role model for other counties and are well known as a "can do" county. What I found there was a willingness of staff at all levels to share information with me and work with me to help me understand what processes they use and why.

I met with Fiscal staff to review their county expense claim, time study procedures, and expenditure monitoring by line item/program and attended meetings on Medi-Cal case counting issues. We reviewed their State allocation letters for Medi-Cal showing target levels and looked at staffing and caseload figures. I also met with program staff who reviewed their operational procedures, staffing methods and caseload distribution processes.

Currently, San Mateo County is in the process of changing the way they count Medi-Cal cases. For all the other programs, cases are counted as family cases, meaning that every family unit gets one count. Medi-Cal numbers are currently reflected as FBU's (Family Budget Unit's). This could mean that one family case might actually be several FBU's. This inflates the caseload number but was approved a number of years ago by State Department of Health Services because each FBU uses different eligibility criteria and cases with multiple FBU's are more difficult and take longer to approve than cases with one FBU.

Their goal is to get accurate caseload numbers for Medi-Cal so they can convert the FBU's to family cases. This is a difficult process given a number of issues. Some statistics reflect persons eligible for the program, while others reflect numbers of clients who actually use the benefits. Using Social Security numbers as a tracking method invites problems due to pseudo numbers, which are arbitrary numbers issued to persons who don't have numbers or have minor consent services. Other issues arise because one family unit (one case number) may actually be a family split into two households. They have been working with their Systems staff to sort this process out.

They were able to come up with a formula that they continue to fine tune for the conversion of caseload numbers and have adjusted their caseload target levels to reflect that. This process was presented to staff at a union meeting to inform them of the change and the reasons for it.

DIFFERENCES BETWEEN COUNTIES

One of the most difficult tasks in trying to compare San Mateo County and Sonoma County was that the actual program operations are so different. I was specifically looking at the Medi-Cal Program. In San Mateo County, some of their line eligibility staff do intake for all programs (including Medi-Cal), some staff do Medi-Cal intake only and some do Medi-Cal intake as well as Medi-Cal continuing. They also have a county managed care system that operates through their County Public Health Department. In Sonoma County, Medi-Cal eligibility staff does both intake and continuing and also carries CMSP (County Medical Services Program) caseloads. Because of this, it is not easy to make comparisons about caseloads/workloads.

One of the more interesting things I learned is that the State target levels for both intake cases and continuing cases are different for each county. This again makes comparisons difficult.

While both counties do quarterly time studies and report the caseload data on the MC237 to the State, it seems as if the process to gather the data is different. Time did not allow the exploration of this issue and its potential impact.

IMPLICATIONS OF WHAT I LEARNED

The most important thing I learned in doing this project is how much I didn't know about the fiscal process. This experience has certainly expanded my knowledge in this area and has given me a thirst for more. It raises a number of questions for me in my position.

From a Fiscal perspective:

What is the next step? How best do I get the additional information/education that I need to further my understanding of this process? Is there information gathered from San Mateo County that while not directly transferable could help Sonoma County?

From a Program perspective:

Based on the above questions, I recommend that we set up a workgroup consisting of the Economic Assistance Division Director and myself from program combined with the appropriate person from our fiscal staff to examine these issues in a more thorough manner. We can have more direct contact with State DHS fiscal staff to explore what options to maximize our allocation might be available to our county. We can have our Planner Analysts work closely with the fiscal staff person responsible for reporting the statistics on the MC237 to make sure we understand where these numbers are coming from. The first step should be to look closely at our current State target levels and allocation and compare them to actual staffing numbers and caseload sizes to see where we stand. Program Managers should examine how we currently have staff operating and explore if using other methods would allow us to more efficiently use our time.

- Is there reason for us to look at family units instead of FBU's?
- How will this affect our fiscal allocation?
- Would we even be able to do it if it were beneficial?
- Are our operating procedures sound?
- Should we look at handling the workload intake vs. continuing differently?
- What would be the benefits or downsides?

RECOMMENDATIONS

In conclusion, I think that there are a number of things that we in Sonoma County can do to reach the goal that was presented and I am anxious to work on them. I was very fortunate to be allowed to participate in this project. The fiscal knowledge that I gained by visiting San Mateo County along with the wonderful networking experiences that I encountered will stay with me

for a very long time. I enjoyed the time I spent at my host county and hope I can apply the knowledge I acquired.

DOCUMENTS AND FORMS TO SUPPORT CASE STUDY

Caseload Issues Worksheet

Addendum to Letter of Understanding

Monthly Caseload Assignment Chart - by unit

Staffing Report

Caseloads Report

San Mateo County CDS Master File Extract Process

Income Maintenance Target - Supervisor

Adjustment Worksheet

MCAC Letters

Medi-Cal Admin Cost Control Monitoring Report

PCAB

Time Study & Directions

SMART Screenprints