

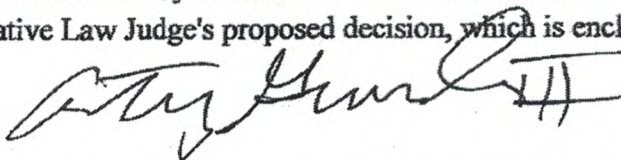
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Hearing No. 2012165180


In the Matter of Claimant(s):


**DIRECTOR'S
ALTERNATE
DECISION**

We exercise our authority to issue this Director's Alternate Decision as the decision in this matter. The Administrative Law Judge's proposed decision, which is enclosed, was not adopted and has no effect.



Issue Date: **SEP 07 2012**

 Will Lightbourne
Director

 Toby Douglas
Director

State Hearing Record

Hearing Date: 7/11/2012

Release Date:

SEP 07 2012

Aid Pending: No - Untimely

Issue Codes: [614-1] [567-1]

Agency: Riverside County

Agency Representative:

Agency:

Agency Representative:

Auth. Rep. Org.: Ihss Advocates

Authorized Rep: Larry Rosen

SSN:

SSN:

AKA:

AKA:

Case Name:

Language:

LA District/Case:

Companion Case:

Appeal Rights

You may ask for a rehearing of this decision by mailing a written request to the Rehearing Unit, 744 P Street, MS 9-17-37, Sacramento, CA 95814 within 30 days after you receive this decision. This time limit may be extended up to 180 days only upon a showing of good cause. In your rehearing request, state the date you received this decision and why a rehearing should be granted. If you want to present additional evidence, describe the additional evidence and explain why it was not introduced before and how it would change the decision. You may contact Legal Services for assistance.

You may ask for judicial review of this decision by filing a petition in Superior Court under Code of Civil Procedure §1094.5 within one year after you receive this decision. You may file this petition without asking for a rehearing. No filing fees are required. You may be entitled to reasonable attorney's fees and costs if the Court renders a final decision in your favor. You may contact Legal Services for assistance.

This decision is protected by the confidentiality provisions of Welfare and Institutions Code §10850.

SUMMARY

Riverside County incorrectly terminated claimant's In Home Supportive Services and Personal Care Service Program (IHSS/PCSP) benefits effective June 30, 2012 due to both parents being in the home, where the county has failed to prove that the provider parent is not precluded from full-time employment due to the need to care for the recipient. [614-1] [567-1]

FACTS

The recipient is a 7 year old child. He lives at home with both parents and 4 siblings. His mother has been acting as his care provider. He has a diagnosis of Fragile X Syndrome and developmental delay. He had been previously authorized to receive 195 hours per month which included Bowel & Bladder care, Dressing assistance, and Protective Supervision.

On November 3, 2011, Riverside County received from Orange County a notice of an Inter-County Transfer (ICT) on behalf of the claimant.

On April 3, 2012 a social worker made a home visit as part of the required assessment of the child's needs. The claimant's mother informed the social worker her husband had been unemployed for more than three (3) months and was home full time. The husband reported that he is not disabled or mentally ill. Claimant's mother told the social worker that she stayed at home and took care of her children.

On May 25, 2012 Riverside County sent a notice that approved the ITC and authorized the 195 hours previously allowed by Orange County for the month of June 2012.

However, on May 31, 2012 Riverside County sent a notice that terminated claimant's IHSS/PCSP benefits effective June 30, 2012. The notice supported the proposed action with the reason that the services may only be provided by a parent if the parent has left full-time employment, or is precluded from full-time employment due to the need to provide services for the child, there is no other suitable provider and, without the services, the child may required out-of-home placement or receive inadequate care. The notice cited MPP §30-763.451 and .452. At the hearing, the County relied on the express provisions of MPP §30-763.451; 452; & 453 to support its position that IHSS/PCSP could not be paid to a parent provider when both parents were in the home and available to care for the child.

Claimant presented evidence that both she and her husband had previously been employed in Las Vegas a few years ago. When they moved to Orange County California they applied for IHSS/PCSP.

The County presented evidence they spoke with the claimant's mother on July 6, 2012 and she reported that her husband was still unemployed and had not been employed for over 6 months.

LAW

All regulations referred to herein are set forth in the Manual of Policies and Procedures issued by the Department of Social Services unless otherwise specified.

I

Welfare and Institutions Code Section 12300(e) reads as follows:

Where supportive services are provided by a person having the legal duty pursuant to the Family Code to provide for the care of his or her child who is the recipient, the provider of supportive services shall receive remuneration for the services only when the provider leaves full-time employment or is prevented from obtaining full-time employment because no other suitable provider is available and where the inability of the provider to provide supportive services may result in inappropriate placement or inadequate care.

These providers shall be paid only for the following:

- (1) Services related to domestic services.
- (2) Personal care services.
- (3) Accompaniment by a provider when needed during necessary travel to health-related appointments or to alternative resource sites.
- (4) Protective supervision only as needed because of the functional limitations of the child.
- (5) Paramedical services.

II

When the IHSS recipient is under 18 years of age and is living with the recipient's parent(s), IHSS may be purchased from a parent when all of the following conditions are met:

- (a) The parent has left full-time employment or is prevented from obtaining full-time employment because of the need to provide IHSS to the child.
- (b) There is no other suitable provider available.
- (c) If the child does not receive the listed services the child may inappropriately require out-of-home placement or may receive inadequate care.

(§30-763.451)

For the purposes of Section 30-763.451(b), a suitable provider is any person, other than the recipient's parent(s), who is willing, available, and qualified to provide the needed IHSS.

(§30-763.452)

When both parents are in the home, a parent may receive a payment as an IHSS provider only under the following conditions:

- (a) The conditions specified in §§30-763.451(a) through (c) are met.
- (b) The non-provider parent is unable to provide the services because he/she is absent because of employment or in order to secure education or is physically or mentally unable to provide the services, as specified in §30-763.442.
- (c) If the non-provider parent is unable to provide services because of employment or educational purposes, payment shall be made to the provider only for services normally provided during the periods of the non-provider's absence.

(§30-763.453)

When the recipient is under 18 years of age and living with the recipient's parent(s), IHSS may be purchased from a provider other than the parent(s) when the parent(s) are not able to provide the services due to employment or educational related absence, physical or mental inability to perform the services, or absence due to medical treatment. Up to eight hours per week may be authorized for periods when the parent(s) must be absent from the home in order to perform shopping and errands essential to the family or for essential purposes related to the care of the recipient's siblings who are minors. (§§30-763.441-.444)

A parent can be paid to provide the following services:

- (a) Related services, as specified in Section 30-757.13
- (b) Personal care services, as specified in Section 30-757.14
- (c) Assistance with travel, as specified in Section 30-757.15
- (d) Paramedical services, as specified in Section 30-757.19
- (e) Protective supervision, as specified in Section 30-757.17, limited to that needed because of the functional limitations of the recipient. This service shall not include routine child care of supervision.

(§30-763.454)

III

IHSS Plus Waiver (replaced by IPO) eligibility is restricted to individuals who are requesting or receiving in-home care and who have been determined eligible for federally funded full-scope Medi-Cal and who:

- Receive personal care; protective supervision; domestic and related services; heavy cleaning; yard hazard abatement; or teaching and demonstration, when any of the services are provided by a spouse of the recipient or parent of a minor child recipient as allowed under MPP §§30-763.41 and .45;
- Receive Restaurant Meal Allowance; and/or
- Receive Advance Payment for in-home services.

If any of the above components exist in a case, the entire case will be covered under the IHSS Plus Waiver.

(All County Letter 05-05, June 2, 2005; All County Welfare Director's Letter 05-21, June 13, 2005)

All services authorized for minors, regardless if performed by a parent or a non-parent provider, must be assessed based upon disability, and not upon their age. (W&IC §12300(a) and ACIN #I-28-06.)

The IHSS Plus Waiver (replaced by IPO) program will follow the IHSS Program Definitions and Special Definitions, specified in MPP Sections 30-700 and 30-701, unless otherwise specified.

Eligibility

- (1) A person is eligible for the IHSS Plus Waiver who is a California resident, living in his/her own home and is aged, blind or disabled according to Medi-Cal definitions, and;

- (2) Has been found eligible for full-scope federally funded Medi-Cal based upon either:
 - (A) Receipt of cash assistance through SSI/SSP, CalWORKs cash aid or Foster Care, or
 - (B) An eligibility determination completed by a Medi-Cal Eligibility Worker for full-scope federally funded Medi-Cal, in accordance with Medi-Cal regulations located at Title 22, California Code of Regulations (CCR), Division 3, Subdivision 1, Chapters 1 and 2, and;
- (3) Has an assessed need, based upon a needs assessment as described in MPP Section 30-761, and;
- (4) Receives at least one of the following:
 - (A) Restaurant Meal Allowance as specified in MPP Section 30-757.134;
 - (B) Advance Pay as specified in MPP Section 30-769.73;
 - (C) Service(s) provided by his/her spouse as allowed in MPP Section 30-763.41; or
 - (D) Service(s) as a minor child provided by his/her parent as allowed in MPP Section 30-763.45. and
- (5) Any applicable share of cost has been met.

(§30-785(a) and (b))

Notwithstanding the Administrative Procedure Act, Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department may implement the provisions of this section through all-county welfare director letters or similar publications. Actions taken to implement, interpret, or make specific this section shall not be subject to the Administrative Procedure Act or to the review and approval of the Office of Administrative Law. Upon request of the department, the Office of Administrative Law shall publish the regulations in the California Code of Regulations. All county welfare director letters or similar publications authorized pursuant to this section shall remain in effect for no more than 18 months.

The department may also adopt emergency regulations implementing the provisions of this section. The adoption of regulations implementing this section shall be deemed an emergency and necessary for the immediate preservation of the public peace, health, safety, or general welfare. The emergency regulations authorized by this section shall be exempt from review by the Office of Administrative Law. Any emergency regulations authorized by this section shall be submitted to the Office of Administrative Law for filing with the Secretary of State and shall remain in effect for no more than 18 months by which time final regulations shall be adopted.

(W&IC §14132.951(h))

In the event of a conflict between the terms of the IHSS Plus waiver (replaced by IPO) and any provision of this part or any regulation, all-county welfare directors letters or similar publications adopted for the purpose of implementing this part, the terms of the waiver shall control to the extent that the services are covered by the waiver. If the department determines that a conflict exists, the department shall issue updated instructions to counties for the purposes of implementing necessary program changes. The department shall post a copy of, or a link to, the instructions on its Web site.

(W&IC §14132.951(i))

All Medi-Cal eligibility determinations are to be completed following Medi-Cal rules. This includes Medi-Cal eligibility determinations for IHSS and PCSP recipients. (All County Welfare Director's Letter 04-27, August 30, 2004)

Medi-Cal eligibility determinations and redeterminations are to be performed on all applications received by the county requesting in-home services and existing in-home service for persons who are not also eligible for SSI/SSP or other Medi-Cal linked cash-based assistance. These determinations/redeterminations are to be performed by Medi-Cal eligibility workers using Medi-Cal rules, Medi-Cal forms, and notices of action.

Individuals must be determined eligible for whatever Medi-Cal program is appropriate (e.g., Section 1931(b), Aged and Disabled Federal Poverty Level, Pickle, Medically Needy, 250 percent Working Disabled, etc) before a referral is forwarded to the IHSS unit for a needs assessment.

(All County Welfare Director's Letter 05-21. June 13, 2005).

IV

Parents can work out of the home and still be an IHSS Plus Waiver (now IPO) provider as long as they are not working full-time. MPP 30-763.451(a) requires that to be a paid provider, the parent has left full-time employment or is prevented from obtaining full-time employment because of the need to provide in home supportive services to the child.

Two parents who both work full-time cannot be paid for services in the IPO during the hours they are home in the morning and evening. In order for parents to be paid providers, they must meet the criteria in MPP 30-763.45. MPP 30-763.451(a) requires that the parent has left full-time employment or is prevented from obtaining full-time employment because of the need to provide IHSS to the child.

(ACIN I-28-06, April 11, 2006, answers to questions 6 and 8)

CONCLUSION

The county has the burden to show that the parent provider has either not left full time employment or is not precluded from obtaining full time employment, due to the need to care for the recipient. The county must further determine whether there is a suitable provider and whether the failure to provide the services would result in inappropriate out-of-home placement or inadequate care, pursuant to §30-763.451; 452. Although these issues were raised by the county in the notice of action, at the hearing, the county instead relied on §30-763.453 (c), a new basis of support for its position. It failed to establish that the claimant was precluded from obtaining full-time employment due to the need to care for the child.

The county's reliance on §30-763.453(c) is misplaced. California Department of Social Services (CDSS) has taken the position that this regulation is not supported by statute and is not enforceable. Therefore, the fact that both parents are in the home is not determinative. Having failed to prove the underlying basis for the discontinuance, the county's proposed action cannot be sustained.

ORDER

The claim is granted.

Riverside County shall rescind its discontinuance action effective June 30, 2012. Riverside County shall reinstate benefits effective June 30, 2012, as otherwise eligible.

AG:cn

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Hearing No. 2012165180

In the Matter of Claimant(s):

PROPOSED
DECISION

I submit the attached proposed decision for
review and recommend its adoption.

James W. Beall
James W. Beall
Administrative Law Judge

Cert Date: August 22, 2012

Hearing Date: 7/11/2012

Aid Pending: No - Untimely

Agency: Riverside County

Agency:

Auth. Rep. Org.: IHSS Advocates

SSN:

AKA:

Case Name:

LA District/Case:

State Hearing Record

Release Date:

Issue Codes:

K14-2 [567-2]

Agency Representative:

Agency Representative:

Authorized Rep: Larry Rosen

SSN:

AKA:

Language:

Companion Case:

Appeal Rights

You may ask for a rehearing of this decision by mailing a written request to the Rehearing Unit, 444 P Street, MS 9-17-37, Sacramento, CA 95834 within 30 days after you receive this decision. This time limit may be extended up to 180 days only upon a showing of good cause. In your rehearing request, state the date you received this decision and why a rehearing should be granted. If you want to present additional evidence, describe the additional evidence and explain why it was not introduced before and how it would change the decision. You may contact Legal Services for assistance.

You may ask for judicial review of this decision by filing a petition in Superior Court under Code of Civil Procedure §1094.5 within one year after you receive this decision. You may file this petition without asking for a rehearing. No filing fees are required. You may be entitled to reasonable attorney's fees and costs if the Court renders a final decision in your favor. You may contact Legal Services for assistance.

This decision is protected by the confidentiality provisions of Welfare and Institutions Code §10850.

SUMMARY

Riverside County correctly terminated claimant's In Home Supportive Services and Personal Care Service Program (IHSS/PCSP) benefits effective June 30, 2012 where it is found that both parents are available to care for the claimant. [614-2] [567-2]

FACTS

The claimant is a 7 year old child. He lives at home with both parents and 4 siblings. His mother has been acting as his care provider. He has a diagnosis of Fragile X Syndrome and developmental delay. He had been previously authorized to receive 195 hours per month which included Bowel & Bladder care, Dressing assistance, and Protective Supervision.

On November 3, 2011, Riverside County received from Orange County a notice of an Inter-County Transfer (ICT) on behalf of the claimant.

On April 3, 2012 a social worker made a home visit as part of the required assessment of the child's needs. The claimant's mother informed the social worker her husband had been unemployed for more than three (3) months and was home full time. The husband reported that he is not disabled or mentally ill. Claimant's mother told the social worker that she stayed at home and took care of her children.

On May 25, 2012 Riverside County sent a notice that approved the ITC and authorized the 195 hours previously allowed by Orange County for the month of June 2012.

However, on May 31, 2012 Riverside County sent a notice that terminated claimant's IHSS/PCSP benefits effective June 30, 2012 because there were two parents in the home; neither parent was employed; and the recipient was their own child under the age of 18. The County relied on the express provisions of MPP §30-763.451; 452; & 453 to support its position that IHSS/PCSP could not be paid to a parent provider when both parents were in the home and available to care for the child.

Claimant's mother presented evidence that both she and her husband had both previously been employed in Las Vegas a few years ago. When they moved to Orange County California they applied for IHSS/PCSP.

The County presented evidence they spoke with the claimant's mother on July 6, 2012 and she reported that her husband was still unemployed and had not been employed for over 6 months.

LAW

All regulations referred to herein are set forth in the Manual of Policies and Procedures issued by the Department of Social Services unless otherwise specified.

Welfare and Institutions Code Section 12500(e) reads as follows:

Where supportive services are provided by a person having the legal duty pursuant to the Family Code to provide for the care of his or her child who is the recipient, the provider of supportive services shall receive remuneration for the services only when the provider leaves full-time employment or is prevented from obtaining full-time employment because no other suitable provider is available and where the inability of the provider to provide supportive services may result in inappropriate placement or inadequate care.

These providers shall be paid only for the following:

- (1) Services related to domestic services.
- (2) Personal care services.
- (3) Accompaniment by a provider when needed during necessary travel to health-related appointments or to alternative resource sites.
- (4) Protective supervision only as needed because of the functional limitations of the child.
- (5) Paramedical services.

II

When the IHSS recipient is under 18 years of age and is living with the recipient's parent(s), IHSS may be purchased from a parent when all of the following conditions are met:

1. The parent has left full-time employment or is prevented from obtaining full-time employment because of the need to provide IHSS to the child.
2. There is no other suitable provider available.
3. If the child does not receive the listed services the child may inappropriately require out-of-home placement or may receive inadequate care.

(§30-763.451)

When both parents are in the home, a parent may receive a payment as an IHSS provider only under the following conditions:

1. The conditions specified in §§30-763.451(a) through (c) are met.
2. The non-provider parent is unable to provide the services because he/she is absent because of employment or in order to secure education or is physically or mentally unable to provide the services, as specified in §30-763.442.
3. If the non-provider parent is unable to provide services because of employment or educational purposes, payment shall be made to the provider only for services normally provided during the periods of the non-provider's absence.

(§30-763.453)

When the recipient is under 18 years of age and living with the recipient's parent(s), IHSS may be purchased from a provider other than the parent(s) when the parent(s) are not able to provide the services due to employment or educational related absence, physical or mental inability to perform the services, or absence due to medical treatment. Up to eight hours per week may be authorized for periods when the parent(s) must be absent from the home in order to perform shopping and errands essential to the family or for essential purposes related to the care of the recipient's siblings who are minors. (§§30-763.441-.444)

A parent can be paid to provide the following services:

- (a) Related services, as specified in Section 30-757.13
- (b) Personal care services, as specified in Section 30-757.14

- (c) Assistance with travel, as specified in Section 30-757.15
- (d) Paramedical services, as specified in Section 30-757.19
- (e) Protective supervision, as specified in Section 30-757.17, limited to that needed because of the functional limitations of the recipient. This service shall not include routine child care of supervision.

(§30-763.454)

III

IHSS Plus Waiver (replaced by IPO) eligibility is restricted to individuals who are requesting or receiving in-home care and who have been determined eligible for federally funded full-scope Medi-Cal and who:

- Receive personal care; protective supervision; domestic and related services; heavy cleaning; yard hazard abatement; or teaching and demonstration, when any of the services are provided by a spouse of the recipient or parent of a minor child recipient as allowed under MPP §§30-763.41 and .45;
- Receive Restaurant Meal Allowance; and/or
- Receive Advance Payment for in-home services.

If any of the above components exist in a case, the entire case will be covered under the IHSS Plus Waiver.

(All County Letter 05-05, June 2, 2005; All County Welfare Director's Letter 05-21, June 13, 2005)

All services authorized for minors, regardless if performed by a parent or a non-parent provider, must be assessed based upon disability, and not upon their age. (W&IC §12300(a) and ACIN #I-28-06.)

The IHSS Plus Waiver (replaced by IPO) program will follow the IHSS Program Definitions and Special Definitions, specified in MPP Sections 30-700 and 30-701, unless otherwise specified.

Eligibility

- (1) A person is eligible for the IHSS Plus Waiver who is a California resident, living in his/her own home and is aged, blind or disabled according to Medi-Cal definitions, and;
- (2) Has been found eligible for full-scope federally funded Medi-Cal based upon either:
 - (A) Receipt of cash assistance through SSI/SSP, CalWORKs cash aid or Foster Care, or
 - (B) An eligibility determination completed by a Medi-Cal Eligibility Worker for full-scope federally funded Medi-Cal, in accordance with Medi-Cal regulations located at Title 22, California Code of Regulations (CCR), Division 3, Subdivision 1, Chapters 1 and 2, and;
- (3) Has an assessed need, based upon a needs assessment as described in MPP Section 30-761, and;
- (4) Receives at least one of the following:
 - (A) Restaurant Meal Allowance as specified in MPP Section 30-757.134;
 - (B) Advance Pay as specified in MPP Section 30-769.73;
 - (C) Service(s) provided by his/her spouse as allowed in MPP Section 30-763.41; or

(D) Service(s) as a minor child provided by his/her parent as allowed in MPP Section 30-763.45. and

(5) Any applicable share of cost has been met.

(§30-785(a) and (b))

Notwithstanding the Administrative Procedure Act, Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department may implement the provisions of this section through all-county welfare director letters or similar publications. Actions taken to implement, interpret, or make specific this section shall not be subject to the Administrative Procedure Act or to the review and approval of the Office of Administrative Law. Upon request of the department, the Office of Administrative Law shall publish the regulations in the California Code of Regulations. All county welfare director letters or similar publications authorized pursuant to this section shall remain in effect for no more than 18 months.

The department may also adopt emergency regulations implementing the provisions of this section. The adoption of regulations implementing this section shall be deemed an emergency and necessary for the immediate preservation of the public peace, health, safety, or general welfare. The emergency regulations authorized by this section shall be exempt from review by the Office of Administrative Law. Any emergency regulations authorized by this section shall be submitted to the Office of Administrative Law for filing with the Secretary of State and shall remain in effect for no more than 18 months by which time final regulations shall be adopted.

(W&IC §14132.951(h))

In the event of a conflict between the terms of the IHSS Plus waiver (replaced by IPO) and any provision of this part or any regulation, all-county welfare directors letters or similar publications adopted for the purpose of implementing this part, the terms of the waiver shall control to the extent that the services are covered by the waiver. If the department determines that a conflict exists, the department shall issue updated instructions to counties for the purposes of implementing necessary program changes. The department shall post a copy of, or a link to, the instructions on its Web site.

(W&IC §14132.951(i))

All Medi-Cal eligibility determinations are to be completed following Medi-Cal rules. This includes Medi-Cal eligibility determinations for IHSS and PCSP recipients. (All County Welfare Director's Letter 04-27, August 30, 2004)

Medi-Cal eligibility determinations and redeterminations are to be performed on all applications received by the county requesting in-home services and existing in-home service for persons who are not also eligible for SSI/SSP or other Medi-Cal linked cash-based assistance. These determinations/redeterminations are to be performed by Medi-Cal eligibility workers using Medi-Cal rules, Medi-Cal forms, and notices of action.

Individuals must be determined eligible for whatever Medi-Cal program is appropriate (e.g., Section 1931(b), Aged and Disabled Federal Poverty Level, Pickle, Medically Needy, 250 percent Working Disabled, etc) before a referral is forwarded to the IHSS unit for a needs assessment.

(All County Welfare Director's Letter 05-21, June 13, 2005).

Parents can work out of the home and still be an IHSS Plus Waiver (now IPO) provider as long as they are not working full-time. MPP 30-763.451(a) requires that to be a paid provider, the parent has left full-time employment or is prevented from obtaining full-time employment because of the need to provide in home supportive services to the child.

Two parents who both work full-time cannot be paid for services in the IPO during the hours they are home in the morning and evening. In order for parents to be paid providers, they must meet the criteria in MPP 30-763.45. MPP 30-763.451(a) requires that the parent has left full-time employment or is prevented from obtaining full-time employment because of the need to provide IHSS to the child.

(ACIN I-28-06, April 11, 2006, answers to questions 6 and 8)

CONCLUSION

There is some evidence that the claimant's mother left employment or is prevented from seeking outside employment due to the fact she has five children at home to care for. There is no evidence that her husband left employment to care for the claimant. There is no evidence that at the time of the assessment and at the time of the hearing that "no other suitable provider was available" as required by Welfare & Institutions Code section 12300(d). Both parents are suitable providers. There is no evidence that while both parents remained unemployed in April and June 2012 there was any likelihood that supportive services would not be provided by the parents, who had the legal duty to provide them, or that there was any possibility or likelihood that there would be an inappropriate placement or inadequate care. This finding is also required by Welfare & Institutions Code section 12300(d).

The County argues that while both parents are unemployed they are both available to care for their child, making them both suitable providers, and there is no real or imagined risk of out of home placement of the child while both parents are available in the home.

It is concluded that the County acted correctly when it terminated the claimant's IHSS/PCSP benefits. Since both parents are available to care for him, while they remain unemployed there is no eligibility to IHSS benefits under Welfare & Institutions Code section 12300(d).

ORDER

The claim is denied.

JB:cn