

1979 ANNUAL REPORT

MADISON COUNTY DEPARTMENT OF SOCIAL SERVICES

James L. Covert  
Commissioner

ANNUAL REPORT

Income Maintenance Unit

The Public Assistance caseload remained stable throughout 1979 despite the increasing inflationary pressure of the economy. The year showed only a 1.5% increase in total caseload, ending the year with a 1.7% increase over 1978 figures. The yearly caseload level represents approximately 2.5% of the county's population. Actual caseload statistics were as follows:

	<u>ADC</u>	<u>HR</u>	<u>TOTAL</u>
January, 1979	434	88	522
December, 1979	437	93	530
December, 1978	429	92	521

By maintaining this hold on caseload levels, the expenditures for 1979 increased by only \$28,048 (1.6%) over 1978 expenditures:

	<u>ADC</u>	<u>HR</u>	<u>TOTAL</u>
1979	1,551,337	189,573	1,740,910
1978	1,526,237	186,625	1,712,862

A slight decrease occurred in expenditures for emergency assistance programs - Emergency Assistance to Families (EAF) and Emergency Assistance for Adults (EAA). A total of \$4,378 was expended to meet emergent situations, a decrease of \$574 or 11.6% from 1978's figure. This decrease is surprising in light of the State's broadening these categories to encompass payment of ongoing fuel costs due to the sudden increase in prices.

During the year, 1,006 applications were made for Public Assistance. Of these, only 35% were denied assistance. This low percentage of denials is an indicator of the amount of case activity that occurred throughout the year. Case openings exceeded closings by only eight at the end of the year.

Of the applications accepted, 22 were for burial expenses, reflecting no ongoing effect on caseload levels.

Of prime concern throughout the year for both management and on-line workers was staff turnover within the unit. Of the seven positions, only four remained constant, the other three being filled by seven different workers. One position remained vacant three months due to lack of CETA funds. This placed additional strain on the remaining workers.

In the past year the Income Maintenance Unit has done a most commendable job of "holding the line" in terms of caseload levels and expenditures. High inflation and energy costs are steadily increasing the requests for Public Assistance, making the task of "holding the line" even more difficult for the upcoming year.

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Food Stamp Unit

The new Food Stamp Act of 1977 was implemented January 1, 1979. Significantly increased administrative requirements and our economy's ever-continuing inflationary spiral created extreme burdens on this small unit.

The new Food Stamp Act was implemented in two phases, Phase I to take effect January 1, 1979, resulting in the elimination of the purchase requirement. This phase alone required a complete case change eliminating the purchase requirement from our computer data and a change to a different style ATP card (Authorization to Participate).

Phase II of this program was the more complicated of the two and was implemented on March 1, 1979. This phase had three major areas to be changed and/or added to our present program.

1) Revision of the Budget Computation

This step alone required the use of a completely new application form and worksheet. It also involved a new procedure for determining eligibility with the use of three new and different deductions. This change-over to the new budget format was to be completed as cases were recertified during March, April and May with the remainder to be converted by a desk review by June 30, 1979.

2) SSI and Public Assistance Cases No Longer Categorically Eligible

As a result of this new criteria, we now were required to determine food stamp eligibility for all SSI and PA recipients. This now involved having our Income Maintenance section take a food stamp application

in addition to the PA application (except for those cases that were considered to be expedited and/or mixed households.) These situations will be addressed later, and the food stamp application will be sent to the Food Stamp Unit for determination of clients' eligibility.

As stated above, this also required us to now start determining eligibility for all SSI recipients. Prior to this all SSI applicants automatically were eligible for at least the minimum coupon allotment, no matter what their income or resources were.

3) Expedited Cases

This basically is emergency issue of food stamps. If a client is determined expedited-eligible, an application and interview must be taken that day, and eligibility determined and the ATP issued within a 2-day period.

This new factor created one problem in that every PA applicant who comes in believes himself to be in need of expedited food stamp service. Therefore, an additional Food Stamp Examiner was needed to specifically handle these cases (average 3-5 cases per day) and all the PA mixed households.

In June, the federal 6-month poverty guideline level reevaluation resulted in an increase in the total coupon allotment and maximum income levels. The new guidelines in turn required a complete desk review of active cases to make the appropriate changes. At this time we also completed the conversion of the remaining cases to the new food stamp program. The procedure was repeated in December when new guidelines were again issued.

New poverty guidelines, inflation, and a number of significant labor strikes resulted in a doubling of the non-public assistance caseload from 500 (January, 1979) to 1100 (December, 1979). Such increases demanded

additional staff to help complete mandated case requirements. At present, Food Stamp staff consists of five food stamp examiners, two clerical and one supervisor. Four examiners handle the 1,087 active NPA caseload. The remaining examiner handles all the expedited PA cases and the mixed households. The PA caseload is handled by an account clerk-typist with the other clerical person assuming additional typing and filing duties.

	<u>NPA CASES/PERSONS</u>		<u>PA CASES/PERSONS</u>	
December, 1979	1087	/ 3420	370	/ 1137
November	1006	/ 3126	382	/ 1187
October	948	/ 2870	346	/ 1084
September	961	/ 2950	333	/ 1080
August	999	/ 2905	347	/ 1091
July	890	/ 2721	351	/ 1105
June	829	/ 2523	389	/ 1225
May	812	/ 2446	407	/ 1323
April	807	/ 2673	434	/ 1253
March	643	/ 1869	365	/ 1239
February	691	/ 2069	435	/ 1443
January	682	/ 1985	451	/ 1504
December, 1978	561	/ 1523	419	/ 1383

	<u>TOTAL BONUS COUPON REDEEMED</u>	<u>CASES HANDLED 1979</u>			
		<u>Cert.</u>	<u>Recert.</u>	<u>Term.</u>	<u>Denied</u>
December, 1979	133,887	124	78	110	16
November	110,784	145	57	66	23
October	109,959	112	93	68	19
September	112,355	111	83	61	24
August	114,720	158	108	92	27
July	105,779	95	55	38	16
June	91,703	95	87	81	26
May	81,121	100	72	66	16
April	89,938	93	57	65	31
March	79,025	119	53	61	18
February	82,936	128	58	66	17
January	81,647	105	55	78	24

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Child Support Unit

The year 1979 opened with an ADC (Aid to Dependent Children) caseload of 536. A breakdown of these cases shows that 216 were active (had support order) and 320 were inactive (putative father unknown; paternity not established or location of absent parent unknown).

The total caseload fluctuated during the year from a high of 537 to a low of 483. The monthly average for 1979 was 521 cases.

The number of active cases showed a gradual rise from a low of 214 in May to a high of 243 in December. Increased efforts in locating absent parents and establishing paternity is primarily responsible for the steady improvement in the number of active cases.

In addition to obtaining and enforcing support orders, this unit is attempting to recover arrears due the agency. In 1979, \$3,500 in arrears were recovered from one in-area respondent. Two other cases were submitted to the Internal Revenue Service for assistance in recovery from out of area respondents.

ADC collections for 1979 were \$162,846.14. This is an increase of \$5,313.14 over 1978.

The Non-ADC caseload was 455 in January, 1979, and ranged from a low of 448 in February to a high of 497 in December. Services available to Non-ADC clients include assistance in establishing paternity, obtaining, monitoring and enforcement of support orders.

Non-ADC collections for 1979 were \$551,252.79. This figure represents an increase of \$64,350 over 1978.

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Medical Assistance

There were 1,150 applications for Medical Assistance processed in 1979, of which 667 were accepted and 483 denied. There was a 13% decrease in open cases in the non-SSI caseload from 644 cases in December, 1978, to 559 in December, 1979, even though the number of applications registered and processed increased by 40 over the total for 1978. The highest number of persons receiving Medical Assistance of any month during 1979 was in January with 1,199 in the Medical Assistance only program and 1,785 in the Aid to Dependent Children and Home Relief programs for a total of 3,680 persons. In that same month, 696 persons determined eligible for Supplemental Security Income (SSI) by the Social Security Administration also received Medical Assistance through this Department.

Monthly averages for each program are:

	<u>Open Cases</u>	<u>Persons</u>
Medicaid (non-SSI)	550	884
SSI Medicaid	664	711
Public Assistance (ADC, HR)	522	1,586

There were 236 nursing home cases among the 559 open in December of 1979 which included 187 persons receiving skilled nursing care and 52 persons receiving care in health related facilities, or a total of 239 individuals. The average daily rate for skilled nursing care in 1979 was \$44.28, while the average per diem cost for health related facilities was \$29.02. These rates, although lower than the average reported in 1978, are constantly under review and subject to changes which could result in retroactive adjustments upwards as often happens under the present rate-setting methods.

All nursing home cases have been subject to review by our staff and state auditors to ensure that Veterans benefits have been maximized under new statutes which resulted in increases for most individuals receiving those benefits. Through these efforts, retroactive Veterans benefits in the amount of \$18,103.44 were recovered toward cost of care for nursing home patients, and monthly increases in Veterans benefits total \$2,914.61 for the twenty cases involved.

Careful attention was also given to obtaining determinations of disability for applicants between 21 and 65 years of age who had incurred or were expected to incur large medical expenses. These efforts made possible the claiming of 50% Federal reimbursement for Medicaid expenditures in the amount of \$79,689.98.

Fair hearing issues in 1979 most often involved either transfer of property and/or resources, questions of residency, or application toward medical expenses of income deemed to be available according to the Medicaid income standard.

Income exemption standards for households of one, two and three were increased in July to offset the increase in Social Security benefits and prevent loss of Medicaid coverage for those beneficiaries. However, income exemption levels for other size households have remained the same since 1975.

Some recent court decisions have had an influence on both the issue of residency and transfer of property, making it necessary to consider these issues on a case by case basis. In the closing months of the year 1979, there were indications that the court decision in the Ethel Caldwell case, having to do with transfer of property by an individual who had been in receipt of SSI, might lead to a change in the contractual agreement with the Department of Health, Education and Welfare for determination of eligibility

for Medical Assistance for those in receipt of SSI. This would mean the responsibility for determining eligibility for Medicaid would be returned to the local districts, requiring a separate application, interview, and resource investigation as is done with non-SSI Medicaid cases. This system would, however, allow enforcement of the state regulation which directs that Medicaid benefits can be denied to those who have transferred property or assets within eighteen months of application. Additional staff will be necessary to accomplish this for the six hundred to seven hundred SSI cases to be processed here in a year's time. However, according to our research into nursing home cases for the years 1976 through 1978, the value of assets which were or could have been transferred (were it not for that regulation) averaged \$1,809,969 per year. It is also estimated that 15% of the patients in nursing homes are paying privately, which would not be likely to continue should the statute prohibiting transfer of assets be abolished.

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Adult & Family Service Unit

During 1979, the Adult and Family Service Unit has provided to Title XX eligible adults those services available under the county Title XX Plan. (For a complete breakdown by service, please see the attached chart.)

The availability of additional Title XX money for 1978-1979 program year allowed the county Plan to include purchase of Homemaker, Housekeeper/Chore and Transportation services. The expansion into purchase of these supportive services gave alternatives to two groups - in particular, the elderly and the post-institutional. Some elderly who would otherwise need health related or nursing home placement were able to remain living independently. Service mandate for working with elderly, being the least restrictive environment which will meet the needs of individual, was more appropriately met because of these purchases.

The other group which benefited from these supportive services was the post-institutional clients. The purchase of homemaker-training services and transportation enhanced the possibility for these individuals to remain in the community and obtain skills necessary to live independently. The requirements of Social Service Law 621, which provides for services to post-institutional clients, were more adequately met because of the capability of purchasing these services.

Most service areas remained constant during 1979 except for increases in Employment, Health Related and Adult Protective services. Employment services continue to expand as job openings become harder to find. Continued coordination with local C.E.T.A. Office has resulted in some placements. These offices are the chief resource of referrals from our agency. Increases in requests for the health related services are a reflection of the increasing

desire of our elderly population for supportive services as an alternative to institutional placement. Growth in the Adult Protective services is not only due to increased needs of elderly but also related to the continuing return to the community of formerly institutionalized clients. It is anticipated that all these service areas will grow during the present year.

The unit's Information and Referral service, which is a service provided in addition to regular casework activity, serviced 1,514 individuals during 1978-1979 program year. This far exceeded the projected use by 900 individuals. This service is given without regard to income. Therefore, it is expected that there will be an on-going increase in its use. Presently the service is provided by a "worker of the day". This has been adequate for coverage of the service. However, if large increases continue, the unit may experience a staffing problem in this area.

ANNUAL REPORT<sup>1</sup>SERVICE DIVISION<sup>2</sup>

<u>SERVICES PROVIDED</u>	<u>ADULT</u>		<u>CHILD</u>	
	<u>No. Recip.</u>	<u>No. Hours</u>	<u>No. Recip.</u>	<u>No. Hours</u>
Adoptive Services	1	8	4	27
Education	21	132	1	1
Employment	24	164	0	0
Family Planning	12	33	0	0
Foster Care - Adults	1	13	0	0
Foster Care - Children	2	10	73	1,051
Health Related	47	621	0	0
Home Management	21	188	0	0
Homemaker	4	37	0	0
Housekeeper/Chore	0	0	0	0
Housing	14	191	0	0
Information and Referral	1,514	980	0	0
Preventive	8	210	19	123
Protective - Adults	62	1,195	1	19
Protective - Children	7	31	49	352
Social Adjustment	5	118	1	4
Transportation	9	21	0	0
Unmarried Parents	10	110	5	72
Personal Care Service	0	0	0	0
Services to Victims of Domestic Violence	0	0	0	0
Day Care - Total	1	2	0	0
Prot. Homemaker	0	0	0	0
Prot. Housekeeper/Chore	0	0	0	0
<b>TOTAL</b>	<b>1,777</b>	<b>4,064</b>	<b>153</b>	<b>1,649</b>

1. These figures are for Title XX Plan year running from October 1, 1978 - September 30, 1979.
2. These figures reflect the activities of both Child Welfare and Adult Services Units.

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Welfare Fraud

The major new emphasis during 1979 was the development of a cooperative effort by the Department of Social Services, Sheriff's Department, and the District Attorney to have welfare fraud cases heard in local courts. This effort resulted in 19 cases referred and the issue of repayment orders amounting to \$7,006.25. In addition to rapid hearing of fraud cases, this system has the advantage of setting aside criminal charges in minor cases of fraud, thereby not damaging a person's employability.

A second emphasis involved repayment to the agency of monies illegally received by recipients (no fraud involved). Repayment agreements and Confessions of Judgement resulted in \$11,600 collected in 1979.

The fraud unit is required to make a home investigation of every public assistance applicant. These investigations resulted in denial of 46 applications and an estimated annual savings of \$182,000 in public assistance payments. Further, additional savings, though not measurable, are likely realized because of constant field operations by investigators, publicity of convictions, and frequent monitoring of suspect cases.

COLLECTIONS - 1979

Confessions of Judgement:	\$ 1,045.90
Court-ordered Payments:	2,589.54
Recoveries:	4,646.20
Repayments:	<u>5,909.43</u>
	\$14,191.07

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Child Welfare Services

Our foster care caseload has remained relatively stable in numbers during 1979, varying from 42 in January, 1979, to 39 at the end of the year. During the year our caseload for supervision of children in their own homes or those of relatives varied from a high of 73 to a low of 66 on December 31st. Included in this number is one child placed by Massachusetts on private arrangement with a Madison County resident, and two children from Oswego County in a boarding home certified by that agency with our cooperation. Children in residential care decreased from ten to six.

Child Welfare Service Referrals

<u>Source</u>	<u>Number of Children</u>
Family	153
Court	61
Schools	60
Out of County Agencies	68
Public Assistance	33
Private Citizens	120
Community Agencies	88
Other Sources (e.g., hospital, doctor or police)	50
TOTAL	633

Six children were surrendered for adoption, though thirty-four unmarried mothers received counselling services. The trend continues for the single parent to rear her own child. Through Catholic Social Services we have been able to offer these young women training in pre-natal care, nutrition, crafts, child care and an opportunity for socialization and support services.

We have twenty-one certified foster family boarding homes from which to choose appropriate placements according to child's age, sex, and needs. We again held two group meetings for orientation for eighteen families who expressed an interest in the foster care program. We have certified two families who seem to

be willing to accept the challenge of teenagers, but more homes are needed, as is true in every agency, for teenage placements. We were fortunate to be able to purchase the STEP (Systematic Training for Effective Parenting) Program during the latter part of 1979 and have had our first nine-week session with a group of foster parents. We will continue these until all of our certified parents have been exposed to this training. The financial reward of \$5.00 additional board payment per month is an incentive to complete the program. The added increase in board payment (from \$150.00 to \$160.00) brings Madison County to comparable rates paid by neighboring counties.

We continued to contract with Oneida County Department of Social Services for non-secure detention services at Broadacres in Utica, New York, with 190 care days provided to twelve children. The 1979 rate was \$823.50 reserved accommodation for one bed with \$27.00 per diem rate for an extra placement if space is available. These are Court-ordered placements pending Family Court disposition. Because of several incidents of Madison County children being "bumped" from "space if available", consideration is being given to leasing two spaces on a full time basis.

Child Protective referrals continued to increase during 1979. 220 families were referred with 399 children compared to 182 families last year.

#### 1979 Child Abuse and Maltreatment Register Referrals

(First column is family; second column is number of children)

<u>Indicated</u>	<u>Unfounded</u>	<u>Transferred</u>	<u>Information Only</u>
77-133	87-169	15-28	9-12
<u>Repeat</u>	<u>Pending</u>		
26-48	6-9		

This does not necessarily mean increasing child abuse in the county, but more reporting due to community education. Our Child Protective Annual Plan was

unconditionally approved by New York State Department of Social Services for 1979 and has been extended to October 1, 1980. Prior to that date, however, a Comprehensive Plan has to be prepared for the ensuing year. Child Protective Unit added a third full-time worker in June which was greatly appreciated by both the staff and administration. We are in the process of establishing for Child Protective Services a local advisory council which will be mandated in the foreseeable future. The biggest contribution to services in that unit will be the addition of a Parent Aide Program which appears to be reality very soon through purchase of services from Health and Home Aid, Inc., of Oneida. National studies have shown that a parent aide is the single, most beneficial treatment program for the abusing parent.

MEDICAL AUDIT UNIT

Annual Report

Following reorganization of the Medical Audit Unit and refinement of responsibilities, closer scrutiny of billings and records of savings began in January. For that month, a savings amounted to over \$14,000. Before the month had finished, we were notified that the State Bureau of Fraud and Abuse was requiring these statistics on a monthly basis. From February on, we saved over \$30,000 per month (average). The year's total savings came to \$422,734.16. This is a good indicator of the quality and volume of work performed by the staff of seven audit clerks.

Additional savings of \$16,850 resulted from the monthly dental clinic. The Regional Dental Director performs second-opinion examinations during the course of the clinic.

Medical Audit went through a detailed, 12-week audit by the State Department of Audit and Quality Control, for the first time in 10 years. The result was positive with only three minor irregularities noted.

In the area of provider fraud, one physician repaid over \$2,400 for not keeping records that could substantiate the care given, and another three physicians repaid over \$400 for not providing services claimed. One optical company was suspended for six months, and another is being investigated. Several hospitals and physicians are being investigated for wrongly billing clients. Twelve on-site reviews of pharmacies were conducted resulting in action brought against one pharmacy.

In 1976, some nursing home rates were revised downward. This resulted in a class-action suit by the nursing homes. In 1979, the Court

ruled on the cases and upheld the State. As a result, we were able to seek recoupment of the monies that had been paid at the higher rates. These recoupments are now completed, and over \$10,000 has been paid back to the agency.

The drug audit clerks developed a catalogue system of recording every new prescription. This enables them to follow a prescription to its completion. This system, along with duplicate prescription copies, and the on-site reviews, has given us good internal control over the drug category. These procedures have cut down the attempted fraud, and have helped the professional relationships.

Medicaid payment to podiatrists, private duty nurses for in-hospital care, speech therapists, physical therapists, and occupational therapists was re-authorized in October. No great fiscal impact is expected as a result of this action since these provided services are very small in quantity.

The on-coming MMIS (Medicaid Management Information System) has brought about a new hospital billing form to be used statewide by insurance companies, BC/BS, Medicare and Medicaid. This is the first uniform billing to ever take place. The uniform billing system has provided more information (needed for required reports and good auditing), and has lessened the pieces of paper involved in auditing the hospitals.

The unit has been fairly stable as far as personnel changes. There were times when we were short-handed, but with the cooperation of everyone in the unit, all deadlines continued to be met. The CETA position is the one that is most difficult. During the year, three different people held this position. The job qualifications for audit clerk were updated, as well as senior audit clerk.

Medical auditing is no longer a simple function of checking correct charges. As the State makes regulation changes, the job becomes more technical and sophisticated, particularly in the pharmacy area. We not only must know Medicaid regulations, but New York State laws as well. This is especially true because of the new substitution law that became effective the middle of the year. Every prescription is audited for compliance with this law to insure proper payment.

Medical auditing is pressure filled, and deadline conscious. It is imperative that we be fair and just to all providers; provide quality, necessary care to our clients; and at the same time, protect the taxpayers' dollars.

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Staff Development and Personnel

Staff Development:

Due to a continued high turnover rate in line level positions, as well as several internal promotions, training hours devoted to orientation and initial program and policy knowledge were again the primary areas of concentration of local training. Training hours devoted to newly hired staff increased from 125 in 1978 to 177 in 1979.

During the last quarter of 1979, over 80 hours were devoted to planning and developing materials for training staff in the use of a common application form and workbook. A major thrust for both staffing and training during 1980 will be preparation for and implementation of the Statewide Welfare Management Systems (WMS) in Madison County. WMS is an on-line computer system which will establish an eligibility file, budget logics for financial assistance programs, and a variety of sub-systems to maintain statistical and planning data, and collections and auditing processes.

Three individuals were reimbursed for expenses for evening courses at Mohawk Valley Community College and Morrisville ATC, all of which were directly related to their current duties in the agency. Several staff members also completed graduate credit coursework provided under a State contract with Cornell University.

Supervisory and management level staff continued with executive, and advanced planning and management courses, again provided under State contract, at Syracuse University - Maxwell School.

Child protective and adoption service staff also received specialized training through both Cornell University and the Graduate School of Social Work

at Albany State.

The agency opted out of several course repeats from Cornell University, having found content either not directly applicable to job performance or duplicative of Syracuse University's supervisory training. As various State sponsored contracts continue, there has been an opportunity to be selective based on past experiences.

Personnel:

Traditional staffing problems were experienced in 1979. Entry level position turnover continued at over 50% in clerical, accounting and paraprofessional levels (statistic includes CETA sustaining positions). 68% of resignations are due to acceptance of more gainful employment. In addition, during the summer months, three CETA positions which were vacated due to resignation (2) or time completion (1) could not be filled until October 1, 1979. One maternity and two medical leaves also caused vacancies, and two vacancies existed in key clerical positions due to a 6-month wait for Civil Service examination results.

Three individuals were laid off because they were unreachable on Civil Service lists and one due to CETA time completion. Four individuals were demoted to positions held prior to promotions due to a domino effect created when the highest level promotion did not result in permanency.

It was also necessary to terminate two employees due to substandard job performance.

The positive side of the staff picture includes five internal promotions, and no turnover at the supervisory and management levels, other than a change of Social Service attorney, and the hiring of a supervisor for Child Support Enforcement.

In addition, the hiring of three CETA employees, under a State project, allowed for removing responsibility from the financial assistance staff for handling a variety of newly developed energy programs.

DEPARTMENT OF SOCIAL SERVICES

FISCAL

GENERAL ADMINISTRATION

Disbursements:

Personal Services	\$594,586
Equipment	6,475
Contractual Expenses	171,822
Outstanding Encumbrances	2,717
	\$775,600

Credits:

State Reimbursement	213,437
Federal Reimbursement	580,513
Refunds & Repayments	80
	794,030

NET LOCAL COST	-18,430
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	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Gross Cost	679,305	775,600	96,295	
Net Local Cost	-28,819	-18,430	10,389	

OLD AGE ASSISTANCE, AID TO BLIND, AID TO DISABLED

(SSI)

Disbursements:

None

Credits:

State Reimbursement	0
Federal Reimbursement	0
Refunds & Repayments	<u>104</u>
	\$104
NET LOCAL COSTS	-104

	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Average Monthly Caseload	661	664	3	
Average Monthly Persons	700	711	11	
Gross Cost	66,510	0		66,510
Net Local Cost	63,510	-104		63,614

AID TO DEPENDENT CHILDREN

Disbursements:

Cash Grants	\$1,558,072
Vendor Payments	<u>6,193</u>
	\$1,564,265

Credits:

State Reimbursement	359,897
Federal Reimbursement	758,705
Refunds & Repayments	<u>158,892</u>
	1,277,494
NET LOCAL COST	286,771

	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Average Monthly Caseload	423	414		9
Average Monthly Persons	1,449	1,422		27
Gross Cost	1,534,939	1,564,265	29,326	
Net Local Cost	13,603	286,771	273,168	

HOME RELIEF

Disbursements:

Cash Grants	\$182,927
Vendor Payments	<u>8,295</u>
	\$191,222

Credits:

State Reimbursement	85,175
Refunds & Repayments	<u>10,802</u>
	95,977
NET LOCAL COST	95,245

	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Average Monthly Caseload	93	84		9
Average Monthly Persons	186	148		38
Gross Cost	188,043	191,222	3,179	
Net Local Cost	65,726	95,245	29,519	

## MEDICAL ASSISTANCE

### Disbursements:

Nursing Home Care	\$2,105,562
Hospital Care	921,182
Physicians' Services	239,332
Pharmacy & Drugs	157,531
Dentists	75,639
Opticians & Optometrists	22,953
Misc. (Clinics, prosthetic devices, etc.)	<u>236,724</u>
	\$3,758,923

### Credits:

State Reimbursement	942,358
Federal Reimbursement	1,743,824
Refunds & Repayments	<u>96,609</u>
	2,782,791

NET LOCAL COST	976,132
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	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Average Monthly Caseload	680	550		130
Average Monthly Persons	1,168	884		284
Gross Cost	3,349,182	3,758,923	409,741	
Net Local Cost	1,064,515	976,132		88,383

PURCHASE OF SERVICES

Disbursements: \$ 8,619

Credits:

State Reimbursement	\$ 1,813
Federal Reimbursement	10,031
Refunds & Repayments	0
	11,844

NET LOCAL COST -3,225

	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Gross Cost	165	8,619	8,454	
Net Local Cost	-8,278	-3,225	5,053	

CHILD WELFARE

(Foster Care)

Disbursements:

Boarding Homes	\$ 94,535
Private Institutions	<u>123,231</u>
	\$217,766

Credits:

State Reimbursement	38,933
Refunds & Repayments	<u>21,401</u>
	60,334
NET LOCAL COST	157,432

	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Average Monthly Caseload	54	50		4
Gross Cost	227,198	217,766		9,432
Net Local Cost	294,931	157,432		137,499

BURIALS

Disbursements:

Cash Payments to Funeral Directors \$20,490

Credits:

State Reimbursement	1,938
Refunds & Repayments	<u>2,129</u>
	4,067

NET LOCAL COST 16,423

	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Number of Burials	18	23	5	
Gross Cost	12,366	20,490	8,124	
Net Local Cost	9,050	16,423	7,373	

JUVENILE DELINQUENTS

Disbursements:

Vendor Payments	\$64,836
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Credits:

State Reimbursement	39,098
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NET LOCAL COST	25,738
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	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Gross Cost	35,032	64,836	29,804	
Net Local Cost	26,562	25,738		824

EMERGENCY AID TO ADULTS

Disbursements:

Cash Grants	\$686
Vendor Payments	<u>511</u>
	\$1,197

Credits:

State Reimbursement	1,026
Refunds & Repayments	<u>0</u>
	1,026

NET LOCAL COST	171
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	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Gross Cost	1,097	1,197	100	
Net Local Cost	440	171		269

TITLE IV-D PROGRAM

Disbursements:

None

Credits:

Incentives	\$22,576
Fees	0
	<u>\$22,576</u>

NET LOCAL REVENUE	22,576
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	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Net Local Revenue	26,992	22,576		4,416

STATISTICAL SUMMARY

Disbursements:

General Administration	\$ 775,600
Assistance to Aged, Blind and Disabled	0
Aid to Dependent Children	1,564,265
Home Relief	191,222
Medical Assistance	3,758,923
Purchase of Services	8,619
Child Welfare (Foster Care)	217,766
Burials	20,490
Juvenile Delinquents	64,836
Emergency Aid to Adults	1,197
Title IV-D Program	0
	<u>\$6,602,918</u>

Credits:

General Administration	794,030
Assistance to Aged, Blind, and Disabled	104
Aid to Dependent Children	1,277,494
Home Relief	95,977
Medical Assistance	2,782,791
Purchase of Services	11,844
Child Welfare (Foster Care)	60,334
Burials	4,067
Juvenile Delinquents	39,098
Emergency Aid to Adults	1,026
Title IV-D Program	22,576
	<u>5,089,341</u>

NET LOCAL COST	1,513,577
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	<u>1978</u>	<u>1979</u>	<u>Increase</u>	<u>Decrease</u>
Gross Cost	6,093,837	6,602,918	509,081	
Net Local Cost	1,474,248	1,513,577	39,329	