STATE OF CALIFORNIA—HEALTH AND WELFARE AGENCY

PETE WILSON, *Governor*

DEPARTMENT OF HEALTH SERVICES
714/744 P STREET
P.O. BOX 942732
SACRAMENTO, CA 94234-7320

March 22, 1991

TO: All County Welfare Directors
All County Administrative Officers

Letter No.: 91-07

SUBJECT: SNEEDE V. KIZER COST BENEFIT ANALYSIS/IMPLEMENTATION PLAN (CBA/IP)

The purpose of this letter is to transmit the worksheets necessary for counties to complete the CBA/IP for Sneede v. Kizer system changes. Counties should use these worksheets to identify costs which will be incurred to modify county welfare automated systems to comply with the requirements of the Sneede v. Kizer lawsuit. The worksheets cover development and implementation costs, and the costs of preparing the CBA/IP.

Requests for additional equipment as a result of the Sneede lawsuit should be sent through the established equipment request procedures.

Completed CBA/IP worksheets should be submitted by April 8, 1991 to:

State Department of Social Services
County Approvals Section
744 P Street, Mail Station 19-12
Sacramento, CA 95814

Although CBA/IP's will be reviewed by County Approvals Section staff upon receipt, no approvals will be made until all necessary federal approvals have been secured by the state. The CBA/IP's are being sent to counties in advance of federal approval so that when the anticipated approvals are received, the state can notify counties immediately and work can begin as soon as possible. Counties have been instructed to implement Sneede using procedures until funds are available to make system modifications to the automated process.

Please direct any questions regarding the completions of the enclosed CBA/IP worksheets to your County Approvals Section analyst at (916) 323-4305.

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Enclosures

cc: All County Medi-Cal Liaisons
All County Program Consultants

SECTION I
SNEEDE V. KIZER
ONE-TIME DEVELOPMENT/IMPLEMENTATION COSTS

A. EDP STAFF RESOURCES

1. VENDOR/OUTSIDE CONSULTANT FEE

Name of Consultant _____

_____ hours x $_____ /hour Subtotal A-1 $_____

2. DATA PROCESSING COSTS FOR DEVELOPMENT AND IMPLEMENTATION

County Analysis Personnel

Class	Cost/Hr	Total Hrs	Total $

Subtotal $_____

County Programming Personnel

Class	Cost/Hr	Total Hrs	Total $

Subtotal $_____

County EDP Operations Personnel

Class	Cost/Hr	Total Hrs	Total $

Subtotal $_____

Other County Personnel (identify)

Class	Cost/Hr	Total Hrs	Total $

Subtotal $_____

Subtotal A-2 $_____

Subtotal A (A-1 + A-2) $_____*

SECTION I (Con't)
SNEEDE V. KIZER
ONE-TIME DEVELOPMENT/IMPLEMENTATION COSTS

B. SUPPLIES (One time only)

1. _____ $_____

2. _____ $_____

3. _____ $_____

Subtotal - B $_____*

C. IMPLEMENTATION OPERATING COSTS

1. CPU Time _____ _____ $_____
2. Printing _____ _____ $_____
3. Other _____ _____ $_____

Subtotal - C $_____*

D. OTHER COSTS (identify)

1. _____ $_____

2. _____ $_____

3. _____ $_____

Subtotal - D $_____*

SNEEDE V. KIZER
SUMMARY OF
ONE-TIME DEVELOPMENT/IMPLEMENTATION COSTS

Bring * figures forward from Section I

A. EDP STAFF RESOURCES	$_____
B. SUPPLIES	_____
C. IMPLEMENTATION OPERATING COSTS	_____
D. OTHER COSTS	_____
TOTAL COSTS (Items A - D)	$_____

SECTION II
SNEEDE V. KIZER
COST BENEFIT ANALYSIS/IMPLEMENTATION PLAN DOCUMENT PREPARATION
STATEMENT OF ESTIMATED COSTS

County _____ Date _____

Person responsible for preparation of the Cost Statement

Name _____

Title _____

Address _____

_____

Telephone (____) _____

Total Estimated Cost for Completing CBA/IP

Staff Resources

Classification	Welfare/ EDP	No. of Hours	Hourly Rate	Cost
_____	_____	_____	$_____	$_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
			Subtotal	$_____

Other Costs (detail)

Type	Comments	Cost
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____
	Subtotal	$_____
	TOTAL COSTS	$_____