Received by HRD 10/29/2020 Ceralde

Outside Budget Cycle Augmentations/Reallocations Request to Classify Form FY 2020-2021



Instructions: Please submit the Request to Classify Form for each new position or reallocation of an existing position to Channelle Ceralde and Irene Espinoza, in the Human Resources Department (HRD). HRD will notify you regarding the status of your request or if additional information is necessary. Please attach a copy of the current and proposed organizational chart depicting the proposed position. Both organizational charts must reflect current FTE's (filled and vacant).

Department/Division:	Department of Social Services/Community Benefits				
Budget Unit Number:	5010/8262				
Department Contact for	r Information:	Name:	Rose De Franco		
		Phone:	755-4403		
Select Corresponding Position Star Position Status Maintenar New Allocation			atus Maintenance Code (PSTS) for ince Transaction (PSMT): Leave Unfilled		
☐ Reallocation, Filled Position			[Insert Current Classification Title]		
⊠ Reallocation, Vacant Position			Office Assistant II Four (4) Position Numbers: 80E21-0013, 80E21-0026, 80E21-0034, 80E21-0046		

Estimated % of total time spent on task/duty	Use a separate paragraph for each task or duty. Attach additional sheets as necessary. Do not include verbiage directly from the class specification. (Please note rows will expand to allow for thorough description of task/duty)
85%	Determine initial and continuing eligibility for; CalFresh, CalWORKs, Medi-Cal (including Affordable Care Act (ACA)), Foster-Care, and General Assistance. Decipher complex State, Federal, and Local policies and regulations pertaining to eligibility and services available. Utilize interviewing techniques to ensure all eligibility information is obtained via in person interviews, telephone interviews, various versions of online applications and communications for services.
10%	Perform required recertifications of all ongoing cases, determining continued eligibility, accuracy of reported information, accuracy of case actions taken and benefits issued.

JUSTIFICATION FOR REQUEST: Describe what changes have occurred (i.e., new legislative mandates, departmental reorganization, new services, new equipment, etc.) that necessitate the need for an additional position. Explain why duties cannot be absorbed by another existing position. Describe consequences or ramifications if the position is not approved. [Please note field(s) will expand to allow space for justification]

Community Benefits (CB) Branch continues to serve over one hundred thousand families within Monterey County. The CB Branch provides essential services to meet the basic needs of our community. The Department has experienced an increase in workload as well as impacts in our ability to meet the needs of the pandemic. New operating processes, increased need to provide remote services and a continued overall need to meet branch workload demands continues to impact service. Continued efforts to staff eligibility based on workload standards, and the need to me Federal and State processing deadlines, along with accuracy is a top priority.

The duties performed by an Eligibility Specialist cannot be absorbed by another classification or existing eligibility staff.

The Department has sufficient funding to support this request to reclassify existing vacant Office Assistant II positions.

If this request is not approved the impacts to meeting the essential needs of Monterey County residents will be impacted. Due to Federal, State, and Local, regulations specifically the requirement to issue timely and accurate benefits based on strict deadlines while adhering to all processing timeframes for four (5) different programs (CalWORKs, CalFresh, Medi-Cal (including ACA), General Assistance, and Foster Care) will be severally impacted. In addition to the known population that CB serves there has been a significant increase in workload demands due to the pandemic and the expanded need for benefits for Monterey County residents.

Were the new duties previously performed by another position(s)?

5%

x No Yes (If yes, what is/are the job title(s) of the other position(s)?)
Current eligibility staff perform these duties, however adding additional staff will enable us to meet required deadlines ensuring accurate and timely benefits are issued.

Is there any other position(s) within the department performing in a similar capacity assigned comparable duties to this position?

x No Yes (If yes, what is/are the job title(s) of the other position(s)?)

Please describe what efforts the Department has made to reapportion duties to existing positions/staff.

Staff continue to work overtime to try and meet the required deadlines.

Department Head Name Department Head Signat Comments:		Date
Departmental HR Analy	st Name: Glovia Caugzos	
Departmental HR Analy	st Signature:	Date: 10/29/2020
Class Recommendation:	Eligibility Specialist II (Four (4) positions)	Class Code: 25E21
FOR HRD USE ONLY:	(Pour CT) positions)	
Approved Class Title:	Eligibility Specialist II Clas	s Code: 25E21
HRD Classification Analyst:	Channelle Ceralde Associate Personnel Analyst Channelle Ceralde	Date: 11/9/2020 3:51 PM PS
Distribution of HRD Jo		
☐ CAO Budget Analyst ☐ Departmental HR An		Admin. Secretary)

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	Maggie Oroco-Vega Program Manager III CasSAWS Project	

Rose Defranco Deputy Director

Vacant Senior Secretary

COMMUNITY BENEFITS BRANCH
CURRENT - 4 OAIFS