

# Bulletin

February 19, 2008

Minnesota Department of Human Services □ P.O. Box 64941 □ St. Paul, MN 55164-0941

**OF INTEREST TO**

- County Directors
- SSTS Coordinators
- Social Services Supervisors
- Fiscal Supervisors

**ACTION/DUE DATE**

Replaces bulletin  
#07-32-14 dated 7/27/07  
and is effective 4/1/08.

**EXPIRATION DATE**

February 19, 2010

## DHS Revises Social Service Time Study (SSTS) for Title IV-E Administration

**TOPIC**

New SSTS activity codes and definitions for staff who work with children.

**PURPOSE**

Comply with changes per federal interim final rule on Medicaid coverage of targeted case management .

**CONTACT**

Questions related to the SSTS activity codes can be directed to Joan Manske at (651) 431-3800 or [joan.manske@state.mn.us](mailto:joan.manske@state.mn.us)

Questions related to Foster Care Candidacy Determinations can be directed to Fran Felix at (651) 431-4386 or [fran.felix@state.mn.us](mailto:fran.felix@state.mn.us)

**SIGNED**

---

CHRISTINE BRONSON  
Deputy Commissioner  
Department of Human Services

## **BACKGROUND**

The Social Services Time Study (SSTS) is revised periodically to implement new rules and regulations, add new programs or expand on existing codes and definitions. It is the federally approved mechanism for reimbursing county agencies for certain social service costs and has been the basis for targeted case management rate setting. The SSTS is designed to assure the proper distribution of county social service costs among the various federal funding sources, which support social service programs in Minnesota.

Each SSTS participant is required to characterize his or her activity for the moment being recorded according to the service activity definitions defined by the SSTS.

This revision to the SSTS is Phase 1 of a two-step approach incorporating changes prompted by the federal Centers for Medicare & Medicaid Services' (CMS) issuance of an interim final rule on targeted case management. Phase 1 eliminates the child welfare-targeted case management (CW-TCM) activities from the SSTS. New activity codes and definitions have been designed and added to the time study to account for this change.

## **LEGAL REFERENCES**

Public Law 103-432

Public Law 105-89

Laws of 2007, Chapter 147, HHS Omnibus Bill, Article 19, Section 3, Subd. 4 (1).

United States Code, Title 42, 1396 et seq., as amended

Minnesota Statutes, section 256B.4

Minnesota Statutes, section 256B.0625, subdivision 43

Minnesota Statutes, section 256.01

Minnesota Statutes, section 259.67

Minnesota Statutes, section 256B.0924

Minnesota Statutes, section 256B.094

Minnesota Statutes, section 245.462

The Comprehensive Mental Health Acts, Minnesota Statutes, sections 245.4711 and 245.4881

Minnesota Rules, parts 9520.0900 – 9520.0926

Minnesota Rules, parts 9530.6600 – 9530.6660

## **ACTION REQUIRED**

### **Training**

#### **A. “Train the Trainer” training mandated for all SSTS Coordinators**

SSTS coordinators must register and attend one of the upcoming training sessions scheduled for February and March 2008. Coordinators must complete and submit a training verification form for attendance at one of these training sessions.

#### **B. Activity Code Training mandated for all SSTS participants who work with children**

SSTS coordinators are responsible for providing activity code training for all participating staff who works with children. Training must be completed before April 1, 2008. Training verification forms (SSTS-0702) must be provided to the Department of Human Services (DHS) for all staff that completes the training.

#### **C. Activity Code Training for all SSTS Participants**

SSTS coordinators are responsible for providing SSTS activity code training for all county social services staff and contracted State Operated Services (SOS) staff that provides Rule 79 (Minnesota Rules, parts 9520.0900 - 9520.0926) Case Management services to county clients. This training must be completed and the training verification form (SSTS-0702) submitted to DHS before staff can begin participating in the SSTS. Training documentation must reach DHS by the first day of the month prior to the beginning of a quarter to ensure that staff appears on the random moment log sheets for the upcoming quarter.

#### **D. Ongoing Activity Code Training**

DHS recommends that SSTS coordinators develop periodic refresher training sessions for existing SSTS participants. This ongoing availability of training will ensure that all staff is well acquainted with the SSTS activity categories, codes, definitions and procedures.

## **SSTS Categories, Codes, Definitions**

#### **A. Categories**

The SSTS random moment log is divided into the following five categories:

- Category A – Determination and Eligibility Activity
- Category B – Assessments, Case Management and Service Coordination
- Category C – Treatment or Therapy
- Category D – Training
- Category E – Other

This categorized approach directs the SSTS participant to choose a category of activity and then a code number within the category. Attachment B provides a list of the categories and code detail within each category.

B. Codes

SSTS activity codes related to child welfare activities have been re-categorized to satisfy implementation of the federal Deficit Reduction Act of 2005 requirements.

Category A – Determination and Eligibility Activity has been expanded to include:

⇒ Code 10 Determination of Foster Care Candidacy

Three additional codes have been added to Category B for child welfare activity:

⇒ Code 20 Initial Intake and Investigation of Reports of Abuse and/or Neglect

⇒ Code 37 Service Coordination and Court Related Activity – child is a Foster Care Candidate

⇒ Code 38 Service Coordination and Court Related Activity – child is in Foster Care Placement

C. Activities

Activities have been redefined and expanded for the child welfare codes listed above. In addition, the activities that fall into codes 62 and 68 have been updated. Activity detail can be found in Attachment B.

## **SSTS Random Moment Log Sheet (SSTS-0804)**

The SSTS random moment log sheet has been revised to accommodate the additional and expanded codes. Participants must select the category and then the applicable SSTS code number that best represents what they are doing at the time of the random moment. After determining the code number, the participant must record the code number on any line in the Response Section of the random moment log sheet.

The SSTS Random Moment Log Sheet is used for recording employee's activities. At the time of the random moment the recorder is responsible for ensuring that each employee's chosen code is recorded accurately on the log sheet and then verified by the employee.

After all responses have been recorded, the SSTS recorder must sign the log sheet and mail it to DHS at the address indicated on the bottom of the log sheet. All log sheets must be returned within seven (7) **calendar** days of the random moment.

## **SPECIAL NEEDS**

This information is available in other forms to people with disabilities by contacting us at (651) 431-3735 (voice), or through the Minnesota Relay Services at 1-800-627-3539 (TDD), 7-1-1 or 1-877-627-3848 (speech to speech relay service).

**SSTS Categories and Codes***Effective April 1, 2008***Category A****Determination and Eligibility Activity**

<b>DHS Code No.</b>	<b>Code Description</b>
10	Determination of Foster Care Candidacy
11	Title IV-E Eligibility
12	SSI Eligibility for Children
13	MA Eligibility
14	MA Service Eligibility

**Category B****Assessments, Case Management and Service Coordination**

<b>DHS Code No.</b>	<b>Code Description</b>
20	Initial Intake and Investigation of Reports of Abuse and/or Neglect
21	DD Screenings for MA Eligible Clients
22	Rule 25 Assessments for MA Eligible Clients
23	Health and Medical Case Management Services for MA Eligible Adults
32	Mental Health Case Management for SED Children
33	Mental Health Case Management for SPMI Adults
34	Vulnerable Adult Case Management - Non Waiver
35	DD Adult Case Management - Non Waiver
37	Service Coordination and Court Related Activity - child FC Candidate
38	Service Coordination and Court Related Activity - child FC Placement

**Category C****Treatment and Therapy**

<b>DHS Code No.</b>	<b>Code Description</b>
41	Treatment or Therapy for Children and Adults

**Category D****Training**

<b>DHS Code No.</b>	<b>Code Description</b>
51	Child Welfare/Child Protection Training for County Staff
52	Program Service Training for County Staff
53	General Training for County Staff
54	Training Foster and Adoptive Parents or Foster Care Providers

**Category E****Other**

<b>DHS Code No.</b>	<b>Code Description</b>
61	Other Health and Medical
62	Other Child Welfare/Child Protection
68	Other Social Services and Third Party Billings
69	General Administration

**SOCIAL SERVICES TIME STUDY**  
**Categories and Code Descriptions**  
*Effective April 1, 2008*

**Category A. Determination and Eligibility Activity**

Use the codes in this category when you are performing activities that contribute to or support the determination of a client's eligibility for Title IV-E or Medical Assistance funding.

Examples of such activities include collecting and verifying information, completing and processing of forms, querying systems and records, and compiling documentation to determine or maintain eligibility and continuing reimbursement.

Paper work and travel associated with the activities.

**Determination of Foster Care Candidacy – Code 10**

Choose this code when performing any activity that contributes to or supports the determination or redetermination that a child is a Foster Care Candidate.

**Title IV-E Eligibility – Code 11**

Choose this code when performing any activity that contributes to or supports the eligibility determination or redetermination of a child under age 18 for Title IV-E funding.

**SSI Eligibility for Children – Code 12**

Select this code when performing activities that contribute to or support the determination or redetermination of whether or not a child under age 18 is eligible for SSI.

**MA Eligibility – Code 13**

Choose this code when performing activities that contribute to or support the determination or redetermination of whether or not a client is eligible for MA.

### **MA Service Eligibility – Code 14**

Choose this code when engaged in activities that contribute to or support the determination of whether a client is eligible for MA services. This includes services such as:

- Initial determination of eligibility for targeted case management
- Waivered services
- Adult rehabilitative mental health services (ARMHS)
- Mental health services other than Rule 79

## **Category B. Assessments, Case Management and Service Coordination**

Use these codes for:

- Assessment activities such as periodic and ongoing assessments, needs identification and screenings for a client to determine the need of, and eligibility for, specific services.
- Developing and monitoring case plans. Evaluating services to assess the need for continued service, to ensure that the client's needs are being met, and to monitor the quality and effectiveness of services identified in the service plan.
- Case management and service coordination activities that coordinate and link social and other services designed to help persons gain access to needed protective services, social, health care, mental health, habilitative, educational, vocational, legal or other related services. Some examples of these types of service activities include:
  - Activities necessary to maintain contact with client, family, substitute care providers, social service contacts or other relevant persons regarding the status of the client.
  - Arranging access to necessary services and supports identified in the service plan.
  - Participating in referral and coordination activities such as client specific case meetings, administrative reviews, information conferences and other meetings with professionals, family members or relevant others. Coordinating with other entities such as care facilities, institutions, organizations, and agencies to obtain needed services for clients and families as specified in the case plan.
  - Providing food support outreach to assist the families of clients receiving services to become eligible for, and obtain, food supports. This would include providing them with nutrition information, information on the food support program, referral to the food support program, and coordination and follow up activities with county food support staff.



- Client specific planning, record keeping and documentation that contributes to the above activities and travel associated with the activities.

### **Initial Intake and Investigation of Reports of Abuse and/or Neglect – Code 20**

Choose this code when involved in an initial intake and investigation of child maltreatment. The activity begins with a notification of abuse and/or neglect of a child and ends with the decision to either close the investigation, or to open a case to assess the needs of the child.

### **DD Screenings for MA Eligible Clients – Code 21**

Choose this code when involved in Developmental Disabilities screenings for MA eligible clients.

### **Rule 25 Assessment for MA Eligible Clients – Code 22**

Use this code for an MA eligible child or adult when determining the need for chemical abuse/dependency treatment, in accordance with Rule 25 (Minnesota Rules, parts 9530.6600-9530.6655).

### **Health/Medical Case Management Services for an MA Eligible Adult – Code 23**

Use this code when engaged in coordination activities in category B for ***MA eligible*** adults 18 and over *who are not eligible or not yet eligible for mental health services (SPMI), DD services, MA waiver services, or services for vulnerable adults* and when the activities are those designed to help clients attain and maintain a favorable condition of health (mental or physical) by assisting them in identifying and understanding their health needs and securing and monitoring necessary treatment and services, **that are MA reimbursable.**

### **Mental Health Case Management for Severe Emotional Disturbance (SED) Children – Code 32**

Use this code when performing assessment, mental health case management or service coordination activities covered under Rule 79 for SED children under age 18.

This code should not be used for mental health case management services rendered to a person residing in an MA funded institution (hospital, ICF/MR, nursing facility) unless you are assisting the person in transition/discharge from the institution to the community.

**Mental Health Case Management for Serious and Persistent Mental Illness (SPMI) Adults – Code 33**

Select this code when performing assessment, mental health case management or service coordination activities covered under Rule 79 for SPMI adults age 18 and over.

This code should not be used for mental health case management services rendered to a person residing in an MA funded institution (hospital, ICF/MR, nursing facility) unless you are assisting the person in transition/discharge from the institution to the community.

**Vulnerable Adult Case Management - Non Waiver – Code 34**

Choose this code when engaged in the activities in Category B and the client is a vulnerable adult in need of adult protection, is age 18 or over, is in need of service coordination and is not receiving MA waived services.

This code should not be used for vulnerable adult case management services rendered to persons residing in an MA funded institution (Hospital, ICF/MR, Nursing Facility) unless you are assisting the person in transition/discharge from the institution to the community.

**DD Adult Case Management - Non Waiver – Code 35**

Use this code when engaged in the case management activities in Category B and the client is an adult with mental retardation or related condition (**21 years of age or older**), is not receiving Home and Community Based waived services, and is in need of service coordination to attain or maintain living in the least restrictive environment.

This code should not be used for case management services rendered to persons residing in an MA funded institution (hospital, ICF/MR, nursing facility) unless you are assisting the person in transition/discharge from the institution to the community.

**Service Coordination and Court Related Activity - Child is a Foster Care Candidate – Code 37**

Select this code when you are working with a child who is not currently in foster care placement but who has been determined to be a candidate for foster care placement.

Choose this code if you are coordinating the services which will help the situation that caused this child to be identified as a foster care candidate (this does not include providing the actual service itself). Some examples include:

- Participating in discussions regarding services available to a child or their family to correct the situation that may result in a foster care placement;
- Coordinating with agencies on services available to help the family to improve the home situation and lessen the possibility that the child would have to be removed from the home;
- Assisting a child's family to obtain needed services to remedy the situation that may result in a foster care placement;
- Participating in a child protection risk assessment;
- Development of a case plan, conducting a case assessment or case review.

Also choose this code when involved in court-related activity not related to placement for a foster care candidate. Some examples include:

- Developing/filing a CHIPS petition requesting services;
- Preparation of reports to the court;
- Participation in court proceedings;
- Testifying in court regarding family and/or services.

**Service Coordination or Court Related Activity - Children Entering Foster Care or Currently in Placement – Code 38**

Choose this code when the worker is involved in court related activities such as:

- Assisting with any activities to support a petition for the removal of a child from their home;
- Providing information for a CHIPS (Children in need of Protective Services) petition for the removal of a child from their home;
- Seeking court approval for voluntary placement;
- Preparation for or participation in any court related activities on behalf of a child under age 18 receiving child welfare services;
- Custody studies, activities necessary to prepare a petition or support a petition to seek custody of a child;
- Preparation for or participation in any judicial determination or review (acceptable activities are limited to preparation of reports to the court and participation in court proceedings by the Child Welfare Department);
- Providing expert testimony; and,
- Participation in permanency hearings.

Also choose this code if you are coordinating activities and/or services—for a child entering foster care or currently in placement—that will help the situation that caused the child to be placed in foster care. This does not include providing the actual service itself. Some examples include:

- Arranging for the placement of a child;
- Development of a case plan, conducting a case assessment or case review;

- Permanency Planning;
- Case management activities to ensure that a child's service needs are met in the pre-adoptive home;
- Contacting, monitoring or communicating with a child, family members, substitute care providers or other relevant persons regarding the provision of services for the child and assessing and evaluating the effectiveness of services that were put in place to resolve the situation;
- Trial home visits – services and supports provided to children who are on a trial home visit within the first sixty days of placement are considered reasonable efforts to prevent their return to foster care;
- Contacting the appropriate staff if you suspect maltreatment has occurred for a child that is currently in foster care;
- Participating in meetings to assist a child's re-entry back into the community following out-of-home placement;
- Adoption meetings and consultation;
- Preparation of required documents related to an adoption, including adoption assistance applications/agreements.

Note: if you cannot find your specific activity in any of the codes in Category B, you should select Code 68, Other Social Services and Third Party Billings.

## **Category C. Treatment or Therapy – Code 41**

Use this code when providing face to face treatment or therapy services to a client, the client's family or to the client's substitute care provider in order to ameliorate or remedy personal problems, behaviors or home conditions specifically identified in the case plan. . Examples include providing services such as rehabilitative mental health services, chemical dependency out-patient services, and in-home therapy.

Include client specific paperwork and travel associated with the above activities.

## **Category D. Training**

### **Child Welfare/Child Protection Training for County Staff – Code 51**

Choose this code when you are being trained on issues that fall within the general definition of child welfare. This would generally include training that concerns the capacity to provide services, or provide access to services, needed to meet the physical, mental, and education needs of children ***under age 18***. This would include children's mental health but exclude training on child protection investigations.

Also choose this code if you are engaged in activities to prepare for and provide child welfare training to other volunteers or individuals preparing for employment with the county.

Travel and paperwork associated with the above activities should also be included in this code.

#### **Program Service Training for County Staff – Code 52**

Select this code when you are being trained or are preparing for, or providing training on, issues related to the delivery of services to clients outside the general definition of child welfare as defined above in Code 51.

Travel and paperwork associated with the above activities.

#### **General Training for County Staff – Code 53**

Choose this code for any other training attended by, or provided by, you. Examples include computer software training, diversity training or any other non-program related training.

Travel and paperwork associated with these activities.

#### **Training Foster or Adoptive Parents or Provider Staff – Code 54**

Activities by staff to prepare for and provide training for: current or prospective foster, or adoptive parents (including relatives); staff of residential facilities when that facility is providing care to adoptive children or children in substitute care; and staff of group homes or shelters which are licensed as Title IV-E eligible by the state or approved by a tribal government.

Travel and paperwork associated with these activities.

### **Category E. Other**

#### **Other Health and Medical – Code 61**

Choose this code when engaged in MA outreach activities. Outreach activities are those efforts directed at seeking out persons or groups who may be eligible for MA, encouraging them to apply for MA, providing them the materials or information on how to apply, and informing them of the MA services that may be available to them. It also includes efforts to inform current MA eligible persons of other MA services available to them and to persuade current recipients to access other MA services. This includes individual and group activities as well as the preparation and distribution of brochures or other promotional material.

Also select this code when you are assisting in determining the organizational capacity of an entity to be a certified provider of MA rehabilitative option services.

Travel and paperwork associated with these activities.

### **Child Welfare/Child Protection Administration – Code 62**

This code should be used when the worker is engaged in child welfare activity not related to a specific child. Child welfare activities are activities that ensure the safety and well being of a child. Some activities would include:

- Recruitment and retention of individuals as foster care providers or adoptive parents;
- Licensing of foster care homes and other substitute care facilities;
- Background checks of foster care families;
- Participating in discussions or planning meetings that relate to the welfare of children and the factors that put them at risk of being removed from the home.

Travel and paperwork associated with these activities.

### **Other Social Services and Third Party Billings – Code 68**

This code should be used when you are delivering services to clients and your activity does not fit into any other category. Some examples include:

- Assessment, case management or service coordination activities that are not listed in Category B;
- General information and referral;
- Semi-Independent Living Services (SILS);
- Child Care;
- Mental health activities for clients who are not SED, SPMI or MA eligible;

Also choose this code when you are engaged in activities which will be billed to a third party such as insurance companies, the Medicaid Program, programs of another state or county agency or activity financed by a direct federal grant. Some examples include:

- Long Term Care Consultation Assessments (formerly PAS) LTCC;
- HCBS Waiver Case Management (Developmental Disabilities, EW, CADI, CAC, TBI);
- Chemical Dependency Case Management;
- Targeted Case Management.

Include travel and paperwork associated with the above activities.

**General Administration – Code 69**

- Choose this code if you are on break, at lunch, or not at work. This includes vacation, illness, holiday, snow day or any other type of leave.
- Select this code when engaged in service delivery activities unrelated to a specific CASE or CLIENT. Some examples are unit or division program planning and coordination efforts with other county divisions, state offices and agencies.
- Also select this code when performing activities necessary to fulfill job responsibilities outside delivery of services to clients. Some examples include time reporting, reading e-mail, listening to voice mail messages, organizing your tasks, and attending non-client related staff gatherings such as birthday and retirement parties.

**SAMPLE LOG SHEET***Effective April 1, 2008***SOCIAL SERVICE TIME STUDY (SSTS)  
Random Moment Log Sheet**County  
Cluster  
Control #

Random Moment Time:

**Category A  
Determination and Eligibility Activity**

DHS Code #	Code Description
10	Determination of Foster Care Candidacy
11	Title IV-E Eligibility
12	SSI Eligibility for Children
13	MA Eligibility
14	MA Service Eligibility

Each employee must initial next to their name to verify that the proper code has been recorded, unless the response is obtained through means other than direct contact. In that case the recorder must put their own initials next to the employee's name and place an asterisk next to it. In addition, the employee must complete and initial follow-up form and send to recorder.

**Category B****Assessments, Case Management and Service Coordination**

DHS Code #	Code Description
20	Initial Intake and Investigation of Reports of Abuse and/or Neglect
21	DD Screenings for MA Eligible Clients
22	Rule 25 Assessments for MA Eligible Clients
23	Health & Medical Case Mgmt Services for MA Eligible Adults
32	Mental Health Case Management for SED Children
33	Mental Health Case Management for SPMI Adults
34	Vulnerable Adult Case Management - Non Waiver
35	DD Adult Case Management - Non Waiver
37	Service Coordination and Court Related Activity - child FC Candidate
38	Service Coordination and Court Related Activity - child FC Placement

1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____
11	_____
12	_____

Record DHS code number on any available line:

1	_____	7	_____
2	_____	8	_____
3	_____	9	_____
4	_____	10	_____
5	_____	11	_____
6	_____	12	_____

**Category C  
Treatment and Therapy**

DHS Code #	Code Description
41	Treatment or Therapy for Children and Adults

**Category D  
Training**

DHS Code #	Code Description
51	Child Welfare/Child Protection Training for County Staff
52	Program Service Training for County Staff
53	General Training for County Staff
54	Training for Foster/Adoptive Parents or Foster Care Providers

**Category E  
Other**

DHS Code #	Code Description
61	Other Health and Medical
62	Other Child Welfare/Child Protections & Court Related Activity
68	Other Social Services and Third Party Billings
69	General Administration

Recorders Signature \_\_\_\_\_

Is the Recorder New? Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes, attach Training Verification Form SSTS-0702)

**Return this form within seven days to:**

SSTS Project Manager  
Minnesota Department of Human Services  
Financial Operations Division  
P.O. Box 64940  
St. Paul, MN 55164-0940



Effective April 1, 2008

# SOCIAL SERVICE TIME STUDY (SSTS)

## Random Moment Follow-up Sheet

### Category A Eligibility Activity

**DHS Code # Code Description**

- 10 Determination of Foster Care Candidacy
- 11 Title IV-E Eligibility
- 12 SSI Eligibility for Children
- 13 MA Eligibility
- 14 MA Service Eligibility

**A. To be completed by Recorder:**

Recorder's Name \_\_\_\_\_

Employee's Name \_\_\_\_\_

### Category B Assessments, Case Management and Service Coordination

**DHS Code # Code Description**

- 20 Initial Intake and Investigation of Reports of abuse and/or Neglect
- 21 DD Screenings for MA Eligible Clients
- 22 Rule 25 Assessments for MA Eligible Clients
- 23 Health/Medical Case Mgmt Services-MA Eligible Adults
- 32 Mental Health Case Management for SED Children
- 33 Mental Health Case Management for SPMI Adults
- 34 Vulnerable Adult Case Management - Non Waiver
- 35 DD Adult Case Management - Non Waiver
- 37 Service Coordination & Court Related Activity - Child FC Candidate
- 38 Service Coordination & Court Related Activity - Child FC Placement

Moment to be recorded:

DAY: \_\_\_\_\_

DATE: \_\_\_\_\_

TIME: \_\_\_\_\_

### Category C Treatment and Therapy

**DHS Code # Code Description**

- 41 Treatment or Therapy for Children and Adults

**B. To be completed by SSTS Participant:**

DHS Code Number: \_\_\_\_\_

Employee's initials: \_\_\_\_\_

### Category D Training

**DHS Code # Code Description**

- 51 Child Welfare/Child Protection Training for County Staff
- 52 Program Service Training for County Staff
- 53 General Training for County Staff
- 54 Training for Foster/Adoptive Parents or Foster Care Providers

**C. The employee should return this form to the recorder indicated in Section A.**

### Category E Other

**DHS Code # Code Description**

- 61 Other Health and Medical
- 62 Other Child Welfare/Child Protection & Court Related Activity
- 68 Child Protection Investigation, Other Social Services and Third Party Billings
- 69 General Administration

**D. Retain this form at the county for four years.**