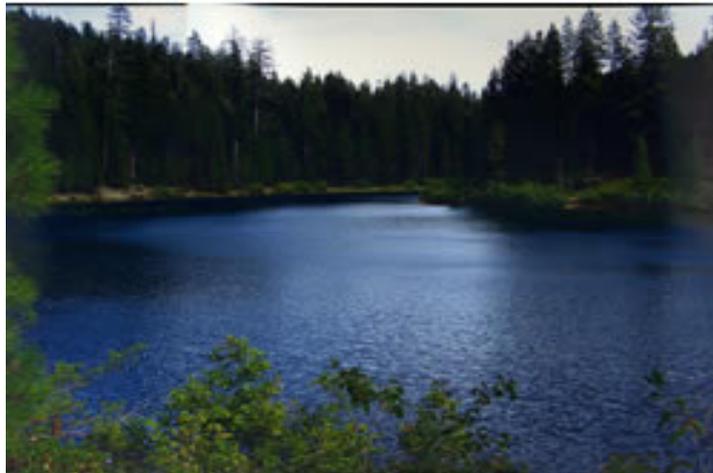




CONSUMER HANDBOOK

Revised October 31, 2013



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Directory

Emergency	911
Public Authority (Direct)	530-538-5262
Public Authority (Toll Free)	888-337-4477
IHSS Intake	530-538-7538 Press Option 2
IHSS (Toll Free)	877-410-8803
IHSS Accounting (Questions regarding payroll and Worker's Compensation)	530-538-7538 Press Option 1 or 877-410-8803
Adult Protective Services	800-664-9774
Children's Services	800-400-0902
(To report suspected abuse/neglect)	800-268-8822
PASSAGES	530-898-5923 800-822-0109
Peg Taylor Center for Adult Day Health Care	530-342-2345
CA United Homecare Workers Union	855-834-4034
Independent Living Services	800-464-8527
Legal Services of Northern CA	530-345-9491 530-534-9221
State Hearings Division	800-743-8525

WHAT IS IHSS?

IN-HOME SUPPORTIVE SERVICES (IHSS) is, and will continue to be, California's largest and most important in-home care program. The IHSS program provides personal and domestic services to aged, blind or disabled individuals in their own homes.

Individuals who perform these services are called providers. Individuals who receive these benefits are called consumers. The purpose of this program is to allow individuals to live safely at home, rather than in costly and less desirable out-of-home placement facilities.

IHSS pays care providers to provide *personal care*, such as feeding and bathing, transportation, protective supervision, and certain paramedical services ordered by a physician. Providers may also perform *household tasks* for consumers such as laundry, shopping, meal preparation and light house cleaning.

WHAT IS THE PUBLIC AUTHORITY?

The Public Authority is mandated by the State of California. It is separate from the county and has the ability to carry out the delivery of In-Home Supportive Services. The Public Authority was created specifically as a program improvement for consumers and providers.

DOES THE CONSUMER HAVE ANY CONTROL?

Yes, while IHSS regulations determine the range of services, the consumer drives the program. The consumer decides how the authorized services will be provided. The consumer is entirely responsible for hiring, supervising, and if necessary, terminating individual providers. The Public Authority's role is to improve the quality of service without interfering with consumer control.

HOW TO APPLY FOR IHSS

To apply for IHSS, contact Butte County Adult Services by phone at 538-7538, Opt 2. You may also apply in person at 78 Table Mountain Blvd in Oroville. The social worker will evaluate some basic information to assess a need for services and potential eligibility. A potential consumer has the right to file a written application and receive a written determination.

WHAT TO EXPECT

A social worker will come to the consumer's home and complete an assessment. The social worker uses a statewide uniform assessment process to determine which functions of daily living consumers cannot do for themselves. The purpose of the assessment is to find out at which level the consumer can function to determine which services he/she may need. It is based on the consumer's functional ability in his/her own home environment and not on medical diagnosis. For instance, a quadriplegic in an electric wheelchair may need help getting into and out of a wheelchair but not in moving around the home. Two persons with the same medical diagnosis may differ greatly in their abilities.

The social worker identifies the types and hours of services needed after the assessment is completed.

State guidelines and formulas are used to determine which services are allowed. The social worker also considers the consumers statement of need.

The consumer should be sure to alert the social worker making the assessment to any special needs caused by any medical condition and/or living situation. For example, incontinence requires frequent sheet changes and creates more laundry. The consumer should be sure to realistically estimate what he/she needs. The social worker also takes into account other services the consumer receives. For instance, the consumer may not need help the days he/she goes to an adult day health center.

Maximum Hour Allowances. There is a maximum number of hours per month which the consumer may receive. Sometimes a person needs more hours of service than the maximum allowed under IHSS. This is called “unmet need.” Unmet needs may be met by adult day health centers, other agencies and/or volunteers. Ask the social worker for a referral to an agency that might help. Friends, relatives or agencies also can volunteer for unmet need hours without affecting IHSS eligibility.

When the social worker determines that unmet need hours cannot be filled and the person “cannot remain safely at home,” the social worker may deny IHSS (for

example, if a person is likely to wander off at any time and needs “protective supervision” 24 hrs per day). The IHSS maximum cannot provide 24 hour coverage. The only reason some persons are able to stay at home is because the paid provider is a relative or friend and is able and willing to volunteer time to help meet the unmet need. Without help meeting the unmet need, the person would not be safe remaining in his/her home.

WHAT HAPPENS ONCE A CONSUMER IS QUALIFIED TO RECEIVE IHSS?

The consumer will hire the provider of his/her choice. If the consumer does not have a provider, the Public Authority will assist in this process. Upon request, a Public Authority Services Specialist will supply the consumer with a list of screened providers. The list of providers will be appropriately matched to each consumer’s particular needs. The consumer can then interview prospective providers from this list and hire the one he/she prefers.

PARENTS AND/OR SPOUSE AS PROVIDERS

IHSS allows that spouses of consumers and parents of minor children may be paid to provide care under certain circumstances. Every IHSS case is evaluated separately so the circumstances by which these services are granted vary greatly.

When an IHSS consumer has a spouse who does not receive IHSS, the spouse shall be presumed able to perform certain specified tasks unless the spouse provides medical verification of his/her inability to do so. An able spouse of an IHSS consumer shall also be presumed available to perform certain specified tasks except during those times when he/she is out of the home for employment, health or other unavoidable reasons and the services must be provided during his/her absence. The county determines whether the consumer's spouse is able and available.

A parent cannot be paid IHSS for any of the following:

- Baby-sitting services
- Child appropriate supervision. (Example: A baby would need constant supervision by a parent regardless of whether the infant was disabled or blind.)

- Protective supervision is limited to services needed due to mental impairment of the consumer.
Protective supervision shall not include routine child care supervision.

Parents can be paid for all IHSS services an eligible adult child needs.

APPEALS

The consumer will receive a written notice on a state approved form that states the hours allotted to each service authorized.

Hours may not be decreased without the proper notice.

The consumer may appeal any denial or reduction in services, including a refusal to allow the full number of hours the consumer feels he/she needs. The consumer also has a right to appeal a “share of cost” determination. If the consumer requests a fair hearing within ten days of the notice to reduce or terminate his/her benefits, benefits will continue at the same level until the hearing decision is made.

Send fair hearing requests to:

Public Inquiry and Response
State Department of Social Services
744 P Street, Mail Station 16-23
Sacramento, CA 95814
800-952-5253
TDD 800-952-8349

IHSS CONSUMER RIGHTS AND RESPONSIBILITIES

1. The consumer is the employer of the provider for the purposes of screening, hiring, supervising, training, and if necessary, terminating the employment of the worker.
2. The consumer is responsible for letting IHSS accounting and the social worker know when a provider is hired.
3. The consumer is responsible for letting the social worker know when a provider's employment is terminated.
4. The consumer is responsible for choosing to do background checks on potential providers.
5. The consumer is responsible for keeping records of hours worked.
6. The consumer is responsible for signing the provider's timesheet.
7. The consumer has the responsibility to be clear and reasonable about what is expected, to be consistent,

fair, and patient, and to give praise as well as constructive criticism.

8. The consumer has the right to ask the IHSS social worker for a reassessment of hours if his/her condition changes.
9. The consumer has the right to appeal any decision by the IHSS program that he/she does not agree with.
10. The consumer is expected to abide by non-discrimination policies on the basis of race, religion, gender, age or disability.
11. The consumer has the right to ask the IHSS social worker for assistance concerning issues he/she may have with the provider that he/she cannot resolve on his/her own.
12. The consumer and the provider have the responsibility to let IHSS accounting and the social worker know immediately if the provider is injured on the job.

HIRING A PROVIDER

The consumer is the employer and can hire and terminate whom he/she chooses. If a consumer does not have a provider, he/she can contact the Butte County IHSS Public Authority at (530)538-5262 for assistance.

WHAT IS THE PUBLIC AUTHORITY'S ROLE WITHIN IHSS?

The significant role the Public Authority fulfills for IHSS is to offer services that assist consumers with greater access to providers. This has been accomplished by creating a provider registry. A provider registry is a computerized database listing qualified and screened in-home care providers. These services offered by the Public Authority provide consumers with a greater level of confidence when hiring providers. Aside from establishing a registry, the Public Authority is also responsible for:

1. investigating the qualifications and background of potential providers,
2. establishing a referral system to connect providers with consumers,
3. providing training for consumers and providers,
4. performing any other function related to delivery of IHSS.

HOW DOES THE PUBLIC AUTHORITY REGISTRY WORK?

The Registry is run by the Butte County In-Home Supportive Services (IHSS) Public Authority. The Public Authority provides referral lists of screened home care providers to IHSS consumers, who need to hire someone to provide them with personal care and household assistance.

To become a provider one must complete an application and provide references, sign permission for the Public Authority Registry to conduct a criminal background check, attend an interview/orientation meeting and pass a Dept. of Justice (DOJ) Live Scan check.

Consumers request the names of providers who meet the consumer's specific service needs and preferences.

A computer program searches the Public Authority Registry of providers and creates a list to match the consumer's specific needs. Public Authority Registry staff then sends the referral list to the consumer. The consumer then contacts, interviews and hires the provider who best meet his/her needs. The Public Authority Registry does not hire providers and serves only as a referral service.

An Interested Provider may apply to be listed on the Public Authority Registry by calling the Registry at 530-538-5262. Registry staff will explain the Registry application process and procedure.

When providers are accepted onto the Public Authority Registry, their name will be referred to consumers seeking an IHSS provider, if the provider's skills, ability and knowledge match the consumer's needs.

There is no charge for listing a provider on the Public Authority Registry and referring him/her out for IHSS assignments.

Criteria for Provider Acceptance to the Public Authority Registry:

1. **Application**: All sections of the application must be completed accurately.
2. **Identification**: A picture ID must be current and accurate. A Social Security card and working phone number must be provided. The name on the Social Security card and picture ID must match.
3. **Right to Work**: Proof of right to work must be provided.

4. **References:** Public Authority Registry staff must obtain at least three positive references. The references can be either personal or work. Ideally, the Public Authority staff prefers two work references and one personal reference.

5. **Background Checks:** Applicants must give the Public Authority permission to conduct a criminal background check.

Felony: Not *all* felonies will prohibit applicants from being accepted onto the Public Authority Registry. Provider applicants who are concerned about past felonies are encouraged to discuss this with the Public Authority staff. However refusing permission for a background check is automatic grounds for exclusion from the Public Authority Registry.

6. **Aggressive/Inappropriate Behavior:** Registry applicants must not exhibit aggressive or inappropriate behavior during the interview, as confirmed and documented by Public Authority Registry staff.

7. **Interview/Orientation:** Applicant must have completed a face-to-face interview/orientation with Public Authority Registry staff.

Registry Criminal Background Check and Reference Check. Public Authority staff will accept the provider to the Public Authority Registry and he/she will be referred to consumers only after the Public Authority staff has completed a (public record) criminal background check, received notification from DOJ that he/she passed the live scan, and verified positive work and personal references.

HOW TO REQUEST A LIST OF PROVIDERS

Call the Public Authority at 538-5262 or 888-337-4477 and a list of up to six providers will be mailed to the consumer. It will be up to the consumer to interview the potential providers and hire the one they like best.

SCREENING PROVIDERS

Telephone Screening

1. It is important when talking on the phone to be friendly and pleasant. (Suggestion: Limit personal information over the phone – maybe have it written down so that it can be shared during the personal interview).
2. Give a brief description of what the job is, the hourly pay rate and the monthly-authorized hours.

3. Ask if this is the type of position the person is looking for or interested in.
4. If the person is not interested, thank him/her for their inquiry and hang up.
5. If the person is interested, set up a time to meet and conduct a formal, personal interview. For safety reasons, it is highly suggested that the consumer have someone they trust present at the formal interview, perhaps a parent or friend.

Personal Interview

You, the consumer, should try to have someone you trust at the interview.

1. Try to make the prospective provider feel comfortable.
2. Ask the prospective provider about past jobs they have had.
3. Ask if he/she has worked for a person with a disability before.
4. Explain the disability if it is comfortable to do so.

5. Give the job description along with IHSS Notice of Action for him/her to read.
6. If the person is interested in the position the consumer may want to ask some questions such as:
 - Do you feel uncomfortable about performing any of these duties and responsibilities?
 - Do you have any questions?
7. Ask when he/she is available to start and if he/she is willing to act as a backup for the primary provider.
8. Ask if the potential provider has any questions for the consumer. Tell the potential provider when he/she will be notified of the employment decision.

(You the consumer as the employer should keep a detailed record of each interview, as this will help you in your decision making process.)

ONCE YOU THE CONSUMER HIRES A PROVIDER

The provider must be enrolled through IHSS accounting each time he/she is hired for a job in order to be paid.

You the consumer must let your social worker and IHSS accounting know when you hire a provider.

You the consumer must call IHSS accounting at 538-7538, Opt 1, and request provider enrollment forms for your new provider.

You the consumer, as the employer, must fill out the forms completely and sign (in ink) the enrollment forms. Your authorized representative may complete the forms, if you are unable to do so. *Please note*, to ensure there is no delay in pay to your provider it will be helpful to have your provider present when completing the forms. Much of the information needed on these forms is provider information.

Either the provider or the consumer must return the provider enrollment form(s) to IHSS accounting. All other forms that are mailed to either the provider or the consumer from IHSS accounting must be completed and returned.

You the consumer should have received the In-Home Supportive Services Notice of Action form. This form will list the services and hours that have been authorized, and if you must pay a share of cost, what that share will be. The name and phone number of the social worker assigned to the case will be on the form.

IN ORDER FOR THE PROVIDER TO BE PAID,
enrollment forms must be completed accurately and submitted to IHSS accounting each time a provider is hired.

GETTING STARTED WITH A NEW PROVIDER

- ✓ Develop a work schedule or task checklist and post the schedule in full view. Remember, IHSS can only pay for tasks authorized as indicated on your notice of action.
- ✓ If you want something done in a very particular way, express this to the provider.
- ✓ Go over any medical problems, allergies, and/or special diets that you may have.
- ✓ Create and post a list of phone numbers of doctors, clinics, therapists, social workers, relatives or friends, to call in an emergency.
- ✓ Talk with the provider about how to get out of the house in case of an emergency.
- ✓ If the provider is going to help with medications under the supervision of a health care professional, have the provider make a list of the medications, including the schedule and dosage.

Handling Money: Always protect yourself and the provider from any questions/issues about money by following these steps:

- If you ask the provider to take money from your wallet or purse, be present and witness the provider doing so.
- Together with the provider, verify the amount of money being taken and have him/her record the amount on a note or on the shopping list. Keep these notes and shopping lists as a record.
- Have the provider count the change for you and both of you should initial the receipt when it is given back.
- **NEVER BORROW OR LOAN MONEY FROM/TO THE PROVIDER, EVEN IF HE/SHE OFFERS.**
- **NEVER ASK THE PROVIDER TO FINANCIALLY CONTRIBUTE TO ANYTHING, OR JOIN ANYTHING, OR BUY ANYTHING.**

TASKS	Mon	Tue	Wed	Thurs	Fri	Sat	Sun	INSTRUCTIONS
Personal Care:								
Exercise								
Medicines								
Respirations								
Eating/Feeding								
Ambulating								
Bathing								
Dressing								
Grooming								
Oral Hygiene								
Bowel/Bladder								
Menstrual Care								
Lift/Transfer								
Rub Skin								
Repositioning								
Sterile Procedure								
Wound Care								
Medical App.								
Protective Supervision								
Household Care:								
General Cleaning								
Vacuuming								
Mopping								
Empty Trash								
Meal Preparation								
Meal Cleanup								
Ironing/Laundry								
Making Beds								
Shopping								
Errands								
Other Tasks:								

IHSS PROVIDER RIGHTS AND RESPONSIBILITIES

1. The provider has a right to understand the IHSS work assignment and receive fair and respectful treatment.
2. The provider has the responsibility to be dependable; to arrive on time and ready for work.
3. The provider has the responsibility to provide reliable, safe, high quality services as directed by the consumer and authorized by the social worker.
4. The provider has the responsibility to respect the consumer's dignity, privacy, property, religion and culture.
5. The provider has the responsibility to keep personal information about the consumer confidential.
6. The provider has the right to ask the IHSS social worker and/or the Public Authority for assistance concerning issues with the consumer that the provider cannot resolve.

7. The provider has the responsibility to keep track of hours worked and to submit an **accurate, clean and complete** time sheet twice monthly.
8. The provider has the legal responsibility to report suspected abuse/neglect of dependent elderly or disabled persons to Adult Protective Services 1-800-664-9774 or Child Protective Services at 1-800-268-8822 (Butte County).
9. The provider has the responsibility to inform the social worker of any changes in the consumer's condition.
10. The provider is responsible for giving two weeks notice if terminating employment.
11. The provider has the right to not return to work if the environment is dangerous and **must contact** IHSS immediately of such circumstances.
12. The provider and the consumer have the responsibility to let IHSS accounting and the social worker know immediately if the provider is injured on the job.
13. Providers who are referred to the consumer through the Public Authority Registry are

responsible to call the Registry at least one time monthly to “check-in.” More often if changes occur (examples: work schedule is full, phone number change, address change, etc.)

14. Providers who are referred to consumers through the Public Authority Registry have the right to know why he/she is removed from the Registry.

TRANSPORTATION

- It is the provider's responsibility to furnish his/her own transportation to and from the consumer's home.
- If the provider does not have the appropriate level of insurance for his /her vehicle, the consumer should not be transported in his/her vehicle.
- If the provider does agree to transport the consumer in his/her vehicle, the provider must show the consumer proof of current and appropriate automobile insurance. A copy of his/her automobile insurance must be kept on file with the IHSS Public Authority.
- A provider can only transport the consumer when it is a clearly authorized service.
- IHSS does not pay for gas mileage. If the consumer requires transportation or if the provider will be shopping and/or running errands for the consumer in his/her vehicle, the consumer may reimburse the provider for gas out of his/her own pocket, but it is not required.

UNIVERSAL PRECAUTIONS

Many illnesses and diseases may threaten the consumer's health and the health of the provider. Germs, viruses, parasites, and bacteria can spread disease or illness. Colds, flu, mumps, chicken pox, tuberculosis and food poisoning are passed through the things we touch, eat, or breathe. Doctors advise that actions be taken as if both the consumer and the provider are potentially infectious. Taking universal precautions will help protect everyone from diseases.

Keep a supply of disposable latex gloves for the provider to use whenever he/she comes in contact with body fluids, body waste, or open sores. Have him/her try to do those tasks that require gloves all at one time so he/she does not have to keep taking the gloves on and off.

- ✓ Have the provider wear latex gloves when there is a chance of being in contact with blood, semen, vagina secretions, mucous membranes or other body fluids; when disposing of sanitary napkins, handling dirty laundry, cleaning the bathroom, assisting with menstrual care; or when assisting with toileting/bowel care. Wearing gloves is especially important when the provider has a wound or a rash or opening in the skin on the hands.

- ✓ Have the provider wash hands carefully with soap and water before putting on gloves and immediately after taking off the gloves. The provider must wash carefully any time he/she is exposed to blood or other body fluids. Ask the provider to wash before and after going to the bathroom, wash before preparing foods, performing personal care and housecleaning tasks and after physical contact with others. Have the provider use a nailbrush to scrub his/her hands. Dry with paper towels...never with a damp towel.
- ✓ Have the provider protect himself/herself and others by not preparing or handling food when he/she is ill or has open sores.
- ✓ Have the provider use a mild bleach solution (10 parts water to 1 part bleach) to clean up blood or other body fluids.
- ✓ Have the provider clean up spills immediately, use the bleach solution to soak or disinfect possible contaminated surfaces, linens, clothing, or other objects.
- ✓ When the provider cuts meat or chicken on a cutting board, have he/she sanitize the cutting board with the bleach and water solution to avoid spreading germs.

- ✓ Avoid having the provider handle sharp objects (such as razors or needles) that might have come in contact with blood or body fluids. Have him/her carefully place sharp objects in a puncture proof container for disposal.
- ✓ Have the provider wash soiled laundry in a washer set on hot and dry in a dryer set on high. If hot temperatures will damage garment, follow manufacturer's directions. Have the provider wash dishes and utensils in hot soapy water and rinse in very hot water and air dry.
- ✓ Do not let the provider eat, drink, apply cosmetics, or handle contact lenses in areas where exposure to blood or other body fluids are possible.

Notify those around you if you are ill or have a condition that might be contagious.

GETTING THE JOB DONE RIGHT

Providing In-Home Supportive Services is important work. IHSS Services allow consumers to remain safely at home and prevents premature admission to an institution. The consumer's job as an employer will go more smoothly if the consumer and the provider know and respect each other's roles and responsibilities. The following are suggestions the consumer should share with the provider, that will help establish a smooth working relationship and help prevent any problems that may develop.

1. **Be Dependable.** Have a set schedule for the provider to follow. Expect the provider to arrive on time and be ready to work. Expect the provider to notify you as soon as possible if he/she is going to be late.
2. **Communicate Changes.** You should notify the provider if a schedule is going to change, or if you have decided to let him/her go. As with any job, the consumer and provider are expected to give two weeks notice.
4. **Be Respectful.** Treat the provider with dignity and respect. Never verbally, physically, or sexually harass the provider. The provider should remember the consumer's home is a place of

employment only. Also keep in mind that the provider will not be able to work 7 days a week and never take time off for his/her own needs. You may want to have a backup provider in mind for vacations or emergencies.

5. **Report Changes.** Let the social worker know of any changes in health, abilities, environment or service needs.
6. **Keep Records.** Maintain accurate records of the hours each provider worked. (You should have the provider write down hours worked at the end of each shift.)
7. **Be Informed.** Know the amount of hours that have been authorized and the tasks to be performed. Refer to the Notice of Action or contact the IHSS social worker for this information. Notify the provider of any changes to the authorized tasks.

PAY PERIODS

Pay periods take place twice per month. At the end of each pay period, the provider will fill in the time he/she worked on the timesheet provided. The provider should not fully complete the timesheet until the end of the pay period and only mark down the hours he/she worked. Use black ink only when filling out a timesheet. In the hour and minute boxes if you make a mistake neatly cross out the wrong number and neatly write in the correct number staying within the box. **Do not use whiteout, red or blue ink.** The provider should enter the total hours worked in the pay period in the total box. The provider should not work over the authorized monthly hours and avoid working more than half of the monthly-authorized hours each pay period.

All checks are issued in Sacramento and are mailed to the provider's mailing address. Checks cannot be picked up at any County office.

When the provider gets the check, attached will be a statement of earnings and the timesheet for the next pay period. The provider should keep the statement of earnings for his/her records and use the timesheet to report time worked for the next pay period.

If anyone has any questions regarding payroll or if the provider has not received a check within 10 days of the county receiving the timesheet, have your provider call IHSS accounting at (530) 538-7538 option 1.

The following 14 Steps on how to complete a CMIPS II Timesheet are given to your provider at the state-mandated orientation.

- Correctly complete a CMIPS II timesheet
- Understand general timesheet processing information and responsibilities
- Prevent common CMIPS II timesheet mistakes that can delay payment

1. Agree on how many hours you worked. As the provider, make sure you and your recipient are clear on how many hours you work before you sign the timesheet. If you do not agree with the hours you actually worked do not sign the timesheet.

2. Only enter time spent doing authorized service hours that you specifically worked. You will receive a letter from your County IHSS office explaining your recipient authorized services for the initial month. This letter is called the IHSS Notification. Remember you will not be paid more than the number of hours

authorized for your Recipient. If you also provide care for additional IHSS Recipients you will need to fill out and submit a separate IHSS timesheet for each Recipient.

3. Do not write over pre printed information or alter the timesheet in any way including changing pay periods, dates, names or remaining hours or folding the timesheets.

4. Only use Black ink. One major change in CMIPS II is that you must only use black ink when filling out the timesheet. Some examples of things you cannot use are pencil, red ink, blue ink, you also cannot use correction tape or fluids to fix an entry. If you make a mistake you should neatly cross out what is wrong and neatly enter correct information staying within the box.

5. Do not cross out or change the names on pay periods. Time sheets are only valid for person and the pay period listed. Do not cross out anything on the top of the timesheet where the name of provider and Recipient are. Do not write in anything else except hours and minutes, sign and date in the boxes. If you make a mistake neatly cross out the wrong number and neatly write in the correct number staying within the box.

6. Leave the box blank if you did not work and do not write over the preprinted zero's. Do not write over pre-printed zeros as this would cause a delay in payment. Pre-printed zeros may exist where you may have begun working in the middle of the pay period. If you write over pre-printed zero's you will have to call your County IHSS payroll department for a new timesheet.

7. Write in time worked in hours and minutes, not decimals. For example if you worked 4 hours and 45 minutes, you would put 4 in the hour box and 45 in the minute box. Write neatly, clearly, and press firmly with **only a black ink pen.**

8. Add up your hours at the end of the pay period. When the pay period is complete you should add up and enter the total hours worked in the pay period in the total box. Make sure you have completely entered your daily hours and minutes worked. You should write neatly, clearly, and press firmly down with only a black ink pen. If the numbers are hard to read your paycheck may be delayed.

9. Sign and date the timesheet. Both you and your recipient must sign and date the timesheets. Timesheets submitted without one or both signatures will be rejected for payment and another timesheet will have to be re-submitted and will cause a delay in

paycheck. These signatures and dates must be signed after the pay period in which the work was done. The timesheets cannot be submitted before the last day in the pay period. The signatures and date box for both the recipient and provider's are on the back of the CMIPS II timesheet. Remember never sign an incorrect or blank timesheet.

10. Gently tear the timesheet along the dotted lines.

Be careful not to tear off important information such as signatures, hours and dates. This would cause a delay in your payment and you would have to request a new timesheet from your County IHSS office and then have to complete a new timesheet. When separating your timesheet from your pay stub be careful not to damage your document.

11. Make a copy of the timesheet and mail the original to the Timesheet Processing Facility. After you have sent your timesheet in for processing you should receive your paycheck within 10 business days of receipt from the Timesheet Processing Facility. Remember your timesheets are not viewed by a live person, they are computer scanned. So any of the above mentioned mistakes may delay your payment. Please review your timesheet for any errors before you send it to your Timesheet Processing Facility.

12. Do Not submit any additional documents with your timesheet such as:

- Change of address forms
- Post it notes
- Information for your County IHSS office
- Legal documents copies such as (Death Certificates, Social Security Cards, and Driver License's)

These types of documents must to be mail to your County IHSS office. DO NOT send to the Timesheet Processing Facility.

13. Mail your timesheets after the 15th and last day of each month to the Timesheet Processing Facility.

You should mail your timesheet to the Chico Timesheet Processing Facility located at PO Box 2380 Chico California 95927- 2380, which is located at the bottom of your envelope. If you lose your envelope, the address is located on the back of the timesheet located at the bottom above the signature line. It is important to note that CMIPS II timesheets will no longer be processed at the County IHSS Office.

14. Your Pay Check will be returned if your address is incorrect. If you have moved, you must contact your County Office to request an Address Change Form. You must complete and return this form to County IHSS Office within 10 days of moving. Your IHSS paycheck will not be forward by the Post Office.

If the Payroll System does not have your correct address your paycheck will be returned to the State Controller's Office as un-deliverable.

If you have followed these 14 steps in completing your timesheet, you can avoid unnecessary payment delays. Remember, your timesheets are no longer viewed by a live person, they are computer scanned and any of the above mentioned mistakes may delay your payment.

FREQUENTLY ASKED QUESTIONS

When can the provider start?

This dependent on two things:

1. The recipients case status and
2. The provider completing the required Orientation and passing the DOJ Live-Scan clearance requirements.

Recipients are advised to contact IHSS Payroll for determination of the above.

How many hours will I get & why does my neighbor get more hours than I?

The consumer's hours are determined by individual situations and needs.

Will the hours carry over to the next month if not used all in one month?

No

Will the provider get paid for mileage?

Any reimbursement for mileage would have to be paid directly by the consumer to the provider and the amount would have to be negotiated.

Who is the employer?

The consumer is the employer and has the power to hire any provider or terminate any provider they choose.

What happens if I am not satisfied with the provider I hired?

The consumer should be fully comfortable and satisfied with his/her provider of choice. If for whatever reason a provider needs to be replaced, the consumer as the employer, has the ability to terminate that provider and hire a different one.

What will I do if my income is too high to qualify for IHSS, but I need a care provider?

Consumers who do not qualify for IHSS will be referred to an agency, which can assist them in finding a private provider.