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JANUARY 22, 2016

ALL COUNTY INFORMATION NOTICE (ACIN) NO. I-08-16

TO: ALL COUNTY WELFARE DIRECTORS
ALL IHSS PROGRAM MANAGERS

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

SUBJECT: **UPDATES TO THE CASE MANAGEMENT, INFORMATION AND PAYROLLING SYSTEM II SCREENS AND FORMS TRACKING FOR IMPLEMENTATION OF PROVISIONS OF SENATE BILLS 855 AND 873 RELATING TO THE IHSS AND WAIVER PERSONAL CARE SERVICES PROGRAMS**

REFERENCES: **Senate Bills [855](#) and [873](#) (Chapters 29 and 685, Statutes of 2014); [ACL 14-76](#) (October 8, 2014); [ACL 14-99](#) (December 17, 2014); [ACL 15-97](#) (December 1, 2015); [ACL 16-01](#) (January 7, 2016)**

This All County Information Notice (ACIN) provides counties with information and instructions on modified screens and forms related to one time and ongoing actions needed in Case Management, Information and Payrolling System II (CMIPS II) beginning February 1, 2016, with regard to the implementation of Senate Bill (SB) 855 and SB 873.

This ACIN details system changes in CMIPS II which support the new forms that were mailed or are scheduled to be mailed to providers and recipients regarding workweek, travel time and overtime requirements as set forth in SB 855 and SB 873 and includes guidance to counties regarding requested data which needs to be input into CMIPS II. The forms are as follows:

- SOC 846 IHSS Program Provider Enrollment Agreement
- SOC 2255 IHSS Program Provider Workweek and Travel Agreement
- SOC 2256 IHSS Program Recipient and Provider Workweek Agreement
- SOC 2271A IHSS Program Recipient Notification of Maximum Weekly Hours
- SOC 2271 IHSS Program Provider Notification of Recipient Authorized Hours & Maximum Weekly Hours

BACKGROUND

On October 1, 2013, the United States Department of Labor (DOL) published the Final Rule on the Application of the Fair Labor Standards Act (FLSA) to Domestic Service (RIN 1235-AA05) that effectively extends overtime and minimum wage provisions to workers of IHSS. In response to the new federal regulations, two bills, SB 855 and SB 873, were chaptered in California on June 20, 2014, and September 27, 2014, respectively. These bills relate to overtime and travel time compensation for In-Home Supportive Services (IHSS) providers. The provisions of these bills are documented in ACL 14-76 (October 8, 2014). On November 6, 2015, the State announced that the payment of overtime, travel time, and wait time compensation to providers of IHSS and Waiver Personal Care Services (WPCS) would be implemented as of February 1, 2016.

COMMUNICATIONS AND UPDATES TO CMIPS II

As part of the implementation of the policy outlined in ACL 16-01, two separate mailings were planned for recipients and providers to introduce changes to the IHSS program and the WPCS program for workweek, travel time and overtime requirements. All forms included for recipients and providers were produced in the four threshold languages. These forms will need to be completed, signed and returned, as applicable, to their county of record.

The first mailing (December 2015 – January 2016) included the following information and forms:

- TEMP 3001 Provider Important Information (informational only)
- TEMP 3002 Recipient Important Information (informational only)
- SOC 846-IHSS Program Provider Enrollment Agreement (to be returned to county; return envelope included)

A second mailing (February 2016) will include the following forms:

- Informational Stuffer
- SOC 2255 IHSS Program Provider Workweek Agreement (to be returned to county; return envelope included)
- SOC 2256 IHSS Program Recipient Workweek Agreement (to be returned to county; return envelope included)
- SOC 2271 IHSS Program Provider Notification of Recipient Authorized Hours & Maximum Weekly Hours (informational only)
- SOC 2271A IHSS Program Recipient Notification of Maximum Weekly Hours (informational only)

As counties receive the completed forms SOC 2256 (Recipient) and SOC 2255 (Provider), county staff should enter the information into CMIPS II as outlined in ACL 14-99 (December 17, 2014). Functionality to input information in CMIPS II relating to the SOC 2256, SOC 2255 and SOC 846 forms will be implemented beginning January 25, 2016. The modifications to the Recipient screens and Provider screens in CMIPS II to accept input from these updated forms are outlined below.

RECIPIENT SCREENS

Authorization Summary Screen

As a result of the change in the weekly hours calculation, the *Authorization Summary* screen has been modified. The Weekly Authorized Hours section on this screen has been removed and a 'Weekly Authorized Hours' field has been added to display the recipient's maximum weekly hours (see Figure 1). The calculation for those hours as outlined in ACL 16-01 is as follows:

Total Number of the Recipient's Monthly Authorized Hours Divided by Four (4)

The maximum weekly hours displayed in the *Authorization Summary* screen will be captured in forms SOC 2271A and SOC 2271.

Additionally, the 'Monthly Overtime Maximum' field has been added and functionality will be further clarified in an upcoming ACIN.

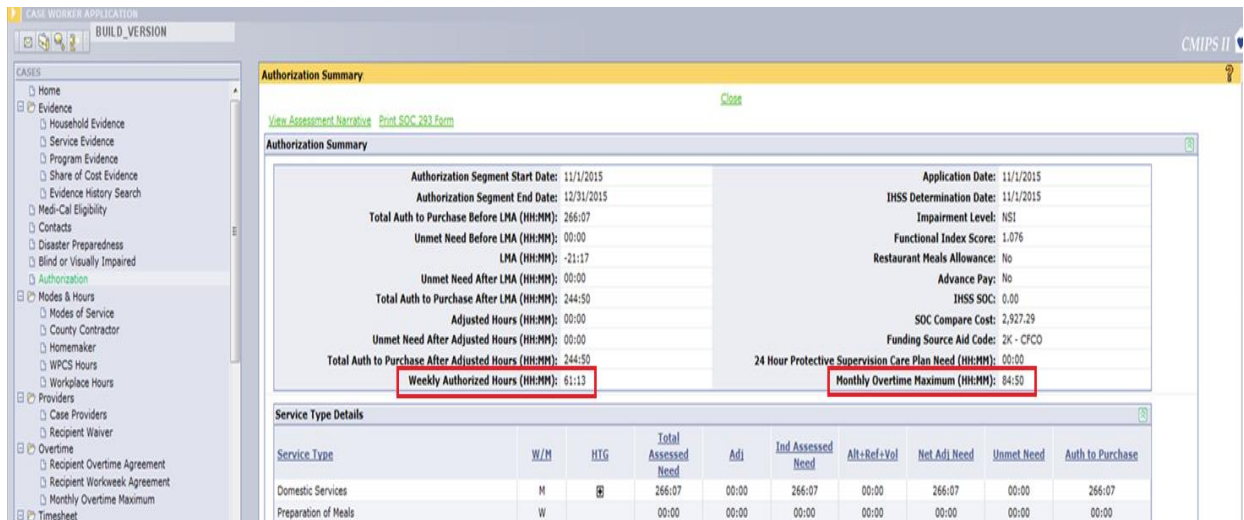


Figure 1. *Authorization Summary* Screen

Create, View and Modify Recipient Workweek Agreement Screens

The *Create, View and Modify Recipient Workweek Agreement* screens have been modified to reflect the new maximum weekly hours calculation in the 'Recipient Weekly Authorized Hours' field from the *Authorization Summary* screen (see Figure 1).

The *Create Recipient Workweek Agreement* screen is used to enter information received from the recipient from the SOC 2256 (refer to ACL 14-99 for detailed instructions; see Figure 2). The SOC 2256 will be sent only to recipients with multiple providers in the second mailing (February 2016). It must be completed and signed by the recipient and each of his/her providers.

Some recipients may already have a workweek agreement in CMIPS II. As of Friday, January 22, 2016, any data that was previously entered for the Recipient Workweek Agreement will be cleared automatically and beginning January 25, 2016, must be re-entered using the information from the SOC 2256 will be mailed to the recipients in February 2016.

Weekly	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
56 : 00	00 : 00	00 : 00	00 : 00	00 : 00	00 : 00	00 : 00	00 : 00

Total Hours (HH:MM): 56h : 00m

Provider Name: [Search] Provider Type: HSS Recipient Weekly Authorized Hours: 61:01

Figure 2. *Create Recipient Workweek Agreement* Screen.

Modified Error Message

The following message displays on the *Create Recipient Workweek Agreement* screen or the *Modify Recipient Workweek Agreement* screen under the following condition:

When a user saves the information from the Recipient Workweek Agreement form, and the 'Total Hours' field amount for the workweek agreement for the selected provider is more than the 'Recipient Weekly Authorized Hours' field amount (see Figure 2), the following message will display:

“Total Hours may not exceed the recipient Weekly Authorized Hours [XX:XX]”

PROVIDER SCREENS

Provider Details Screen

The *Provider Details* screen has been modified to remove the 'Monthly Overtime Maximum' field and reference only the 'Weekly Maximum' calculation (see Figure 3). This calculation, as outlined in ACL 16-01 is as follows:

Provider working for a single recipient:

The maximum hours the provider may work in a workweek is the recipient's maximum weekly hours.

Single provider working for multiple recipients:

The maximum number of hours that the provider may claim in a workweek for all of the time he/she works for his/her recipients combined is 66 hours.

The *Provider Details* screen is used to acknowledge the receipt of the SOC 846 Provider Enrollment form, specifically the fields 'SOC 846-Overtime Agreement' and 'SOC 846 - Provider Agreement' (see Figure 3). Some providers may already have the 'SOC 846 - Overtime Agreement' field marked as yes; this field will be cleared automatically as of January 22, 2016 and must be re-entered beginning January 25, 2016, after receiving the SOC 846 mailed to providers in December 2015.

The screenshot displays the 'Provider Details' screen within the 'CASE WORKER APPLICATION' interface. The left sidebar shows a navigation menu with options like 'Home', 'Cases', 'Provider', 'Enrollment History', 'Provider Workweek Agreement', 'Travel Time', 'Overtime Violations', 'Benefit Deduction', 'CORI Details', 'Background', 'Contact', 'Payroll', 'Timesheet', 'Identity', 'Notes', and 'CDPH Death Match'. The main content area is titled 'Provider Details' and contains several sections:

- Enrollment:** Includes fields for 'Eligible: Yes', 'SOC 426 - Provider Enrollment: Yes', 'SOC 846 - Overtime Agreement: Yes' (highlighted), 'Provider Orientation: Yes', 'Effective Date: 11/1/2015' (highlighted), and 'Updated By: tester5'. It also lists 'Ineligible Reason: DOJ Background Check: Yes', 'SOC 846 - Provider Agreement: Yes', 'DOJ County:', 'Number of Active Cases: 0', and 'Last Updated: 11/1/2015 00:00'.
- Appeals:** Fields for 'Appeal Status Date:', 'Admin Hearing Date:', and 'Appeal Status:'.
- General:** Fields for 'Initial Hired Date: 11/1/2015', 'SSN:', and 'SSN Verification:'.
- Medi-Cal:** Fields for 'Suspended or Ineligible: No', 'Suspended or Ineligible Begin Date:', and 'Suspended or Ineligible End Date:'.
- Public Authority:** Field for 'Public Authority Registered: No'.
- Overtime Maximums:** Field for 'Weekly Maximum: 57:08' (highlighted).

Figure 3. *Provider Details* Screen

There have been no changes to the Enrollment cluster display within the *Provider Details* screen, but the functionality of the 'SOC 846 – Overtime Agreement' and the 'SOC 846 – Provider Agreement' checkbox fields have been modified.

When the SOC 846 is received and the provider's Effective Date is before January 22, 2016 and the provider's eligibility is marked as 'Yes', the user must select the 'SOC 846 – Overtime Agreement' checkbox.

When the SOC 846 is received and the provider's Effective Date is on or after January 22, 2016 the user must only select the 'SOC 846 – Overtime Agreement' or the 'SOC 846 – Provider Agreement' checkboxes and the system will auto-select the other. This functionality was added because it is assumed that if the provider Effective Date is on or after January 22, 2016 that the counties begin using the new SOC 846-IHSS Program Provider Enrollment Agreement mailed to providers December 2015.

Create, View and Modify Provider Workweek Agreement Screens

The *Create Provider Workweek Agreement* screen is used to enter information received from the provider from the SOC 2255 (refer to ACL 14-99 for detailed instructions; see Figure 4). Some providers may already have a workweek agreement in CMIPS II. As of Friday, January 22, 2016, any data that was previously entered for the Provider Workweek Agreement will be cleared automatically and must be re-entered beginning January 25, 2016 using the information from the SOC 2255 which will be mailed to the providers in February 2016. The 'Recipient Weekly Authorized Hours' field will not display on this screen. Instead, it will display on the *Select Recipient* screen.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
00 : 00	00 : 00	00 : 00	00 : 00	00 : 00	00 : 00	00 : 00

Figure 4. *Create Provider Workweek Agreement* Screen

Select Recipient

When the “Recipient Name” link is selected from the *Create Provider Workweek Agreement* screen the *Select Recipient* screen displays (see Figure 4). This screen has been modified to display the maximum weekly hours in the ‘Weekly Authorized Hours’ field associated with each recipient listed (see Figure 5).

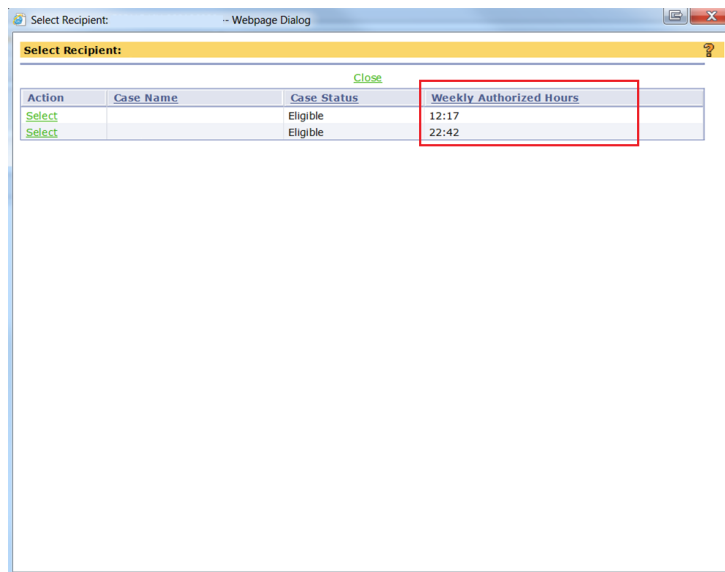


Figure 5. *Select Recipient* Screen.

Please note: if a Provider works for multiple recipients and wants to receive a Travel Claim Form, the Provider must have a Workweek Agreement established in CMIPS II and a Travel Time record established in CMIPS II. Information from the SOC 2255 IHSS Program Provider Workweek & Travel Time Agreement is entered in CMIPS II in the *Travel Time* screen to create a Travel Time record (see ACL 14-99 for detailed instructions; see Figure 6).

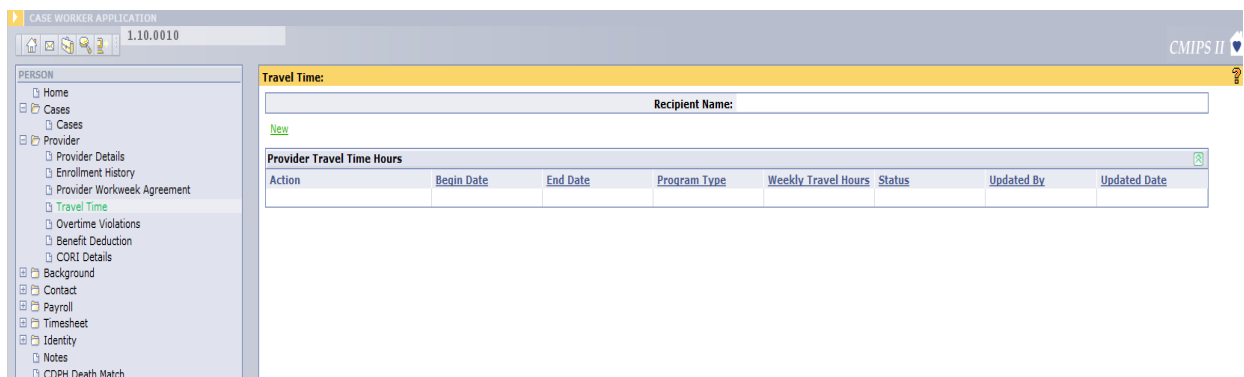


Figure 6. *Travel Time* Screen

Other Modifications in CMIPS II Related to SB 855 and SB 873 Implementation

Ongoing Mailings Generated in CMIPS II

As recipients and providers are added to CMIPS II or a change has been made to their authorized hours, in addition to a Notice of Action, recipients will receive the SOC 2271A IHSS Program Recipient Notification of Maximum Weekly Hours form and all providers associated with that recipient will receive SOC 2271 IHSS Program Provider Notification of Recipient Authorized Hours & Maximum Weekly Hours form, respectively.

An SOC 2271A will be generated within CMIPS II when one of the following occurs:

- A case assessment is authorized and the case status becomes Eligible or Presumptive Eligible.
- There has been an increase or decrease in a cases' Authorized to Purchase Hours after Adjusted Hours
- A case in Leave status becomes Eligible or Presumptive Eligible

For the month of February 2016, the SOC 2271A will be printed and mailed from the HPE print center. After this time period, ongoing printing and mailing will occur at the counties.

The SOC 2271A form will be printed in a recipient's written language, if their language is English, Spanish, Chinese and Armenian. If the recipient's written language is not one of these four threshold languages, the form will be printed in English.

The SOC 2271 form, which replaces SOC 858, will be generated within CMIPS II when one of the following occurs:

- A provider is assigned to a case.
- When a provider becomes "Active" again after being "On-Leave" or "Terminated".
- Authorized Hours or Service Types change for the recipient the provider is working for.

The SOC 2271 will be printed in a provider's written language, if their language is English, Spanish, Chinese and Armenian. If the provider's written language is not one of these four threshold languages, the form will be printed in English.

For the month of February 2016, the SOC 2271 will be printed and mailed from the HPE print center. After this time period, ongoing printing and mailing will occur at the counties.

When the SOC 2271A is triggered in conjunction with a NOA, and the NOA is suppressed, the SOC 2271A will also be suppressed. When SOC 2271 is triggered in conjunction with a NOA and the NOA is suppressed, the SOC 2271 status will be displayed as 'Inactivated'.

Modified Reports

On the "Monthly Projected Case Overtime and Travel Report" the 'Overtime Expense' calculation has been modified to determine only the overtime expense, which is calculated as ½ the default County Pay Rate (see Figure 7). 'Overtime Expense' calculation will not include the expense for the same hour at the regular county pay rate.

COUNTY: SAN BERNARDINO		STATE OF CALIFORNIA				PAGE: 1	
OFFICE: 01234		IN-HOME SUPPORTIVE SERVICES				CYCLE DATE: 07/01/2014 TO 07/31/2014	
		MONTHLY PROJECTED CASE OVERTIME AND TRAVEL				RUN DATE: 09/08/2014 TIME: 10:58:38	
		COUNTY/OFFICE SUMMARY					
PROGRAM	TOTAL CASES	PROJECTED					
		OVERTIME CASES	OVERTIME HOURS	OVERTIME EXPENSE	TRAVEL CASES	TRAVEL HOURS	TRAVEL EXPENSE
CFPO	999,999	999,999	HHH:MM	9999,999,999.99	999,999	HHH:MM	9999,999,999.99
PCSP	999,999	999,999	HHH:MM	9999,999,999.99	999,999	HHH:MM	9999,999,999.99
IPO	999,999	999,999	HHH:MM	9999,999,999.99	999,999	HHH:MM	9999,999,999.99
IMSS-R	999,999	999,999	HHH:MM	9999,999,999.99	999,999	HHH:MM	9999,999,999.99
TOTAL	999,999	999,999	HHH:MM	9999,999,999.99	999,999	HHH:MM	9999,999,999.99

DATA UPDATED AS OF APPROXIMATELY 8:00 PM THE PREVIOUS DAY

Figure 7. Monthly Projected Case Overtime and Travel Report

Interim Extracts for Tracking of SB 855 and SB 873

In order to assist counties with interim tracking of provider and recipient forms and violations related to overtime, travel time or workweek restrictions, a temporary .zip file containing three interim extracts has been made available with county-specific data and will be delivered to each of the (58) Counties (01-58) via the SFT. Between February 1, 2016 - May 1, 2016, CMIPS II will keep track of violations but violations will not be assessed against providers during this time. There will be a forthcoming ACL regarding violations as well as the process for disputing violations.

The three interim extracts are as follows:

VIOLATION	Once a week this file will provide a snapshot of all providers (IHSS and WPCS) that have received payment for serving a recipient in the identified county that would result in a violation if payment processing occurred after the SB 855 and SB 873 grace period has expired. This extract should be used to educate the provider population to prevent the occurrence of a violation after the grace period.
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The Violation Extract includes all providers for IHSS and WPCS, regardless of status and includes the following fields:

- a. RECIPIENT COUNTY CODE
- b. DISTRICT OFFICE
- c. PROVIDER NUMBER
- d. PROVIDER NAME
- e. PROVIDER MAILING ADDRESS
- f. PROVIDER TELEPHONE NUMBER
- g. RECIPIENT CASE NUMBER
- h. RECIPIENT NAME
- i. PAY PERIOD START DATE
- j. PAY PERIOD END DATE
- k. WORKWEEK START DATE
- l. VIOLATION TYPE DESCRIPTION
- m. VIOLATION COUNT
- n. ROW CREATE DATE
- o. ROW UPDATE DATE

If no data exists for violations, a blank extract file will be provided.

PROVIDERFORMS	Once a week this file will provide a snapshot of the Pending and Eligible providers in the identified county with an indication of the number of active cases to which the provider is assigned (across all counties) and the status of the forms indicators within CMIPS II. This extract should be used to follow-up with providers on outstanding required forms.
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The Provider Forms Extract includes all Eligible IHSS and WPCS providers for the county; this will not include Pending, Leave or Terminated providers. There will be a record for each Recipient-Provider relationship for the provider. If a provider is assigned in more than one county, each county will receive information for that provider based on recipient case ID. The extract includes the following fields:

- a. RECIPIENT COUNTY CODE
- b. DISTRICT OFFICE
- c. PROVIDER NUMBER

- d. PROVIDER NAME
- e. PROVIDER SPOKEN LANGUAGE
- f. PROVIDER MAILING ADDRESS
- g. PROVIDER TELEPHONE NUMBER
- h. FLSA 846 COMPLETED INDICATOR
- i. NUMBER OF ACTIVE CASES
- j. RECIPIENT CASE NUMBER
- k. RECIPIENT NAME
- l. WORKWEEK AGREEMENT INDICATOR
- m. ROW CREATE DATE
- n. ROW UPDATE DATE

The value 'Number of Active Cases' is reflective of all active cases across all counties to which that provider is assigned; this may not correspond to the number of records in a given county extract.

RECIPIENTFORMS	Once a week this file will provide a snapshot of the Pending, Presumptive Eligible and Eligible recipients in the identified county with an indication of the number of active providers (Eligible or Leave status) assigned to that recipient (IHSS and WPCS) and the status of the forms indicators within CMIPS II. This extract should be used to follow-up with recipients on outstanding required forms.
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The Recipient Forms Extract includes all Pending, Presumptive Eligible and Eligible Recipients. This extract will not include those recipients with Leave, Denied, Application Withdrawn or Terminated status. The extract includes the following fields:

- a. RECIPIENT COUNTY CODE
- b. DISTRICT OFFICE
- c. SOCIAL WORKER NUMBER
- d. RECIPIENT CASE NUMBER
- e. RECIPIENT NAME
- f. RECIPIENT SPOKEN LANGUAGE
- g. RECIPIENT WRITTEN LANGUAGE
- h. RECIPIENT RESIDENCE ADDRESS
- i. RECIPIENT MAILING ADDRESS
- j. RECIPIENT PHONE NUMBER
- k. NUMBER OF ACTIVE PROVIDERS
- l. SOC 2256 – Recipient Workweek Agreement
- m. RECIPIENT OVERTIME DECLARATION
- n. ROW CREATE DATE
- o. ROW UPDATE DATE

FORTHCOMING ACLs/ACINs

In the coming months, CDSS will release ACLs/ACINs to address the following CMIPS II changes:

- Approval/Exception Process
- Violations and Dispute Process for Violations

If you have questions or comments regarding this ACIN, please contact the Adult Program Division, CMIPS II and Systems Operations Unit at (916) 551-1003 or via e-mail at: CMIPSII-Requests@dss.ca.gov.

Sincerely,

Original Document Signed By:

EILEEN CARROLL
Deputy Director
Adult Programs Division

c: CWDA