February 16, 2017

ALL COUNTY LETTER (ACL) NO. 17-18

TO: ALL COUNTY WELFARE DIRECTORS
    All IHSS PROGRAM MANAGERS

SUBJECT: IMPLEMENTATION OF ASSEMBLY BILL (AB) 1797 CONFIRMATION NUMBER RESULTING FROM IHSS APPLICATIONS

REFERENCE: ASSEMBLY BILL (AB) 1797, (CHAPTER 402, STATUTES OF 2016)
and ALL COUNTY LETTER No. 12-36 (July 24, 2012)

This ACL provides counties with information and instructions for implementing the provisions of AB 1797, which added Section 12301.16 to the California Welfare and Institutions Code, requiring that counties provide In-Home Supportive Services (IHSS) program applicants with a confirmation number upon receipt of an application for IHSS.

The California Department of Social Services (CDSS) previously provided direction to counties via ACL 12-36, released on July 24, 2012, regarding the process and systems functionality for IHSS referrals and applications. Currently, at the time application information is entered in the Case Management Information and Payrolling System II (CMIPS II), the system generates a random seven-digit case number that is assigned to the applicant. This randomly assigned case number remains as the case number for an applicant/recipient for the remainder of the life of the case record, even if the recipient re-applies or moves to another county. Therefore, this case number shall be used as the applicant’s confirmation number in order to meet the requirements of AB 1797. This confirmation number will serve as documentation that the applicant filed an application for IHSS. The counties shall provide the case number to the applicant either orally before the end of the telephone call during which the application is taken, or in writing once the application is entered into CMIPS II.

The CDSS has developed a new notice, “Notice to Applicant of Application Confirmation Number,” (SOC 2300) for county IHSS agencies to use when providing written notification to IHSS applicants of their application confirmation number.
The new notice will be available in camera-ready form on the CDSS Form/Brochures web page at:

http://www.cdss.ca.gov/inforesources/Forms-Brochures

Upon completion of the Armenian, Chinese, and Spanish translations, CDSS will post translated versions of these notices on the Translated Forms and Publications web page at:

http://www.cdss.ca.gov/inforesources/Translated-Forms-and-Publications

The designated Forms Coordinator for your county must distribute translated notices to each program and location. Each county shall provide bilingual/interpretive services and written translations to non-English or limited-English proficient populations, as required by the Dymally-Alatorre Bilingual Services Act (California Government Code section 7290 et seq.) and by state regulation (CDSS Manual of Policies and Procedures Division 21, Civil Rights Nondiscrimination, section 115).

Questions about accessing the notices may be directed to the Forms Management Unit at fmudss@dss.ca.gov. Questions about translations may be directed to the Language Services Unit at LTS@dss.ca.gov.

For questions regarding this ACL, please contact the Policy and Operations Bureau at (916) 651-5350.

Sincerely,

Original Document Signed By:

DEBBI THOMSON
Deputy Director
Adult Programs Division