

October 4, 2018

ALL COUNTY LETTER NO: 18-102

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY IN-HOME SUPPORTIVE SERVICES PROGRAM
MANAGERS

SUBJECT: CDSS SPECIAL TRANSACTION WRIT OF MANDAMUS

REFERENCE: [ALL COUNTY LETTER \(ACL\) 12-36 \(JULY 24, 2012\);](#)
[ACL 17-18 \(FEBRUARY 16, 2017\);](#) [ACL 18-30 \(MARCH 16, 2018\)](#)

This (ACL) provides counties with information and changes relating to the California Department of Social Services (CDSS) Special Transaction Writ of Mandamus (Writ) requests. This ACL supersedes any and all prior instructions and documentation relating to the CDSS Writ requests and processing.

BACKGROUND

The Writ was originally created in the Case Management, Information and Payrolling System (CMIPS) as a method to pay an In-Home Supportive Services (IHSS) providers and recipients when payment is ordered by a Superior Court Judge. During conversion from Legacy CMIPS to the new CMIPS, CDSS began authorizing the use of the Writ to pay IHSS providers when a system conversion issue did not allow normal payroll processing to take place. The Writ usage was intended to be a temporary solution for conversion errors and not an ongoing method of payment.

CDSS WRIT TRANSACTION REQUEST LIMITATIONS

Currently, the majority of Writ requests submitted to CDSS are due to a county worker not entering an IHSS application into CMIPS within 14 days of the application date. The CDSS has provided direction to counties mandating that applications be entered into CMIPS in a timely manner so the case number can be provided to the applicant as the confirmation number.

The CDSS Special Transaction (Writ) requests may no longer be used to correct application errors and the Writ process shall be limited to the following circumstances:

- Superior Court ordered payments to IHSS Providers.
- CDSS defined system defects.
- County Administrative issues that are outside of the control of the county, including Medi-Cal issues.

Please note, requests sent to the Program Integrity Unit in the Adult Programs Division for fraud referrals and other provider payment issues are not included in this ACL. Counties should continue to use the established process for these cases.

Each Writ request received by CDSS will be evaluated and a determination will be made as to whether the request will be processed. It is important to note that the CDSS Writ is a special transaction that pays additional dollars in a pay period. It does not allow for hours to be entered and therefore, this transaction does not apply to county benefits, union deductions or sick leave accrual hours, which occur through the normal timesheet process, nor does it decrement hours on any case the provider works for.

The Writ process will not be used to pay providers due to a State Hearing decision. If a county receives a State Hearing decision that states they must pay the provider, they should forward the information to the Adult Programs Policy Branch, so the issue can be addressed.

COUNTY RESPONSIBILITIES

Counties must utilize business processes that comply with program rules. Counties may not employ screening practices in an effort to reduce applications and may not use ancillary tools or manual processes to capture applicant information that cause applications not to be entered directly into CMIPS per ACL 17-18. Upon direct entry of applications into CMIPS, the system preserves the application date and enables services to be authorized appropriately to the recipient.

Counties must establish appropriate processes and procedures necessary to ensure that IHSS applications are processed according to IHSS rules and direction provided by CDSS. The ACL 12-36 provides further guidance for counties as to what constitutes an inquiry, a referral and/or an application. The CMIPS has both referral and application functionality which preserves the application date of the recipient. If counties insist on using ancillary tools, they must enter the referral and/or application directly into CMIPS first to ensure that the application date is being preserved appropriately. The County Referral Detail Report and the Application, Approval, Denial, Termination Report have been developed to enable counties to access both referral and application information in CMIPS.

If an application is not processed in a timely manner, due to county error or county inability to use existing CMIPS functionality, the county must seek an alternate method for paying providers in consultation with CDSS on a case by case basis and can also

anticipate a review of the county's current business process that may be causing errors. The CDSS will no longer accept Writ transaction requests from counties for circumstances not involving one of the three conditions noted above.

To further reduce the need for special transactions due to a recipient's loss of Medi-Cal, counties should, prior to creating a new application, review the Termination Date and Termination Reason in CMIPS, for every applicant where there is an existing case in "Terminated" status. If counties identify that a recipient's case was terminated because of a loss of Medi-Cal eligibility and the Medi-Cal eligibility has subsequently been retroactively restored, the case should be rescinded and a new application should not be created. This will allow counties to properly authorize the case and generate timesheets to the provider.

Currently, counties have the ability to process a State Hearing Special Transaction, however these payments have no relation to the Writ of Mandamus process. Payments for State Hearings decisions must be issued to the recipient by using a State Hearing Transaction in CMIPS.

Questions regarding the content of this ACL may be directed to the CMIPS Systems and Operations unit within the Systems and Data Analysis Bureau at the following email address: CMIPSII-Requests@dss.ca.gov.

Sincerely,

Original Document Signed By:

DEBBI THOMSON
Deputy Director
Adult Programs Division

c: CWDA