



STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**

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ALL COUNTY LETTER NO. 16-44

REASON FOR THIS TRANSMITTAL

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

TO: ALL COUNTY WELFARE DIRECTORS  
ALL IHSS PROGRAM MANAGERS  
IN-HOME OPERATIONS COORDINATORS

SUBJECT: MODIFICATIONS TO IN-HOME SUPPORTIVE SERVICES AND WAIVER PERSONAL CARE SERVICES IN CASE MANAGEMENT, INFORMATION AND PAYROLLING SYSTEM TO MANAGE OVERTIME AND TRAVEL TIME VIOLATIONS, EXEMPTION PROCESSING, AND FLEXIBLE HOURS

REFERENCES: Senate Bills [855](#) and [873](#) (Chapters 29 and 685, Statutes of 2014); [ACL 16-01 \(January 7, 2016\)](#); [ACL 16-07 \(January 21, 2016\)](#); [ACL 16-22 \(April 1, 2016\)](#); [ACL 16-36 \(April 21, 2016\)](#)

This All-County Letter (ACL) provides counties with information and instructions for implementing the provisions of Senate Bill (SB) 855 and SB 873 that established limits on the number of authorized hours providers in the In-Home Supportive Services (IHSS) and Waiver Personal Care Services (WPCS) programs are permitted to work in a workweek. This ACL will discuss some related modifications pertaining to the violations business process flow made to the Case Management, Information and Payrolling System (CMIPS) which include the following:

- The new Overtime Violations business process flow
- New and Modified screens for managing Violations
- Exemptions from Workweek Limitations
- Management of Recipient Flexible Hours

## **BACKGROUND**

On January 7, 2016, the State of California announced that the payment of overtime, travel time, and wait time compensation to IHSS and/or WPCS providers, and related workweek limitations, would be implemented on February 1, 2016. Beginning May 1, 2016, providers who submit timesheets reporting work hours that exceed the workweek limitations will accrue violations that could result in an IHSS provider's program eligibility being suspended for up to one year.

To maintain continuity of care, the California Department of Social Services (CDSS) released information and instructions regarding exemptions allowed to providers in ACL 16-07 on January 21, 2016, and ACL 16-22 on April 1, 2016. Modifications have been made to CMIPS to assist counties in managing Overtime and Travel Time payments and violations.

## **OVERTIME AND TRAVEL TIME VIOLATIONS, EXEMPTIONS, AND FLEXIBLE HOURS**

Effective May 1, 2016, changes to CMIPS are scheduled for implementation that will enforce the consequences for overtime and travel time violations.

### **Conditions Triggering Violations**

With implementation of the violation process, the provider can receive up to four violations for violating the workweek limitations with progressive consequences, which are being implemented. The violation management and business processes are described below. IHSS and/or WPCS providers will incur a violation for:

- Working more than 40 hours in a workweek for a recipient without the recipient getting approval from the county or In Home Operations (IHO) when that recipient's maximum weekly hours are 40 hours or less.
- Working more than a recipient's maximum weekly hours without the recipient getting approval from the county or IHO, which causes a provider to work more overtime hours in the month than they normally would.
- Working more than 66 hours in a workweek when a provider works for more than one recipient.
- Claiming more than seven (7) hours of travel time in a workweek.

**Note:** in some instances, a violation may be triggered due to a timesheet error:

**Example 1:** If the timesheet scanning process at the Timesheet Processing Facility read the handwritten digit "5" on the timesheet as the digit "8", which caused the provider to exceed the weekly maximum or expected overtime maximum hours. In this scenario, the county has discretion to conduct a reasonable evaluation of the error and determine whether to uphold or remove the violation. This evaluation can be easily done during the 5-day county review process prior to any issuance of a violation.

**Example 2:** Since overtime is calculated by workweek, and a single workweek can span two months, the order in which timesheets are processed factors in to the violation process. For example: the last week in February/the first week in March includes of Feb, 28 – March 5, 2016. If the March Part A timesheet is processed before February Part B, the February Part B would include overtime for the first two days of that work week (Feb. 28-29) this scenario could trigger an overtime violation. In this scenario, the county has discretion to conduct a reasonable evaluation of the error and determine whether to uphold or remove the violation. This evaluation can be easily done during the 5-day county review process prior to any issuance of a violation.

The system keeps track of all violations and the program type under which those violations are incurred. The user will be able to view the current violations and dispute process in the *View Overtime Violations* screen (see Figure 1).

### **Consequences for Incurring Violations**

Consequences for violations vary depending on if it is the provider's first, second, third or fourth violation. Providers will receive only one violation during a calendar month. A timesheet or travel claim form may trigger multiple errors; however, only one violation will be issued per calendar month.

For example, if a timesheet or travel claim form triggers an error during the first pay period of May and another during the second pay period of May, the first error will result in a violation and the second error will be tracked by the system. A second violation will not be issued within the same calendar month. Each time a violation occurs, the provider will receive a letter that a violation has occurred, along with information on how to request a county or IHO review (or State Administrative Review, if applicable) of the violation. A letter will be sent to all the recipients for whom the provider works.

**Note:** As of the May 1<sup>st</sup> implementation, the system will generate the applicable violation letters for the First and Second Violations. The Third and Fourth Violation letters will be generated by the system Mid-July.

See ACL 16-36 (April 21, 2016) for information on consequences for incurring violations.

### **PROCESS FLOW FOR OVERTIME AND TRAVEL TIME VIOLATIONS**

A new business process flow was created in CMIPS to assist the users in reviewing overtime and travel time violations. The review process is the same for the First through Fourth Violations. **Note:** For all violations, the provider may dispute their violation. Providers can continue to work and be paid for services until the final determination has been made through the dispute process. The dispute process is outlined in a separate forthcoming ACL.

### ***CMIPS User Review Process for All Violations***

When a violation is triggered, the violation will be in Pending Review status. A task will then be triggered to the County Overtime Violation Work Queue. The user given the task will have three (3) business days to take action on the violation. The user will have the option to uphold the violation (the violation is active) or override the violation (the violation is inactive). If no action is taken, CMIPS will automatically uphold the violation. If a violation is overridden by the user, a task will be triggered to the Supervisor Overtime Violation Work Queue to review the county/IHO user override. If the county/IHO user upholds the violation, a task will not be sent to the Supervisor for review and the violation status will be set to active.

### ***Supervisor Review Process for All Violations***

If the Supervisor receives a task through the Supervisor Overtime Violation Work Queue to review a violation override by the county/IHO user, the Supervisor must take action to review the override within two (2) business days. If the Supervisor does not take action within two (2) business days, CMIPS will automatically take the action and approve the violation override and the violation status will be inactivated. If a Supervisor does take action within two (2) business days, the Supervisor must choose the option to reject or approve the override by the user. If the Supervisor rejects the decision to override by the user, the violation will be considered active. If a Supervisor approves the override the violation status will be inactivated.

When the violation status is active, CMIPS will set the next possible violation date. This is visible on the *Provider Details* screen in the “Next Possible Violations Date” field (see Figure 9). A provider may incur only one violation in a calendar month. A provider may incur only a single violation in a calendar month even if the provider works multiple cases across both IHSS/WPCS programs. A provider will not incur another violation while a violation is undergoing the review process by the county/IHO or CDSS.

### ***Provider One-Time Review Option of Instructional Material for the Second Violation***

After the county and supervisor review process is completed and the second violation is incurred, the provider will have a one-time option to review instructional materials and complete and submit a self-certification form to the county/IHO in order to avoid incurring the second violation. If the provider does not submit the self-certification form within fourteen (14) calendar days from the date of the notice informing the provider of their second violation, the violation will remain active.

Under emergency circumstances, a provider has the option to call the county and request a seven (7) calendar day extension to submit the self-certification form. For example, if the provider calls and informs the county that he/she was unable to review the material due to illness or an unforeseen emergency situation, the county has the

discretion to accept the self-certification form within the extended seven (7) calendar days from the date of the violation notice. Whether or not the provider requests an extension, the county will have a total of twenty-six (26) calendar days from the date of the violation notice to enter the self-certification form completion date into the CMIPS. If the county does not enter the self-certification form completion date into the system during this time period, they will not be able to do so at a later date and the Second Violation will remain active. The county shall retain a copy of the self-certification form for their records.

**Note:** The instructional material with the self-certification form is not system generated. The county will have to manually select the instructional material with the self-certification form from the CDSS website and mail it to the provider along with the second violation notice, if the provider has not previously completed and submitted the self-certification form.

The county will know that the provider needs to be mailed the instructional materials because the checkbox under the Second Violation option will be selected on the system-generated SOC 2257, the “In-Home Supportive Services Program Notice To Provider Of First/Second Violation For Exceeding Workweek And/Or Travel Time Limits”. This selected checkbox on this notice states “You have the one-time option of reviewing the enclosed instructional materials and submitting the verification notice to the IHSS office to avoid a second violation”.

The instructional materials with the self-certification form will be available on the CDSS website in all the threshold languages.

If a Second Violation is removed due to the completion of the self-certification form, the system will generate two datasheets titled ‘Administrative Use-Notice to Provider Training Complete’ and the ‘Administrative Use-Notice to Recipient Provider Training Completed-Removing Violation’. The county will use the information on the datasheets to populate the information on the SOC 2263 ‘In-Home Supportive Services Program Notice to Provider Rescinding Violation’ and SOC 2264 ‘In-Home Supportive Services Program Notice to Recipient Rescinding Provider Violation’ forms. Counties shall enter the reason for the removal of the second violation due to completion and receipt of the self-certification form in the comments section on the SOC 2263 and SOC 2264.

## **NEW SCREENS FOR PROCESSING OVERTIME AND TRAVEL VIOLATIONS**

In order to manage Overtime and Travel Time Violations, several new screens have been added. CMIPS has been modified to enable the county/IHO user, Supervisor, and CDSS to assist in the management of Overtime and Travel Time Violations. The following Security Groups have been modified to allow users to have access to the appropriate screens as needed:

CaseManagementSupervisor
CDSSProgramMgmt

ProviderManagementModify
WPCSModify
CaseManagementModify
CDSSView
ProviderManagementView
WPCSVIEW
PublicAuthorityView
CaseManagementView

In addition, users who will be responsible for the Violations Review process were initially assigned to the County and Supervisor Overtime Review Queues, per the users identified by the counties. Ongoing assignment to the County and Supervisor Overtime Review work queues will be the responsibility of the county to maintain.

### **View Overtime Violations Screen**

A new *View Overtime Violations* screen (Figure 1) has been added to CMIPS to allow county/IHO users and supervisors to manage providers' overtime violations. Each violation will have an associated *View Overtime Violations* screen that can be selected from the *Overtime Violations* screen. The *View Overtime Violations* screen will display when the *View* link is selected for each violation listed on the *Overtime Violations* screen. The *View Overtime Violations* screen displays information relating to the numbered violation, the County Review process (prior to violation being issued to provider) and the County Dispute process, including Comments and History related to those processes for the selected violation. The "Program Type" field states the program the current violation is associated with. The screen as it relates to the County Review process will be discussed in this ACL, while the County Dispute process itself will be discussed in a separate ACL.

The screenshot shows the 'View Overtime Violations' screen with three main tabs: County Review, Supervisor Review, and County Dispute. The County Review tab is active.

**County Review:**

County Review	
County Review Outcome: Override	
County Review Outcome Date: 6/19/2015	County Reviewer Name: [Redacted]
Supervisor Review Outcome: Rejected	County Review Outcome Entered Date: 6/19/2015
Supervisor Review Outcome Date: 6/25/2015	Supervisor Name: [Redacted]
County Review Letter Date: 6/26/2015	Supervisor Outcome Entered Date: 6/25/2015
Date Training Completed: [Redacted]	Training Letter Date: [Redacted]

**Supervisor Review:**

Supervisor Review	
Comments	
[Redacted]	

**County Dispute:**

County Dispute	
Comments	
[Redacted]	

**Figure 1: View Overtime Violations Screen**

## County Review

### Modify County Review Screen

When a violation is triggered, the County Review process begins, a task is sent to the County Overtime Violation Work Queue and the Violation Status is set to 'Pending Review'. Once the task has been received by the county user, the county user will select the "County Review" link from the County Review cluster in the *View Overtime Violations* screen (Figure 2) in order to review the violation and decide to Uphold the violation or Override the violation. When the *County Review* link is selected from the *View Overtime Violations* screen, a new pop up screen, called *Modify County Review*, will display (Figure 3).

The screenshot shows the 'View Overtime Violations' screen with a yellow header bar. On the left is a navigation sidebar with sections like 'Home', 'Cases', 'Provider' (which is expanded to show 'Provider Details', 'Enrollment History', 'Provider Workweek Agreement', 'Travel Time', 'Overtime Violations' - this item is highlighted in blue), 'Benefit Deduction', 'CORI Details', 'Background', 'Contact', 'Payroll' (with 'Payment Search', 'Overpayment Recoveries', 'Weekly Provider Paid Hours'), and 'Timesheet'. Below these are sections for 'MY WORKSPACE', 'PERSON', 'CASES', 'SEARCH', 'WAGE RATE', 'COUNTY CONTRACTOR', 'HOMEMAKER', and 'RECENT ITEMS'. The main area has a yellow title bar 'View Overtime Violations:'. Below it, there are three tabs: 'Case', 'County Review' (which is selected and highlighted in red), 'Comments', and 'History'. The 'County Review' tab contains a 'Manage' section with fields for 'County Review Outcome' (set to 'Override'), 'County Review Outcome Date' (6/19/2015), 'Supervisor Review Outcome' (set to 'Rejected'), 'Supervisor Outcome Date' (6/25/2015), 'County Review Letter Date' (6/26/2015), and 'Date Training Completed'. To the right of this are fields for 'County Reviewer Name' (grayed out), 'County Review Outcome Entered Date' (6/19/2015), 'Supervisor Name' (grayed out), 'Supervisor Outcome Entered Date' (6/25/2015), and 'Training Letter Date' (grayed out). Below this is another 'County Review' tab with a 'Manage' section containing fields for 'County Dispute Filed Date', 'County Dispute Outcome', 'County Dispute User Name', 'County Dispute Outcome Entered Date', 'Dispute Supervisor Name', and 'Supervisor Outcome Entered Date'. To the right are fields for 'Dispute Entered Date', 'County Dispute Outcome Reason', 'County Dispute Outcome Date', 'Supervisor Dispute Outcome', 'Supervisor Dispute Outcome Date', and 'County Dispute Letter Date'.

Figure 2: View Overtime Violations screen showing County Review cluster

The screenshot shows the 'Modify County Review' screen with a yellow header bar 'Modify County Review:'. Below it are 'Save' and 'Cancel' buttons. The main area has a title 'County Review' with a red asterisk next to 'County Review Outcome'. It contains fields for 'County Review Outcome' (dropdown menu), 'County Review Outcome Date' (date picker), 'Supervisor Review Outcome' (dropdown menu), 'Supervisor Outcome Date' (date picker), 'County Review Letter Date' (date picker), 'Date Training Completed' (date picker), 'County Reviewer Name' (grayed out), 'County Review Outcome Entered Date' (6/19/2015), 'Supervisor Name' (grayed out), 'Supervisor Outcome Entered Date' (grayed out), and 'Training Letter Date' (grayed out). Below this is a large text area labeled 'Comments:' with a red asterisk. At the bottom are 'Save' and 'Cancel' buttons.

Figure 3: Modify County Review Screen

The *Modify County Review* screen contains the following county/IHO user selectable fields:

- County Review Outcome: The county user will select from a drop down menu for the outcome of the county/IHO review. This is a required field. The options are as follows:
  1. Pending Override – The violation should be overridden and should not stand.
  2. Pending Upheld – The violation stands and is upheld.
- County Review Outcome Date: The user enters this date when they select their Review Outcome.
- Date Training Completed: The user will enter the date that the county receives the completed self-certification form.
- Comments: The user will enter their User ID and the comments regarding their selected review outcome such as why the violation was upheld or overridden. This field will allow up to 1000 characters total. This is a required field.

The *Modify County Review* screen contains the following system generated fields relevant to the County Reviewer:

- County Reviewer Name: The name of the user who sets the County Review Outcome.
- County Review Outcome Entered Date: The date when the County Review Outcome was keyed.
- Training Letter Date: The date on which the letter to the provider was sent confirming that the Second Violation was removed due to their reviewing the instructional materials and completion of the related self-certification form.

The other fields are discussed in the *Modify County Supervisor Review* screen section, below.

**Note:** Once a County Review Outcome has been selected and saved, it can only be modified until the end of the business day. It cannot be modified the next day. This is a standard practice that exists today for Case Management and Payroll activities. Whatever decision is made by the county/IHO user, the violation review process will continue based on that decision. When a county/IHO reviewer selects “Pending Override” or “Pending Upheld”, the system will automatically change the status to “Override” or “Upheld” the next day.

The county user will have three (3) business days to complete the initial review of the violation and is responsible in determining if the overtime violation should be “Upheld” or, if there is justification, to “Override” the violation.

### Modify County Supervisor Review Screen

The figure displays two screenshots of a software application interface. The top screenshot shows a 'County Review' window with tabs for 'County Review', 'Supervisor Review' (which is highlighted with a red box), 'Comments', and 'History'. It contains several input fields: 'County Review Outcome' (Override), 'County Review Outcome Date' (6/19/2015), 'Supervisor Review Outcome' (Rejected), 'Supervisor Outcome Date' (6/25/2015), 'County Review Letter Date' (6/26/2015), 'Date Training Completed' (empty), 'County Reviewer Name' (empty), 'County Review Outcome Entered Date' (6/19/2015), 'Supervisor Name' (empty), 'Supervisor Outcome Entered Date' (6/25/2015), and 'Training Letter Date' (empty). A large black arrow points downwards from this screen to the second screenshot. The bottom screenshot shows a 'Modify County Supervisor Review' dialog box. It has a 'Save' and 'Cancel' button at the top. The 'Supervisor Review' tab is selected. It contains fields for 'County Review Outcome' (Override), 'County Review Outcome Date' (6/19/2015), 'Supervisor Review Outcome' (dropdown menu), 'Supervisor Outcome Date' (date picker), 'County Review Letter Date' (date picker), 'Date Training Completed' (date picker), 'County Reviewer Name' (empty), 'County Review Outcome Entered Date' (6/19/2015), 'Supervisor Name' (empty), 'Supervisor Outcome Entered Date' (empty), and 'Training Letter Date' (empty). Below these fields is a large text area labeled 'Comments:' with a star symbol indicating it is a required field.

**Figure 4: Modify County Supervisor Review Screen**

If the County Review Outcome status is “Upheld”, the violation will be set to “active” and no further action is required. If the County Review Outcome is “Override”, a task will be sent to the Supervisor Overtime Violation Work Queue. The Supervisor will need to review the county/IHO user decision from the pop-up *Modify County Supervisor Review* screen. This is accessible by selecting the ‘Supervisor Review Link’ in the ‘County Review’ cluster on the *View Overtime Violations* screen (see Figure 4).

This screen contains the following user-generated fields:

- Supervisor Review Outcome: The Supervisor must select from a drop down menu for the review outcome. This field will initially display “Supervisor Review” before the Supervisor selects their outcome. This is a required field. The options are as follows:
  1. **Pending Approval** – Supervisor agrees that the violation should be overridden and the Violation Status will be updated to “Inactive”. Because the provider is not aware that a violation was triggered, there is no need for correspondence to be sent to the provider or recipient(s). When a Violation Status is set to “Inactive”, the Violation Count associated with that violation is not counted on the *View Overtime Violations* screen.
  2. **Pending Rejected** – Supervisor does not agree with the county user to override the violation. Therefore, the Violation Status is updated to

“Active” and the appropriate correspondence is issued to the provider and all of his/her associated recipients.

**Note:** After the Supervisor selects their outcome, the status will display “Pending Approval” or “Pending Rejection” and will change to “Approved” or “Rejected” the next day.

- **Supervisor Outcome Date:** The Supervisor enters this date when they select their Review Outcome. If no action is taken by the supervisor to review the violation, this date will be set by the system.
- **Date Training Completed:** The Supervisor will enter this date (received date) when the provider has completed the optional training and returned the self-certification form for the Second Violation only.
- **Comments:** The Supervisor will enter their User ID and comments regarding their selected review outcome such as why the violation was upheld or overridden. This field will allow up to 1000 characters total. This is a required field.

The *Modify County Supervisor Review* screen contains the following system generated fields relevant to the Supervisor Reviewer:

- **Supervisor Name:** The name of the user who sets the County Review Outcome.
- **Supervisor Outcome Entered Date:** The date when the Supervisor Review Outcome was keyed.
- **Training Letter Date:** The date on which the letter to the provider was sent confirming that the Second Violation was removed due to their reviewing the instructional materials and completion of the related self-certification form.

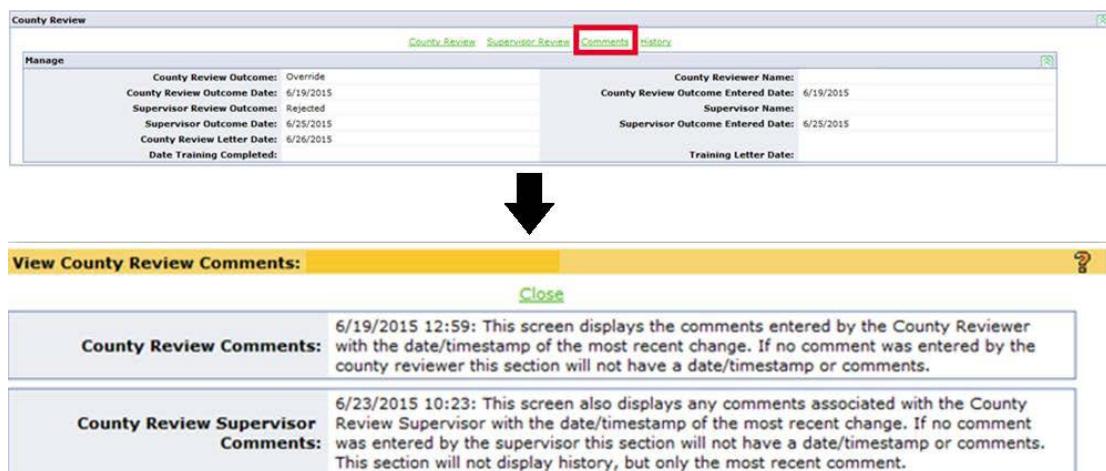
**Note:** Once a County Supervisor Review Outcome has been selected and saved, it can only be modified until the end of the business day. It cannot be modified the next day. Whatever decision is made by the county/IHO Supervisor, the violation process will continue based on that decision. The Supervisor has two (2) business days from the date the task is in their queue to review this outcome and may either “Approve” or “Reject” the overtime violation override.

If the Supervisor does not complete his/her task within the allotted timeframe, the system will automatically assign a status of “Inactive” to the violation and no letters will be issued to the provider and/or their recipient(s).

If the Supervisor does complete his/her task within the allotted timeframe, the system follows the procedure based on the review outcome, either assigning the status of “Inactive” if the Supervisor Approves the county review or “Active” if the Supervisor Rejects the county review.

### **View County Review Comments Screen**

A new screen, *View County Review Comments*, has been created to view comments made by a county/IHO user and/or supervisor. To view this screen, users select the ‘Comments’ link from within the “County Review” cluster of the *View Overtime Violations* screen (see Figure 5).



**Figure 5: View County Review Comments Screen**

### **County Review History Screen**

A new screen, *County Review History*, has been added to CMIPS to allow users to view the history related to the review process. To display this pop-up screen, the user selects the ‘History’ link from within the “County Review” cluster of the *View Overtime Violations* Screen (see Figure 6). The *County Review History* screen consists of information that is successfully saved from the following screens: Modify County Review, Modify County Supervisor Review



**Figure 6: County Review History Screen**

## Modified Screens

### **View Provider Details Screen**

To assist county/IHO users with managing violations in CMIPS, modifications have been made to existing screens. Two new clusters have been added to the *Provider Details* screen (see Figure 7) to permit county users to identify the current number of violations associated with a provider along with the next date it is possible for the provider to incur another violation.

The two new clusters are:

- **Overtime Maximums** – This cluster displays the provider's current weekly maximum amount of hours they may work before incurring a violation.
- **Overtime Violations** – This section contains two fields:
  - Current Provider Overtime Violation Count – Number of active violations associated with the provider.
  - **Next Possible Violation Date** – The next possible date the provider could incur a violation.

The screenshot shows the 'Provider Details' screen in a software application. The left sidebar has a tree view under 'PERSON' with nodes like Home, Cases, Provider (selected), Enrollment History, Provider Workweek Agreement, Travel Time, Overtime Violations, Benefit Deduction, CORI Details, Contact, Payroll, Timesheet, Identity, Notes, and CDPH Death Match. The main area has tabs: 'Enrollment' (selected), 'Appeals', 'General', 'Medi-Cal', 'Public Authority', 'Overtime Maximums', and 'Overtime Violations'. The 'Overtime Maximums' and 'Overtime Violations' tabs are highlighted with red boxes. The 'Enrollment' tab shows data for SOC 426 and SOC 846. The 'Appeals' tab shows appeal status. The 'General' tab shows initial hire date and SSN verification. The 'Medi-Cal' tab shows suspension status. The 'Public Authority' tab shows registration status. The 'Overtime Maximums' tab shows a weekly maximum of 66:00. The 'Overtime Violations' tab shows a count of 1 and a next possible violation date of 7/1/2015.

**Figure 7: View Provider Details Screen**

### **View Overtime Violations Screen**

The *Overtime Violations* screen has been modified to allow the Violation Number (count) to be selected to display the *View Overtime Violations* screen for a specific week. An additional modification includes removing the “Violation Count” field from this screen and adding it to the *View Overtime Violations* screen.

When the ‘Overtime Violations’ link is selected under the Provider folder from the Person Home left navigation, the *Overtime Violations* screen will display (see Figure 8). The default display will be the most recent 25 records, with default sort order by most recent Violation Date. The user may search for violations in prior months; the search parameter limits have been modified to allow one year search period increments.

The screenshot shows the 'Overtime Violations' screen within a larger application interface. On the left, there is a vertical navigation bar with sections like 'Home', 'Cases', 'Provider' (which is expanded to show 'Provider Details', 'Enrollment History', 'Provider Workweek Agreement', 'Travel Time', 'Overtime Violations', 'Benefit Deduction', 'CORI Details', 'Background', 'Contact', 'Payroll', 'Payment Search', 'Overpayment Recoveries', 'Weekly Provider Paid Hours', and 'Timesheet'). Below this is a 'MY WORKSPACE' section with 'PERSON' and 'PAYOUT' tabs. The main area is titled 'Overtime Violations' and contains a 'Violation Search' section with 'Service Period' fields for 'From Date' and 'To Date', and 'Search' and 'Reset' buttons. Below this is a 'Search Results' table with columns: Violation Number, Recipient Name, Case County, Program Type, Transaction Number, Transaction Type, Service Month, and Violation Date. One row is visible in the table, showing '10000000001', 'Case County', 'San Luis Obispo - 01 Adult Protective Services', 'IHS5', '4000000016', 'IHS5 Timesheet', '08/2015', and '8/16/2013'.

**Figure 8: Overtime Violations Screen**

### **Screen Modifications Specific to Violations Three and Four**

#### **Provider Details Screen**

The County Review and Supervisor Review process for Violations is the same for all Violations, including Violations Three and Four. However, there is an additional step in the Dispute process for Violations Three and Four, called the State Administrative Review (SAR) process. The entirety of the Dispute process including the State Administrative Review process will be discussed in a separate ACL.

The *Provider Details* screen (see Figure 9) displays when the user selects the ‘Provider Details’ link under the Provider folder from the Person Home left navigation. In an upcoming release (mid-July), two new fields will be added to the *Provider Details* screen in the ‘Overtime Violations’ cluster as follows:

- Ineligible Begin Date
- Ineligible End Date

These fields display the ineligibility period for the provider, dependent on which violation the provider has triggered (Violation Three or Violation Four) and when the review process is completed. The Ineligible Begin Date is automatically calculated by the system as 20 calendar days from the date on the violation letter sent to the provider and recipient informing them of the violation or dispute decision. The Ineligible End Date is then automatically calculated by the system from that Begin Date and based on

violation type (Third Violation-90 day period of ineligibility, Fourth Violation-365 day period of ineligibility). The violation notice to the recipient includes notification to the recipient to hire a new provider.

The screenshot shows the 'Provider Details' screen with the 'Enrollment' tab selected. On the left, a navigation tree includes 'Home', 'Cases', 'Provider' (selected), 'Provider Details' (selected), 'Provider History', 'Provider WorkWeek Agreement', 'Overtime Violations', 'Overtime Violation Exemption', 'Benefit Deduction', 'CORI Details', 'Form/Correspondence', 'Background', 'Contact', 'Payment', 'Overpayment Recoveries', 'Weekly Provider Paid Hours', 'Timesheet', 'Travel Claim', and 'Identity'. Below this are sections for 'MY INDIVIDUALS', 'PREVIOUS', 'CASES', 'SEARCH', 'IMAGE RATES', 'COURTNEY CONTRACTOR', 'HOMEWORKS', and 'RECENT ITEMS'. The main content area has tabs for 'Enrollment' (selected), 'Appeals', 'General', 'Med-Cal', 'Public Authority', 'Overtime Maximums', and 'Overtime Violations'. Under 'Enrollment', fields include 'Eligible: Yes', 'SOC 426 - Provider Enrollment: Yes', 'SOC 846 - Overtime Agreements: No', 'Provider Orientation: Yes', 'Effective Date: 3/30/2015', 'Updated By: [redacted]', 'Ineligible Reason: [redacted]', 'DOJ Background Check: Yes', 'SOC 816 - Provider Agreements: Yes', 'DOJ County: Riverside', 'Number of Active Cases: 1', and 'Last Updated: 4/13/2015 13:31'. Under 'Appeals', fields include 'Appeal Status Date: [redacted]' and 'Admin Hearing Date: [redacted]'. Under 'General', fields include 'Initial Hired Date: 7/1/2015' and 'SSN: [redacted]'. Under 'Med-Cal', fields include 'Suspended or Ineligible: No', 'Suspended or Ineligible Begin Date: [redacted]', and 'Suspended or Ineligible End Date: [redacted]'. Under 'Public Authority', fields include 'Public Authority Registered: No'. Under 'Overtime Maximums', fields include 'Weekly Maximum: 20:48'. Under 'Overtime Violations', fields include 'Current Provider Overtime Violation Count: 0', 'Next Possible Violation Date: 1/31/9999', and 'Ineligible Begin Date: [redacted]' (which is highlighted with a red box).

Figure 9: Provider Details Screen

### Additional Upcoming Modifications Related to the Third and Fourth Violations

In an upcoming release (mid-July), on the *Provider Details* screen the 'Re-enroll' and 'Reinstate' links will display due to the Provider being made ineligible as result of the Third and Fourth Violations. Re-enrolling and reinstating the Provider is not an automatic process; the user should manually re-enroll or reinstate the provider when the provider contacts the county requesting reinstatement.

The 'Reinstate' link will be displayed on the *Provider Details* screen for a provider who has been made ineligible for 90 days as a result of a Third Violation. Selecting this link will allow the user to reinstate the provider's eligibility status and restore all enrollment requirements.

The 'Re-enroll' link will be displayed on the *Provider Details* screen for a provider who has been made ineligible for a year as a result of a Fourth Violation. Selecting the 'Re-enroll' link will display the *Modify Enrollment* screen with the provider eligibility status set to 'Pending', with all enrollment requirements reset to be blank.

## **New Screens Related to Workweek Limitation Exemptions and Flexible Hours**

### **Overtime Violation Exemption Screen**

#### **Exemptions to Violations**

Exemptions from all violations are available for providers who meet certain criteria. Those criteria are set forth in ACL 16-07 and ACL 16-22. CDSS and DHCS staff will manage Exemption 1 for providers, no action is required in CMIPS by the county. Counties will be able to view the exemption screens in CMIPS but will not be able to edit the screens. The exemptions are:

1. The Live-In Family Care Provider Exemption
2. The Extraordinary Circumstances Exemption
3. WPCS Exemption

Providers who are identified as exempt are allowed to work a maximum of 360 hours per month.

When the ‘Overtime Violation Exemption’ link is selected from the Provider folder in the Person Home left navigation, the *Overtime Violation Exemption* screen will display (Figure 10). County users will not have access to the links on the *Overtime Violation Exemption* screen. The counties will be able to view the information on the *Overtime Violation Exemption* screen. The information that can be viewed is:

- Begin Date – The date the “Violation Exemption” starts
- End Date – The date the “Violation Exemption” ended
- Recipient Name – The recipient for which the provider is exempt from “Overtime Violations”
- Exemption Type – The type of “Exemption” set by CDSS or DHCS
- Created On - The “Created On” date of the “Violation Exemption”
- Last Updated - The “Last Updated” date the “Violation Exemption” was last updated
- Updated By - The “User Name” of the individual who created or last updated the record

Action	Begin Date	End Date	Recipient Name	Exemption Type	Created On	Last Updated	Updated By
<a href="#">View</a>   <a href="#">Edit</a>   <a href="#">History</a>   <a href="#">Inactivate</a>	2/11/2016	2/11/2016	Extraordinary Circumstance	Extraordinary Circumstance	2/11/2016 14:51	2/11/2016 14:51	test

**Figure 10: Overtime Violation Exemption Screen**

## Overtime Flexible Hours

The ability to record overtime flexible hours in the system will not be implemented until July 15<sup>th</sup>. From May 1 to July 15, while system functionality has not been implemented, if a recipient calls the county requesting flexible hours, the county user must make a new Note regarding this request in the Recipient Case Notes and in the Provider Person Notes for the Provider. To add a note for the Provider, the user selects the 'Notes' link accessible from the Person Home Left Navigation. If the provider incurs a violation after the flexible hours have been approved by the county/IHO, the county/IHO user shall rescind the violation in the violation review process, due to system functionality not yet implemented.

From May 1 to July 15, when a recipient requests flexible hours, the county must follow the County Dispute process, and select the appropriate approval or denial notice from the CDSS website and mail them to the recipient and provider(s). The forms for the flexible hours process are listed below:

SOC 2266 IHSS Recipient Approval of Exception to Exceed Weekly Hours
SOC 2266A IHSS Provider Approval of Exception to Exceed Weekly Hours
SOC 2267 IHSS Recipient Denial of Exception to Exceed Weekly Hours
SOC 2267A IHSS Provider Denial of Exception to Exceed Weekly Hours
SOC 2268 IHSS Recipient Approval of Alternate Schedule due to Recurring Need
SOC 2268A IHSS Provider Approval of Alternate Schedule due to Recurring Need
SOC 2269 IHSS Recipient Cancellation of Alternate Schedule due to Recurring Need
SOC 2269A IHSS Provider Cancellation of Alternate Schedule to Recurring Need

**Note:** The county shall retain a copy of the approval or denial letter for their record. Once Flexible Hours have been implemented in the system, the county user should follow the business process as described below.

With the implementation of recipient's maximum weekly hours, a recipient may have the ability to adjust their hours on a week-to-week basis but in certain circumstances must request county approval to adjust their hours. This is referred to as Flexible Hours in the system. The requests that require county approval for a recipient to adjust their hours will be where the adjustment causes additional overtime hours in a service month than would normally be worked by a provider, but will not affect the recipient's monthly authorized hours. Scenarios that will require a recipient requesting flexible hours to avoid their provider incurring a violation are as follows:

- Working more than 40 hours in a workweek for a recipient without the recipient getting approval from the county or IHO when that recipient's maximum weekly hours are 40 hours or less.

- Working more than a recipient's maximum weekly hours without that recipient getting approval from the county or IHO which caused him/her to work more overtime hours in the month than he/she normally would.

Recipient Flexible Hours may be requested when a recipient has a need which they know will cause a provider to exceed the recipient's Maximum Weekly Hours of which both the recipients and provider were notified in the SOC 2271 and the SOC 2271A.

If the Maximum Weekly Hours are less than forty (40) hours per week, they will not need to contact the county or IHO for approval unless the need will cause the hours worked in a workweek to exceed forty (40) hours.

When a recipient whose Maximum Weekly Hours exceed forty (40) hours per week determines they need to adjust their weekly hours and that adjustment would cause their provider to work more overtime than he/she normally would in a calendar month, they need to call the county or IHO and request county or IHO approval to adjust their hours as set forth in ACL 16-01. It should be noted that a provider can avoid the need to request county approval and avoid incurring a violation by working less hours in another week; this ensures the provider does not work more overtime than he/she normally would in a calendar month.

The county will have to create a new Recipient Flexible Hours record in the *Recipient Flexible Hours* screen and indicate approval or denial of the request to generate the appropriate forms indicating approval or denial to the provider and recipient. Direction for this process is included below.

**Note:** These forms are not system generated and will have to be selected from the CDSS website and mailed to the providers and recipients by the counties. These will be system generated in a future release (TBD).

There are two different types of exceptions which may be requested:

- **One-time:** This would be an instance where the recipient needs additional hours to be worked for one specific event. This request would be for a specific service month. When this type of request is approved, the county shall obtain the SOC 2266 from the CDSS website and mail it to the recipient. The county shall also obtain the SOC 2266A and mail it to all of the recipient's "Active" or "On-Leave" provider(s).

If the request is denied the county shall obtain the SOC 2267 from the CDSS website and mail it to the recipient. The county shall also obtain the SOC 2267A from the CDSS website and mail it to all of the recipient's "Active" or "On-Leave" provider(s). All providers receive notification so that all are aware of the available hours to be claimed.

- **On-Going:** This would be a need due to a monthly recurring event that requires an adjustment to the maximum weekly hours for a specified week of each

month. This request would be created and the alternate schedule would apply to multiple service months for this recurring event. If approved, the county shall obtain the approval letter SOC 2268 from the CDSS website and mail it to the recipient. The county shall also obtain the SOC 2268A from the CDSS website and mail it to all of the recipient's associated provider(s). All providers receive notification so that all are aware of the available hours to be claimed.

If the request is denied the county shall obtain the SOC 2267 from the CDSS website and mail it to the recipient. The county shall also obtain the SOC 2267A from the CDSS website and mail it to all of the recipient's providers. All providers receive notification so that all are aware of the available hours to be claimed.

**Note:** A flexible hours request can only be entered for a single calendar month. As a result, the following scenario can occur.

*A recipient calls during the first week of the calendar month and requests (2) extra hours of overtime for their provider. The county approves this request and creates a Flexible Hours record. The recipient then calls during the third week of the calendar month and requests an additional (3) hours extra overtime for their provider. There are two ways the county can handle this.*

**Resolution 1:** If the timesheet with the extra (2) overtime hours has not been processed and paid by the time the recipient requests an additional (3) hours, the county user can deactivate the previously keyed Flexible Hours record and create a new record with the combined (5) hours. This will allow the provider to work the combined extra 5 hours without any violation being issued in the calendar month.

**Resolution 2:** If the timesheet with the extra (2) hours has already been processed and paid by the time the recipient requests an extra (3) hours, the county user must make a Note in the Provider Person Notes and in the Recipient's Case notes that the recipient requested an extra (3) hours but an additional Flexible Hours record could not be created. Due to this inability to create an additional record, the timesheet with the extra (3) hours will trigger a violation. The county must then review the recipient case notes to determine if an Exception was requested by the recipient, if so, "Override" the violation during the county review process so that the provider does not incur a violation.

An on-going Recipient Flexible Hours segment is end dated when any of the following occur:

- The recipient case is reassessed and the Authorized to Purchase after Adjusted Hours increase or decrease. The Recipient Flexible Hours segment would be end dated by the system in this circumstance.

- The user end dates the Recipient Flexible Hours segment.

When the Recipient Flexible Hours segment is end dated for either of these reasons, the county must obtain the cancellation letter titled “In-Home Supportive Services Program Notice to Recipient Cancellation of Alternate Schedule Due To Recurring Event” (SOC 2269) from the CDSS website and mail it to the recipient. The county shall also obtain the “In-Home Supportive Services Program Notice to Provider Cancellation of Alternate Schedule Due To Recurring Event” (SOC 2269A) from the CDSS website and mail it to all the recipient’s provider(s). All providers receive notification so that all are aware of the available hours to be claimed.

When the recipient case is terminated the Flexible Hours segment will also be end dated, but no letters will be issued for this cancellation.

### **New Screens for Recipient Flexible Hours**

To allow the CMIPS users to manage Flexible Hours, a new link has been added to Overtime folder within the left navigation menu in Case Home. The ‘Recipient Flexible Hours’ link is used to create a one-time or ongoing flexible hours segment allowing the provider to work more than the recipient’s maximum weekly hours but without exceeding the recipient’s monthly authorized hours. When a recipient calls the county to request Flexible Hours, county and/or IHO staff must input the information related to the request in the *Create Recipient Flexible Hours* screen, detailed below. The user is able to indicate which program they are creating the Flexible Hours for, as detailed below. All screens related to this new process are reviewed in the following section.

#### **Recipient Flexible Hours Screen**

A new screen, *Recipient Flexible Hours*, will display when the ‘Recipient Flexible Hours’ link is selected from the Overtime folder accessible from the Case Home left navigation (see Figure 11). This screen will display Flexible Hours records specific to the recipient. The screen only displays ‘Pending’, ‘Active-Approved’ or ‘Active-Denied’ records. ‘Inactive’ records will not display.

The following fields are displayed on the screen:

- Month -The service month associated with the Flexible Hours request.
- Year -The year associated with the flexible hours request.
- Frequency -Frequency of the Flexible Hours request.
- Flexible Hours End Date -The End Date of the Flexible Hours record.
- Program Type -IHSS or WPCS program related to the request.
- Recipient Requested Hours -Number of Flexible Hours requested by the recipient.
- County Approved Hours -The number of hours approved by the county.
- Approved -Approval outcome.
- Need Not Unanticipated -Denial outcome

- Need Not Immediate - Denial outcome
- No Health or Safety Issues - Denial outcome
- Request Outcome Date - The status of the flexible hours request.
- Status -Status of the flexible hours request.

The links available to users on the *Recipient Flexible Hours* screen are:

- New - Displays the *Select Recipient Flexible Hours Information* screen
- View - Displays the *View Recipient Flexible Hours* screen
- Edit - Displays the *Modify Recipient Flexible Hours* screen
- History - Displays the *Recipient Flexible Hours History* screen
- Inactivate - Displays the *Inactivate Recipient Flexible Hours* screen

Action	Month	Year	Frequency	Requested Hours	Approved Hours	Approved	Need Not Unanticipated	Need Not Immediate	No Health or Safety Issue	Request Outcome Date
<a href="#">View</a>   <a href="#">Add</a>   <a href="#">History</a>   <a href="#">Inactivate</a>	November	2015	On-Going	05:00		No	Yes	Yes	Yes	11/1/2015

**Figure 11: Recipient Flexible Hours Screen**

### **Create Recipient Flexible Hours Screen**

When the “New” link is selected from the *Recipient Flexible Hours* screen, a new screen, *Create Recipient Flexible Hours Information* (Figure 12) will display. The *Create Recipient Flexible Hours Information* screen will be added to allow county staff to indicate which service month and frequency are associated to the recipient flexible hours request.

The following fields are displayed on the screen:

In the ‘Create Recipient Hours’ cluster-

- Month: The service month associated with the Flexible Hours request. This is required.
- Year: The year associated with the Flexible Hours request. This is required.
- Program Type: IHSS or WPCS program related to the request. This is required.
- Frequency: Frequency of the Flexible Hours request (One-Time or On-Going). This is required.
- Recipient Requested Hours: Number of Flexible Hours (additional overtime hours) requested by the recipient. This is required when Request Outcome is indicated.
- County Approved Hours: The number of hours approved by the county. This is required when the Request Outcome is indicated.
- Recipient Request Date: The date on which the recipient contacted the county with the Flexible Hours request. This is required.
- Request Outcome Date: The date the outcome of Approved or Rejected was entered by the user. This field is required when the Request Outcome is Approved or Denied.
- Flexible Hours End Date: The End Date of the Flexible Hours record. This is only required when the Frequency of the Flexible Hours is “On-Going” and the flexible hours should be discontinued.
- Outcome Letter Date: The system generated date the system generated the outcome letter.
- Cancellation Letter Date: The date the cancellation letter was printed. This is a system generated field.

In the ‘Request Outcome’ cluster:

- **Approved:** Checkbox for Approval of request.
- **Denied-Need not immediate:** Checkbox for Denial of Request.
- **Denied-Need not unanticipated:** Checkbox for Denial of Request.
- **Denied-No Health or Safety Issue:** Checkbox for Denial of Request.

**Note:** these fields are required only when the Request Outcome Date is populated.

In the ‘Comments’ cluster:

- Comments: A comment field allowing up to 1,000 characters. This is a non-required field.

The new links available to users on the *Create Recipient Flexible Hours Information* screen are:

- Save - Saves the data and displays the *Recipient Flexible Hours* screen
- Cancel - Cancels the action and displays the *Recipient Flexible Hours* screen

The screenshot shows a software interface titled "CASES" with a sidebar containing various menu items such as Home, Evidence, Household Evidence, Service Evidence, Program Evidence, Cost Evidence, Evidence History Search, Medi-Cal Eligibility, Contacts, Data Preparedness, Blind or Visually Impaired, Authorization, Modes & Hours, Programs, Overtime, Case Management, Case Maintenance, Administration, Quality Assurance, Scheduled Home Visit, Forms/Correspondence, Recent Changes, Notes, and Taxes. The main window is titled "Create Recipient Flexible Hours" and contains fields for Month (November), Program Type, Year (2015), Frequency, Flexible Hours Requested, Recipient Request Date, Request Outcome Date, Outcome Letter Date, Flexible Hours End Date, and Cancellation Letter Date. Below these fields is a "Request Outcome" section with checkboxes for Approved, Denied - Need not immediate, Denied - Need not unanticipated, and Denied - No Health or Safety Issue. At the bottom of the main window is a "Comments:" text area and "Save" and "Cancel" buttons. The top right corner of the main window has a "CMIPS II" logo.

Figure 12: *Create Recipient Flexible Hours Screen*

### **View Recipient Flexible Hours Screen**

When the “View” link on the *Recipient Flexible Hours* screen is selected, a new screen, *View Recipient Flexible Hours*, will display (Figure 13).

The same fields available on the *Create Recipient Flexible Hours* are on the *View Recipient Flexible Hours* screen.

The new links available to users on the *View Recipient Flexible Hours* screen are:

- Edit - Displays the *Modify Recipient Flexible Hours* screen
- Close - Displays the *Recipient Flexible Hours* screen

The screenshot shows the 'View Recipient Flexible Hours' window. At the top, there are 'Edit' and 'Close' buttons. The main area displays the following information:

Month: November	Program Type: IHSS	Year: 2015
Flexible Hours Requested: 05:00	Frequency: On-Going	Flexible Hours Approved: 05:00
Request Date: 11/1/2015	Outcome Date: 11/1/2015	Flexible Hours End Date: (empty)
Outcome Letter Date: 11/2/2015	Cancellation Letter Date: (empty)	

Below this, under 'Request Outcome', there are four status indicators:

Approved: Yes	Denied - Need not unanticipated: No
Denied - Need not immediate: No	Denied - No Health or Safety Issue: No

At the bottom of the screen, there is a 'Comments:' field containing the text 'Comments: View Recipient Flexible Hours'.

**Figure 13: View Recipient Flexible Hours Screen**

### **Modify Recipient Flexible Hours Screen**

When the “Edit” link on the *View Recipient Flexible Hours* screen is selected, a new screen, *Modify Recipient Flexible Hours* will display (Figure 14).

**Note:** Edits can be made until the Request Outcome has been determined and it is processed the next day. The Request Outcome date is the date counties will have to place on the manually generated and mailed outcome letters to the provider(s) and recipient. After the letters have been generated, the only fields which are editable are the “Flexible Hours End Date” and only when the Frequency is “On-Going”. The “Comments” section is always editable.

The new links available to users on the *Modify Recipient Flexible Hours* screen are:

- Save – When this is selected the data is saved and the *Create Recipient Flexible Hours* screen displays.
- Cancel - Cancels the action and displays the *Recipient Flexible Hours* screen.

The screenshot shows the 'Modify Recipient Flexible Hours' screen. At the top, there are fields for Month (November), Program Type (IHSS), Year (2015), and Frequency (On-Going). Below these are fields for Flexible Hours Requested (05:00), Recipient Request Date (11/1/2015), Request Outcome Date (11/1/2015), Outcome Letter Date (11/2/2015), Flexible Hours Approved (05:00), Flexible Hours End Date (empty), and Cancellation Letter Date (empty). A 'Request Outcome' section contains checkboxes for Approved (checked), Denied - Need not immediate (unchecked), and Denied - No Health or Safety Issue (unchecked). A 'Comments' section at the bottom contains a text area labeled 'Modify Recipient Flexible Hours' and ends with 'Save' and 'Cancel' buttons.

**Figure 14: Modify Recipient Flexible Hours Screen**

### **Recipient Flexible Hours History Screen**

When the “History” link is selected from the *View Recipient Flexible Hours* screen, a new screen, *Recipient Flexible Hours History* will display (Figure 15).

New fields that display on this screen that do not display on the *Recipient Flexible Hours* screen are:

- Create On: Date the record was created.
- Last Updated By: Date the record was last updated.
- Updated By: Name of the user who updated the record.

The new link available to users on the *Recipient Flexible Hours History* screen is:

- Close – Closes the screen and displays the view.

Month	Year	Frequency	End Date	Program Type	Requested Hours	Approved Hours	Recipient Request Date	Approved	Need Not Unanticipated	Need not immediate	No Health or Safety Issue	Request Outcome Date	Created On	Updated Date	Updated By
November	2015	On-Going	12019999 IHSS		05:00	05:00	11/1/2015	Yes	No	No	No	11/1/2015	11/1/2015	11/1/2015	

**Figure 15: Recipient Flexible Hours History Screen**

### **Inactivate Recipient Flexible Hours Screen**

The county would deactivate a Recipient Flexible Hours record due to recipient request, or when the current Recipient Flexible Hours record is no longer valid.

When the “Inactivate” link is selected from the *Recipient Flexible Hours* screen for a specific record, a new screen, *Inactivate Recipient Flexible Hours* will display (see Figure 16). When the “Yes” link is selected on this screen the record will be set to “Inactive” and will no longer display on the *Recipient Flexible Hours* screen. The new links available to users on the *Inactivate Recipient Flexible Hours* screen are:

- Yes - Inactivates the current record and displays the *Recipient Flexible Hours* screen where the record will no longer display
- No - Cancels the action and returns the user to the *Recipient Flexible Hours* screen



**Figure 16: Inactivate Recipient Flexible Hours Screen**

## Forms and Correspondence for Providers

### New Screens

A new screen specific to providers has been created, called the *Forms* screen. When the “Forms/Correspondence” link is selected from the Person left navigation menu, the *Forms* screen will display (see Figure 17). This serves as the same function as in the Case Home navigation. This screen contains the following fields:

- Search – Searches for previously printed forms or correspondence for the user entered date range. Maximum range is three (3) month increments.
- Reset – Resets the “From Date” and “To Date” to blank
- Previous – Displays the previous 50 forms records matching the specified criteria. It is only displayed when there are previous records to be displayed
- Next – Displays the next group of forms records (up to 50) matching the specified criteria. It is only displayed when there are additional records to be displayed
- New – Displays the Create Form screen
- View – Displays the View Form screen
- Edit – Displays the Modify and Inactive screen
- Print – Opens Adobe Acrobat and displays the associated PDF for the selected record

Action	Name	Language	Status	Date Time
<a href="#">View</a> <a href="#">Edit</a> <a href="#">Print</a>	SOC 2270A - Failure to Complete Workweek and Travel Agreement	English	Printed	2/9/2016 16:37

Figure 17: **Forms Screen**

### **Create Form Screen**

When the “New” link is selected on the *Forms* screen, a new screen, *Create Form* screen displays (see Figure 18). The system generated Correspondent Name field will display the name of the provider and the Language field defaults to English; the user may select one of the threshold languages from the dropdown menu. The Language field is required. If a specific form is not available in the selected threshold language, the form will print in English. The user must select a print option from the dropdown in the Print field. The new links available to users on the *Create Form* screen are:

- Save – Saves the selected forms information and sends to the designated print queue
- Reset – The information reverts back to the default data seen upon entry to this screen
- Cancel – Cancels the action and displays the *Forms* screen

The screenshot shows the 'Create Form' window within the 'CASE WORKER APPLICATION' interface. The left sidebar lists various modules under 'PERSON': Home, Cases, Provider (with sub-options like Provider Details, Enrollment History, Workweek Agreement, Travel Time, Overtime Violations, Overtime Violation Exemption, Benefit Deduction, CORI Details), Forms/Correspondence (with sub-options like Background, Contact, Payroll, Timesheet, Identity), and CMIPS II. The main 'Create Form' window has a yellow header bar with 'Save', 'Reset', and 'Cancel' buttons. Below this, there's a 'Correspondent Name:' field with a dropdown arrow and a note '\* Language: English'. To the right of this is a 'Print:' dropdown set to 'Print in Nightly Batch'. A 'Select' tab is active, showing a list of forms: 'Form Name' and 'SOC 2270A - Failure to Complete Workweek and Travel Agreement'. At the bottom of the window are 'Save', 'Reset', and 'Cancel' buttons.

**Figure 18: Create Form Screen**

### **View Form Screen**

When the “View” link is selected from the *Forms* screen, a new screen, the *View Form* will display for the selected form (see Figure 19).

The fields that display on the screen are:

- Correspondent Name: Name of the person associated with the form or correspondence.
- Language: Language the form was printed.
- Status: Print status.
- Status Date: Date associated with the status.
- Mark as Inactivate/Not Mailed: Indicates whether or not the form was inactivated or was marked as not mailed.
- Form Name: Displays the hyperlinked .pdf of the printed form when the status is Printed. Will not display if the status is Pending or Inactivated.
- Comments: Displays previously entered comments for this form or correspondence.

The new links available to users on the *View Form* screen are:

- Edit – Displays the *Modify Form* screen
- Close – Closes the screen and displays the *Forms List* screen
- Form Name - Displays the previously printed form or correspondence in PDF format. Only displays when the status is “Printed”

The screenshot shows the CMIPS II Case Worker Application interface. The top navigation bar includes 'CASE WORKER APPLICATION', 'BUILD VERSION', and the 'CMIPS II' logo. On the left, a vertical menu under 'PERSON' lists various modules: Home, Cases, Provider (with sub-options like Provider Details, Enrollment History, Provider Workweek Agreement, Travel Time, Overtime Violations, Overtime Violation Exemption, Benefit Deduction, CORI Details, and Form/Correspondence), Background, Contact, and Payroll. The 'Form/Correspondence' option is currently selected. The main content area has a yellow header bar with the text 'View Form:'. Below this is a section titled 'Correspondent Details' containing fields for 'Correspondent Name', 'Language: English', 'Status: Printed', 'Status Date: 1/1/2016', and 'Mark As Inactivate/Not Mailed: No'. Further down, there is a 'Form Name' field containing a link to a PDF file ('S00-2222A - Failure to Complete Workweek and Travel Agreement.pdf') and a 'Comments:' field. At the bottom right of the content area are 'Edit' and 'Close' buttons.

**Figure 19: View Form Screen**

### **Modify and Inactivate Form Screen**

When the “Edit” link is selected from the *View Forms* screen, a new screen, *Modify and Inactivate Form* (see Figure 20) will display. The *Modify and Inactivate Form* screen is also used to change the form status or add comments associated with the specific form or correspondence.

The same fields on the *View Form* screen are on the *Modify and Inactivate Form* screen. The new links available to users on the *Modify and Inactivate Form* screen are:

- Save – This action allows the user to save the changes to the screen
- Cancel – Cancels the action and displays the Forms/Correspondence screen

The screenshot shows the 'Case Worker Application' interface. The left sidebar has a 'PERSON' section with various menu items like Home, Cases, Provider, Forms/Correspondence, Background, Contact, Payroll, Timesheet, and Identity. The 'Forms/Correspondence' item is currently selected. The main window title is 'Modify and Inactivate Form'. It contains a 'Correspondent Details' section with fields for Correspondent Name (set to 'Printed'), Language (English), Status Date (1/1/2016), and a checkbox for 'Mark As Inactivate/Not Mailed'. Below this is a section for 'Form Name' with the value 'SOC 2270A - Failure to Complete Workweek and Travel Agreement'. At the bottom is a 'Comments' area with a large text input field and 'Save' and 'Cancel' buttons. The top right corner of the main window shows the 'CMIPS II' logo.

**Figure 20: *Modify and Inactivate Form* Screen**

## ERROR MESSAGES

The following are new error messages related to all new and modified screens presented in this ACL, organized by screen.

### Error Messages for the Modify County Review Screen

Condition	Error Message
When a user enters a County Review Outcome Date that is prior to the Violation Date and selects the 'Save' link, the following message will display:	"County Review Outcome Date may not be a date prior to the Violation Date."
When a user enters a County Review Outcome Date that is after the current date (future date) and selects the 'Save' link, the following message will display:	"County Review Outcome Date may not be a future date."
When a WPCS user has updated a Modify County Review screen associated to an IHSS Violation and selects the 'Save' link, the following message will display:	"Action not allowed for a WPCS user because this violation is associated to the IHSS Program."
When a IHSS user has updated a Modify County Review screen associated to a WPCS Violation and selects the 'Save' link, the following message will display:	"Action not allowed for an IHSS user because this violation is associated to the WPCS program."
When a user selects a review violation outcome other than Pending Review and does not enter an outcome date and selects the 'Save' link, the following message will display:	"County Review Outcome Date is required when County Review Outcome is other than Pending Review."
When a user enters a self-certification date in the Date Training Completed field for a first Violation (Count 1) and selects the 'Save' link, the following message will display:	"Date Training Completed not allowed for Violation Count 1"
When a user enters a self-certification date in the Date Training Completed field that is after the current date and selects the 'Save' link, the following message will display:	"Date Training Completed may not be a future date."
When a user enters a self-certification date in the Date Training Completed field on a new violation when training was indicated on another violation and selects 'Save', the following message will display:	"Provider has already taken training and is therefore not eligible for additional training."
When a user enters a self-certification date in the Date Training Completed field on a second violation (Violation Count 2) and the County Review Letter Date is blank or has a date that is after the Date Training Completed date and the 'Save' link is selected, the following message will display:	"Date Training Completed may not be before the County Review Letter date."

When a user enters a self-certification date in the Date Training Completed field that is more than 21 days past the County Review Letter date and the 'Save' link is selected, the following message will display:	"Date Training Completed may not be more than [XX] calendar days after the County Review Letter Date [MM/DD/YYYY]."
When a user enters a comment that exceeds 1000 characters on the Modify County Review screen and selects the 'Save' link, the following message will display:	"The value entered is too long [XXXX] - maximum allowed is '1,000'"  [XXXX] = Number of entered in field
When a user enters a comment that contains a special character on the Modify County Review screen and selects the 'Save' link, the following message will display:	"Comment field allows only alpha or numeric characters, no special characters."

### Error Messages for the Modify County Supervisor Review Screen

When a WPCS supervisor has updated a Modify County Supervisor Review screen associated to an IHSS Violation and selects the 'Save' link, the following message will display:	"Action not allowed for a WPCS user because this violation is associated to the IHSS Program."
When a IHSS supervisor has updated a Modify County Supervisor Review screen associated to a WPCS Violation and selects the 'Save' link, the following message will display:	"Action not allowed for an IHSS user because this violation is associated to the WPCS program."
When a supervisor enters a self-certification date in the Date Training Completed field and the violation is not Count 2 and the 'Save' link is selected, the following message will display:	"Date Training Completed allowed only for Violation Count 2."
When a supervisor enters a self-certification date in the Date Training Completed field that is after the current date and the 'Save' link is selected, the following message will display:	"Date Training Completed may not be a future date."
When a supervisor enters a self-certification date in the Date Training Completed field on a second violation (Violation Count 2) and the County Review Letter Date is blank or has a date that is after the Date Training Completed date and the 'Save' link is selected, the following message will display:	"Date Training Completed may not be before the County Review Letter date."
When a supervisor enters a self-certification date in the Date Training Completed field on a violation when training was indicated on a another violation and selects 'Save', the following message will display:	"Provider has already taken training and is therefore not eligible for additional training."

When a supervisor enters a Supervisor Outcome Date and the Supervisor Outcome field displays Supervisor Review and the 'Save' link is selected, the following message will display:	"Supervisor Outcome is required when the Supervisor Outcome Date field is indicated."
When a supervisor selects a review violation outcome other than Supervisor Review and does not enter an outcome date and selects the 'Save' link, the following message will display:	"Supervisor Outcome Date field is required when the Supervisor Outcome is other than Supervisor Review."
When a supervisor enters a date in the Supervisor Outcome Date field that is a date prior to the County Review Outcome Date and the 'Save' link is selected, the following message will display:	"Supervisor Outcome Date may not be before the County Review Outcome Date."
When a supervisor enters a date in the Supervisor Outcome D field that is date after the current date (future date) and the 'Save' link is selected, the following message will display:	"Supervisor Outcome Date may not be a future date."
When a supervisor enters a self-certification date in the Date Training Completed field that is more than 21 days past the County Review Letter date and the 'Save' link is selected, the following message will display:	"Date Training Completed may not be more than [XX] calendar days after the County Review Letter Date [MM/DD/YYYY]."
When a user enters a comment that exceeds 1000 characters on the Modify County Supervisor Review screen and selects the 'Save' link, the following message will display:	<p>"The value entered is too long [XXXX] - maximum allowed is '1,000'"</p> <p>[XXXX] = Number of entered in</p>
When a user enters a comment that contains a special character on the Modify County Supervisor Review screen and selects the 'Save' link, the following message will display:	"Comment field allows only alpha or numeric characters, no special characters."

### Error Messages for the Modify County Supervisor Review Screen

When a supervisor selects the 'Save' link and the County Review Outcome is not Override, the following message will display:	"Screen action not allowed when County Review Outcome is not "Override".
When a supervisor enters upheld in the Outcome field but does not enter an Outcome Reason of upheld and selects the 'Save' link, the following message will display:	"Outcome and Outcome Reason both indicated Upheld."
When a supervisor enters override in the Outcome field but does not enter an Outcome Reason of override and selects the 'Save' link, the following message will display:	"Outcome and Outcome Reason both indicated Override."

<p>When a supervisor selects the 'Save' link on Modify County Supervisor Review screen for a violation and the current date is 16 days after the County Review Letter Date, the following message will display:</p>	<p>"Action not allowed as timeframe for data entry (MM/DD/YYYY*) has past."</p> <p>*MM/DD/YYYY will be one day following County Review Letter Date plus an additional 15 calendar days.</p>
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### Error Messages for the Create Recipient Flexible Hours Screen

<u>Condition</u>	<u>Error Message</u>
<p>When a WPCS user has updated a Create Recipient Flexible Hours screen associated to IHSS hours and the 'Save' link is selected, the following message will display:</p>	<p>"Action not allowed for a WPCS user when the Program Type is IHSS."</p>
<p>When an IHSS user has updated a Create Recipient Flexible Hours screen associated to WPCS hours and the 'Save' link is selected, the following message will display:</p>	<p>"Action not allowed for an IHSS user when the Program Type is WPCS."</p>
<p>When a user enters hours in the Approved Hours field that is more than the hours in the Requested Hours field and the 'Save' link is selected, the following message will display:</p>	<p>"Approved Hours cannot be greater than the Requested Hours."</p>
<p>When a user enters a comment that contains a special character on the Create Recipient Flexible Hours screen and selects the 'Save' link, the following message will display:</p>	<p>"Comment field allows only alpha or numeric characters, no special characters."</p>
<p>When a user enters a date in the Hours End Date field and the Frequency field value is 'One-Time' and the 'Save' link is selected, the following message will display:</p>	<p>"Flexible Hours End Date is not allowed."</p>
<p>When a user enters a date in the Hours End Date field and the Frequency field value is 'On-Going' and the 'Save' link is selected, the following message will display:</p>	<p>"Flexible Hours End Date is not allowed."</p>
<p>When a user enters a Month and Year that is more than three months in the past or three months in the future of the current date for an approval or any denial reasons and the 'Save' link is selected, the following message will display:</p>	<p>"Flexible Hours may not be Approved or Denied for a service month more than three months in the future or the</p>
<p>When a user selects the approval field or any of the denied reason fields but does not enter an outcome date and the 'Save' link is selected, the following message will display:</p>	<p>"Outcome Date is required when the Outcome is Approved or any of the Denied indications."</p>

When a user enters an outcome date but does not select an outcome (Approved or any Denied Reason) and the 'Save' link is selected, the following message will display:	"Outcome of Approved or any of the Denied indications is required when the Outcome Date is indicated."
When a user checks both an Approved Outcome and any of the Denied Outcome reasons and the 'Save' link is selected, the following message will display:	"Request Outcome must be indicated as either Approved or Denied but not both."
When a user enters a comment that exceeds 1000 characters on the Create Recipient Flexible Hours screen and selects the 'Save' link, the following message will display:	"The value entered is too long [XXXX] - maximum allowed is '1,000'"
When an WPCS user has updated a Create Recipient Flexible Hours screen associated to IHSS hours and the 'Save' link is selected, the following message will display:	"Action not allowed for a WPCS user when the Program Type is IHSS."
When an IHSS user has updated a Create Recipient Flexible Hours screen associated to WPCS hours and the 'Save' link is selected, the following message will display:	"Action not allowed for an IHSS user when the Program Type is WPCS."
When a user updates a new Create Recipient Flexible Hours screen without end dating existing Flexible Hours segment and the 'Save' link is selected, the following message will display:	"Previous Flexible Hours segment exists and must be End Dated before a new record can be created."
When a user enters a Flexible Hours Month and Year that is prior to May 1, 2016 and the 'Save' link is selected, the following message will display:	"Flexible Hours Month and Year may not be before MONTH YYYY."
When a user enters County Approved Hours that are greater than the case flexible hours limit and the 'Save' link is selected, the following message will display:	"County Approved Flexible Hours may not exceed [case flexible hours limit]."
When a user enters a Month and Year on the Create Flexible Hours screen that is more than 1 month prior to the current date and the 'Save' link is selected, the following message will display:	"Flexible Hours may not be requested more than [currently set at 1] month prior to the current month."

## Error Messages for the Modify Recipient Flexible Hours Screen

When an WPCS user has updated a Modify Recipient Flexible Hours screen associated to IHSS hours and the 'Save' link is selected, the following message will display:	“Action not allowed for a WPCS user when the Program Type is IHSS.”
When an IHSS user has updated a Modify Recipient Flexible Hours screen associated to WPCS hours and the 'Save' link is selected, the following message will display:	“Action not allowed for an IHSS user when the Program Type is WPCS.”
When a user enters hours in the Approved Hours field that is more than the hours in the Requested Hours field and the 'Save' link is selected, the following message will display:	“Approved Hours cannot be greater than the Requested Hours.”
When a user enters a comment that contains a special character on the Modify Recipient Flexible Hours screen and selects the 'Save' link, the following message will display:	“Comment field allows only alpha or numeric characters, no special characters.”
When a user enters a date in the Hours End Date field and the Frequency field value is 'One-Time' and the 'Save' link is selected, the following message will display:	“Flexible Hours End Date is not allowed.”
When a user enters a date in the Hours End Date field and the Frequency is 'On-Going', the Request Outcome is Denied and the 'Save' link is selected, the following message will display:	“Flexible Hours End Date is not allowed.”
When a user enters a date in the Hours End Date field and the Frequency is 'On-Going', the Request Outcome is Approved, the current date is on or prior to the Outcome Letter date and the 'Save' link is selected, the following message will display:	“Flexible Hours End Date may not be assigned prior to the generation of the Outcome Letter Date [MM/DD/YYYY].”  MM/DD/YYYY – Outcome Letter Date
When a user enters a Month and Year that is more than three months in the past or three months in the future of the current date for an approval or any denial reasons and the 'Save' link is selected, the following message will display:	“Flexible Hours may not be Approved or Denied for a service month more than three months in the future or the past.”
When a user selects the approval field or any of the denied reason fields but does not enter an outcome date and the 'Save' link is selected, the following message will display:	“Outcome Date is required when the Outcome is Approved or any of the Denied indications.”

When a user enters an outcome date but does not select an outcome (Approved or any Denied Reason) and the 'Save' link is selected, the following message will display:	"An Outcome of Approved or any of the Denied indications is required when the Outcome Date is indicated."
When a user checks both an Approved Outcome and any of the Denied Outcome reasons and the 'Save' link is selected, the following message will display:	"Request Outcome must be indicated as either Approved or Denied but not both."
When a user enters a comment that exceeds 1000 characters on the Modify Recipient Flexible Hours screen and selects the 'Save' link, the following message will display:	"The value entered is too long [XXXX] - maximum allowed is '1,000'"  [XXXX] = Number of entered
When a user selects Yes on the Inactivate Recipient Flexible Hours confirmation screen for a service month that has paid overtime hours, the following message displays:	"Inactivate action not allowed when Flexible Hours have been paid."
When a user enters a Month and Year on the Create Flexible Hours screen that has zero (0.00) IHSS hours authorized to purchase (adjusted) and the 'Save' link is selected, the following message will display:	"Flexible Hours request is not allowed until IHSS Hours are authorized for the Month and Year being requested."
When a user enters a Month and Year on the Create Flexible Hours screen that has zero (0.00) WPCS hours authorized to purchase (adjusted) and the 'Save' link is selected, the following message will display:	"Flexible Hours request is not allowed until WPCS Hours are approved for the Month and Year being requested."
When a user enters a Month and Year on the Create Flexible Hours screen and the case was in pending or terminated status for the entire month indicated and the 'Save' link was selected, the following message will display:	"Flexible Hours may not be added for a period when the recipient case is in Pending or Terminated Status."

### Error Messages for the Modify Flexible Hours Screen

When an WPCS user has updated a Modify Flexible Hours screen associated to IHSS hours and the 'Save' link is selected, the following message will display:	"Action not allowed for a WPCS user when the Program Type is IHSS."
When an IHSS user has updated a Modify Flexible Hours screen associated to WPCS hours and the 'Save' link is selected, the following message will display:	"Action not allowed for an IHSS user when the Program Type is WPCS."
When a user enters a Flexible Hours Month and Year that is prior to May 1, 2016 and the 'Save' link is selected, the following message will display:	"Flexible Hours Month and Year may not be before MONTH YYYY."
When a user enters County Approved Hours that are greater than the case flexible hours limit and the 'Save' link is selected, the following message will display:	"County Approved Flexible Hours may not exceed [case flexible hours limit]."
When a user enters a Month and Year on the Modify Flexible Hours screen that is more than 1 month prior to the current date and the 'Save' link is selected, the following message will display:	"Flexible Hours may not be requested more than [currently set at 1] month prior to the current month."
When a user enters a Month and Year on the Modify Flexible Hours screen that has zero (0.00) IHSS hours authorized to purchase (adjusted) and the 'Save' link is selected, the following message will display:	"Flexible Hours request is not allowed until IHSS Hours are authorized for the Month and Year being requested."
When a user enters a Month and Year on the Create Flexible Hours screen that has zero (0.00) WPCS hours authorized to purchase (adjusted) and the 'Save' link is selected, the following message will display:	"Flexible Hours request is not allowed until WPCS Hours are approved for the Month and Year being requested."

If you have questions or comments regarding this ACL, 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](mailto:CMIPSII-Requests@dss.ca.gov).

Sincerely,

***Original Signed By:***

EILEEN CARROLL  
Deputy Director  
Adult Programs Division

Attachment:

c: CWDA