

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

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



Date XX, 2017

ALL- COUNTY INFORMATION NOTICE NO. I-XX-17

TO: ALL- COUNTY WELFARE DIRECTORS

ALL IHSS PROGRAM MANAGERS

REASON	FOR	THIS	TRANSMIT	IAL

[ ] State Law Change

[ ] Federal Law or Regulation

Change
[ ] Court Order

[ ] Clarification Requested by

One or More Counties

[x] Initiated by CDSS

SUBJECT: IN-HOME SUPPORTIVE SERVICES (IHSS) ADVANCE PAY TIMESHEET

RECONCILIATION REQUIREMENTS AND INFORMATIONAL

MATERIALS

REFERENCE: WELFARE AND INSTITUTIONS CODE (WIC) §\$12300(a),12304;

MANUAL OF POLICIES AND PROCEDURES (MPP) §§30-767.133(b),

30-768.213;

ALL-COUNTY LETTER (ACL) No.14-68, DATED October 3, 2014.

#### **PURPOSE**

The purpose of this All-County Information Notice is to remind counties of the IHSS Advance Pay timesheet reconciliation requirements and provide counties with informational materials to assist in explaining Advance Pay requirements to eligible individuals.

### **BACKGROUND**

Advance Pay is an option available only to Severely Impaired IHSS recipients pursuant to WIC §12300(a) in the IHSS Residual (IHSS-R), IHSS Plus Option (IPO), and Community First Choice Option (CFCO) programs. The Advance Pay option allows recipients to receive an advanced payment for their monthly authorized IHSS services and pay their provider(s) directly for the provision of their authorized services per WIC §12304.

For individuals to be eligible for Advance Pay they must be severely impaired pursuant to WIC §§ 12303.4 and 12304, capable of handling their financial and legal affairs (or have assigned an authorized representative), and the amount advanced cannot exceed the amount needed to pay for authorized IHSS hours. Recipients receiving Advance Pay may not use their payment for anything other than the purchase of authorized IHSS, must pay their provider(s) timely and must ensure their providers submit reconciling timesheets within 45 days from the date each monthly IHSS advance payment is issued. Counties should inform Advance Pay recipients of their responsibilities and adhere to the 45-day timesheet reconciliation requirements per MPP §30-768.213.

#### ADVANCE PAY TIMESHEET RECONCILIATION

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Recipients enrolled in the Advance Pay option must ensure reconciling timesheets are submitted within 45 days from the issuance date of advance payment. If after 45 days from the date of payment issuance the payment remains unreconciled, the county should establish an overpayment to collect any unreconciled amount per MPP §30-768.213. If timesheets are not received by the 90<sup>th</sup> day from the date of payment issuance, counties should change a recipient's payment method from Advance Pay to payment in arrears as allowed by MPP §30-767.133(b). Additionally, it is recommended that timesheets are submitted at the end of each pay period, twice per month, to ensure timely reconciliation.

#### ADVANCE PAY INFORMATIONAL MATERIALS

To assist in preventing unreconciled Advance Pay, CDSS has developed several informational materials for use by the counties. These include an Advance Pay fact sheet and two sample recipient informational letters.

The Advance Pay fact sheet describes Advance Pay eligibility and requirements and can be used to train county staff as well as to explain the Advance Pay process to eligible IHSS recipients. The intent is to give recipients a clear understanding of all the requirements involved.

The two sample informational letters include one letter that explains the timesheet reconciliation process which CDSS suggests counties send to all recipients receiving Advance Pay. The second letter requests that recipients with outstanding timesheets (past 45 days), submit timesheets within 10 days or their payment method may be changed from Advance Pay to payment in arrears.

For questions regarding this ACIN, please contact the Adult Programs Policy and Quality Assurance Branch, Program Integrity Unit at (916) 651-0554 or via e-mail at <a href="mailto:ihss-pi@dss.ca.gov">ihss-pi@dss.ca.gov</a>.

Sincerely,

## Original Document Signed By:

DEBBI THOMSON, Deputy Director Adult Programs Division

Enclosure

c: CWDA