

County of Ventura Human Services Agency

In-Home Supportive Services (IHSS) Program

IHSS Advance Pay Frequently Asked Questions

1. What is IHSS Advance Pay?

Advance Pay is an option available to some IHSS consumers that allows consumers to receive an advanced payment for his/her monthly IHSS services to pay the provider(s) directly for their service (Welfare and Institutions Code (WIC) Section 12304).

2. Who is eligible for IHSS Advance Pay?

- Consumers who are severely impaired (authorized 20 or more hours per week for IHSS personal care; preparation of meals; meal cleanup when preparation of meals and feeding are required; and paramedical services);
 - Consumer is capable of handling his or her financial and legal affairs; and
 - The amount advanced cannot exceed the amount needed to pay for authorized IHSS service hours.
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3. What are the Consumer Requirements for IHSS Advance Pay?

- A Consumer may not use his or her payment for anything other than the purchase of authorized IHSS services;
 - Consumers must submit reconciled timesheets;
 - Consumers must pay their provider(s) timely.
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4. What are the Advance Pay Requirements?

- It is the responsibility of the Advance Pay recipient, legal guardian or conservator, to review and approve their provider's completed timesheets at the end of each pay period as proof that the Advance Payments were used to pay for authorized IHSS services received. (MPP Section 30-769.737).
 - Timesheets require recipient approval, with the recipient validating the hours worked by the provider. For purposes of timesheet processing, the provider submits the timesheets as required via the Electronic Service Portal (ESP) or the Telephonic Timesheet System (TTS).
 - Counties have the authority to remove a consumer's Advance Pay if the consumer does not adhere to all IHSS Advance Pay requirements (MPP Section 30-767.133).
 - This regulation helps to ensure that recipients are paying their providers appropriately.
 - The provider must be an eligible IHSS provider
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5. What is the Community First Choice Option (CFCO)?

Code of Federal Regulations (CFR) Section 441.545(b)(2) allows for advance payment of direct cash to individuals in the CFCO Program. The CFCO program allows the AP recipient to further exercise their self-direction by making a direct payment to their provider. CFCO also allows AP recipients to exercise as much control as desired to select, train, supervise, schedule, determine duties and fire an attendant care provider. This does not, however, preclude the State of California to require that In-Home Supportive Services Program providers undergo an enrollment process to be an

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eligible IHSS provider. The requirement for criminal background checks, which is mandated by statute, Section 12305.86, is specified in the State Plan Amendment for CFCO.

6. What is the Rate of Compensation for Advance Pay Cases?

The base rate paid by the recipient to the provider shall not be less than the base rate used by the county for the authorized IHSS payment. Effective June 1, 2020, the County of Ventura Provider Compensation Rate is \$13.64/hour (subject to change).

7. What type of provider can the consumer hire when opting for advanced payments?

The consumer may hire a Public Authority Registry and/or Non-Registry (family based) provider. However, any provider hired is required to be enrolled as an IHSS Provider to be paid through the IHSS Advance Pay program.

8. When consumer hires an individual as their new provider, do they have to be enrolled and approved as IHSS provider before work start date?

- The IHSS provider can start working for the consumer as of the date agreed upon and listed on the IHSS Program Recipient Designation of Provider form (SOC 426A) signed by consumer.
- Provider cannot be paid federal and/or state money for providing services until completion of all the provider enrollment requirements. These requirements include completing, signing, and returning (in person) the Provider Enrollment Form (SOC 426), submitting fingerprints and being cleared of disqualifying crimes through a criminal background check, completing a provider orientation, and returning a signed Provider Enrollment Agreement (SOC 846).
- The county will send a notice when the person that the consumer has chosen does or does not complete the provider enrollment requirements or if he/she/they are not eligible to be an IHSS provider.
- If consumer chooses to have this person provide services before he/she/they are enrolled as an IHSS provider, and the county sends a notice that he/she/they are not eligible to be an IHSS provider, the consumer is responsible for paying with own money for the services that he/she/they provided before he/she/they was determined ineligible to be a provider and for any services he/she/they provide after the county notifies consumer of provider ineligibility.

9. Can consumer utilize an agency to hire a provider? If yes, who is responsible to pay difference in compensation rate?

Consumers may obtain names of potential providers from an agency; however, all providers are required to go through the IHSS Provider Enrollment Process (if not already an IHSS enrolled provider) to be paid by IHSS, including Advance Pay. The provider is paid the current IHSS compensation rate. A consumer may choose to pay a provider with own money, excluding Advance Pay funds, for service hours beyond the authorized IHSS monthly hours and/or payment above the current IHSS pay rate.

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10. What is the responsibility of the consumer when their provider quits or when they hire another provider?

- Consumer must immediately notify the Public Authority program of any changes in provider services.
- A new hire must complete all provider enrollment requirements thoroughly and promptly (*within 90-days from the Provider's Orientation Attendance Date*) with the Public Authority Program to be eligible for payment.

11. What happens if the Advance-Pay Timesheets and/or hours are not received by the IHSS office, or not fully reconciled by the 45th day from the date the Advance Payment was issued?

An overpayment will occur and the consumer will be responsible to pay for the full or partial unreconciled amount (MPP Section 30-768.213). This may include amounts which were paid by IHSS when consumer is ineligible for services. For example, payment for services on days when consumer is hospitalized or enters long term care, moves out of state or dies.

12. Can IHSS change my payment method from Advance Payment to Payment in Arrears?

IHSS has the right to change my payment method when any of the following conditions apply:

- Consumer uses payment for anything other than the purchase of authorized IHSS services.
- Consumer fails to submit timesheet within 90 days from the date the Advance Payment was issued. (MPP Section 30-767.133(b)).
- Consumer does not provide timely payment to their provider(s).
- Consumer is no longer eligible to receive the number of IHSS authorized hours required to qualify for Advance Payment.

13. When the consumer fails to submit reconciling timesheets, who is responsible for recovery of over payment amount?

The County of Ventura is responsible for overpayment recovery and will attempt to assist consumers with any identified timesheet reconciliation challenges. When attempts are unsuccessful, the County will establish an overpayment and collect any unreconciled amount (MPP Sections 30-768.213 and 30-768.3). The consumer is to receive the IHSS Advance Pay Overpayment Recovery NOA form (NA 1282) informing he/she/they that the County:

- Intends to recover overpayment via warrant offset.
- Option of paying the outstanding balance in full or making payments in addition to the warrant offset to shorten the repayment time.
- Period which the overpayment occurred.
- Reason and the amount of the overpayment.
- Description of how the amount was calculated, and the method by which the county proposes to recover the overpayment.

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14. How do Advance Payment deductions impact consumer?

Advance Payment is an option available to some IHSS consumers, which allows them to receive an advanced payment for IHSS services to directly pay their provider(s). The amount of Advance Payment, including insurance deductions are for the provider(s). Therefore, the consumer is responsible to pay the entire amount of advance payment received for IHSS services to their provider(s).

15. What are FICA, SDI/DIEC and Medicare deductions and what does this mean?

FICA (Federal Insurance Contributions Act), **SDI/DIEC** (State Disability Insurance/Disability Insurance Elective coverage) and **Medicare** are required automatic deductions that all providers must pay and have withheld from their IHSS paycheck. These deductions are not state and/or federal tax withholdings, and only the IRS (Internal Revenue Service) has control over these deductions.

- ONLY exceptions for tax wage exclusion: Participants and recipients who live at the same home address which makes the provider eligible to have his/her IHSS/WPCS wages excluded from federal and state income tax. **IMPORTANT: Wage Exclusions are NOT automatic;** SOC 2298 (Live-In Self Certification Form) or the SOC 2299 (Live-In Self Certification Cancellation Form) must first be filed with the California Department of Social Services.
- The County cannot provide any tax advice, consumers and/or providers will need to contact the IRS or a tax preparer/accountant.
 - Questions about your taxes? Call the Internal Revenue Service at 1-800-829-1040 or go to www.irs.gov