



The Consumer Connection

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Public Authority Services
by Sourcewise



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Fostering A Healthy Work Relationship

By Frank Ochoa

Starting a new job can be stressful. Whether you are a new team member or a new supervisor, the first few weeks of a new position involve learning about personality types. It's important to establish the foundation of a healthy employer/employee relationship. Below are some tips for fostering a positive working relationship.

Always respect cultural differences. We live in a melting pot of many cultures. It is important to be aware of differences and remain sensitive to differing customs and practices. For example, in some cultures it is respectful (and expected) to remove your shoes before entering a home. For others, making direct eye contact could be a sign of disrespect. Be open to discuss any differences that you feel are important. Help avoid misunderstandings by talking through expectations.

Be mindful of what is said. While it's important to communicate honestly, it is vital to be aware of how you communicate and to speak in a respectful tone. A subtle difference in the tone of your voice can change the direction of a conversation.

Maintain awareness of what you are saying, the tone of your message, and how you may be perceived. Stay open and encourage honest communication.



Never make assumptions. There is no such thing as a dumb question! Find the courage to ask questions and to express yourself. Communicate as clearly as possible to avoid misunderstandings or emotional roller coasters. Assumptions will cause trouble; people cannot read minds. Always be sure to express yourself in a clear and respectful manner.

By following these simple guidelines, you can count on having successful, long-term working relationships. And remember: A simple "Thank You" goes a long way.

REMINDER! Get Paid On Time

By Ross Graham

In-Home Supportive Services (IHSS) Care Providers must be paid ON TIME for 35 hours or more each month, or risk losing their medical insurance benefits.

Always notify IHSS by calling (408) 792-1600, if your pay is delayed for more than 10 days from the timesheet mailing. Some providers lose their medical insurance benefits every month because they have not been paid on time! Don't let this happen to you.

When new overtime rules start on January 1, 2015, there will be changes regarding deadlines for submitting timesheets. More information will be available when these changes occur.

For an application for medical benefits or for more information, please call Public Authority Benefits at (408) 350-3290.



IHSS Fraud ALERT

By Ross Graham

Please be careful: Providers and Recipients must follow the IHSS program rules. Law enforcement is watching.

Recently, another case of IHSS fraud was prosecuted in Santa Clara County. The individual involved now has a criminal conviction, is barred from the IHSS program, and has incurred other court payments and penalties.

The rules of the IHSS program are clearly stated in the orientation documents signed by In-Home Care Providers. Please ask any questions before signing your documents, and be aware of the rules as they apply to you.

Protect the IHSS program: if you know about suspicious activities involving IHSS providers or consumers, please report them on the "Stop Medi-Cal Fraud" hotline: (800) 822-6222.

Your Medi-Cal is Changing

Changes to Medi-Cal may affect you, whether you have just Medi-Cal, or both Medicare and Medi-Cal.

A sample Medicare Health Insurance card for John Doe. The card includes the following information: NAME OF BENEFICIARY: JOHN DOE; MEDICARE CLAIM NUMBER: 000-00-0000-A; SEX: MALE; IS ENTITLED TO: HOSPITAL (PART A) and MEDICAL (PART B); EFFECTIVE DATE: 01-01-2007. The card also features the Medicare logo and the text "1-800-MEDICARE (1-800-633-4227)". A large "SAMPLE" watermark is overlaid on the card.A State of California Benefits Identification Card for SUE G. The card includes the following information: ID No. 90000000A95001; SUE G RECIPIENT; F 05 20 1993; Issue Date 01 01 05. The card also features the State of California seal and the text "State of California" and "Benefits Identification Card".

The enclosed information sheet tells you where you can get more information.

Making Changes to Your IHSS Care Provider

By Fran Kiernan & Monica Macer



As an In-Home Supportive Services (IHSS) consumer, you can decide to hire a new In-Home Care Provider (IP) at any time. Here are some tips to make sure the transition goes as quickly and smoothly as possible:

- If your new IP has never worked for IHSS before, they will need to go through the state mandated enrollment process. To begin this process, refer your new IP to the enrollment website: www.ihss.pascc.org. For questions about the enrollment process, please contact Public Authority Services Enrollment at (408) 350-3252.
- Contact your IHSS social worker directly or call IHSS at (408) 792-1600 to request a "Provider Changes Packet." This packet includes forms to add a care provider to your case, including the Recipient Designation of Provider form (SOC 426A), and the Provider Change form.
- The main IHSS number may have long wait times, as they handle a large work load. You can minimize further wait time by having your IHSS case number ready, and by being prepared with your reason for calling (whether you need to add or change care providers.)
- Keep a copy of any forms for you and your IP. The SOC 426A form comes in carbon copy triplicate: white, yellow and pink. Mail the top white copy to IHSS, keep the yellow copy for yourself, and give the pink copy to your provider. This way all parties have records of information provided to IHSS.
- IHSS can take up to four weeks to process Provider Change forms. To create a seamless transfer of providers, make Provider Change requests in advance when possible.
- If you are having trouble finding a new care provider, you may contact the Public Authority Registry for assistance at (408) 350-3251.

Overtime Regulations: Important Timesheet Training

By Mary Tinker

Prior to December 1, 2014, the State of California will mail a detailed notification letter to all In-Home Supportive Services (IHSS) consumers and providers. This letter explains the new rules and regulations for IHSS, as well as an explanation of hours allotted per recipient per week.

Because this is a very complex change for IHSS, it is very important to review and understand the new rules.

Failure to comply may result in providers losing their employment eligibility with IHSS. A limited number of violations may result in termination from the IHSS program.

The County, Public Authority and the Union will be partnering to provide training sessions to help consumers and providers understand the changes. Please watch your mail for specific dates, times, and locations, and plan to attend these important timesheet trainings.

Be sure to read and understand all the notices you get from the State and the County IHSS Program.



Important Phone Numbers

Public Authority Services by Sourcewise

Information concerning provider benefits, Eco/Clipper Pass, training or other services of the Public Authority.
(408) 350-3206

Public Authority Services Registry

Call the Registry, if you need help finding an IHSS care provider.
(408) 350-3251

IHSS Social Services

Information regarding authorized hours and services or to speak with a social worker.
(408) 792-1600

IHSS Payroll

Call for any payroll or timesheet matters.
(408) 792-1600

UNION SEIU Local 521

Representing providers. Call for information about the Union and payroll deductions.
(408) 678-3300

Adult Protective Services

24-hour Hotline. Call for help, if you or someone you know suspect abuse of a senior or dependent adult.
(408) 975-4900
(800) 414-2002

Sourcewise Information & Awareness

Information on available services in Santa Clara County.
(408) 350-3200, option 1

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Public Authority Services
by Sourcewise

Your Medi-Cal is Changing in Santa Clara County Su Medi-Cal está cambiando en el condado de Santa Clara Medi-Cal của bạn đang thay đổi tại Santa Clara County 在圣塔克拉拉县, 您的Medi-Cal将会改变

You may have received a **blue envelope with an important notice from the State of California. Or you may soon receive a notice.**

When you get a notice, be sure to read it. The notices tell you about decisions you need to make.

If you have Medi-Cal but not Medicare, you must choose a Medi-Cal Managed Care Plan to continue receiving your Medi-Cal benefits. If you have both Medicare and Medi-Cal, you may be able to choose a new optional program called Cal MediConnect, which combines your Medi-Cal and Medicare benefits into one plan. You may also be eligible to join PACE (Program of All-Inclusive Care for the Elderly) instead of Cal MediConnect. If you decide not to join Cal MediConnect or PACE, you can choose to keep your Medicare plan the same as it is now, but you must still choose a Medi-Cal Managed Care Plan to continue receiving Medi-Cal benefits.

If you do not respond to the letter and have Medi-Cal only, the State will select a Medi-Cal Managed Care plan for you. If you do not respond to the letter and you have both Medicare and Medi-Cal, you will automatically be enrolled in a Cal MediConnect plan. For more information, call the Health Insurance Counseling & Advocacy Program to speak with a counselor – **(800) 434-0222**, or visit www.sccduals.com or www.calduals.com. To learn more about PACE or to find out if you're eligible, contact On Lok Lifeways at **(888) 886-6565** or visit www.onlok.org.

DO NOT call IHSS or your IHSS social worker – they DO NOT have Medi-Cal information.

Es posible que haya recibido un **sobre azul con un aviso importante del Estado de California. O bien, puede ser que pronto reciba un aviso.**

Cuando reciba un aviso, asegúrese de leerlo. Los avisos le informan sobre las decisiones que debe tomar.

Si usted tiene Medi-Cal pero no tiene Medicare, debe elegir un Plan de salud de Medi-Cal para continuar recibiendo sus beneficios de Medi-Cal. Si tiene Medicare y Medi-Cal, es posible que pueda elegir un nuevo programa opcional que se llama Cal MediConnect, que combina sus beneficios de Medi-Cal y Medicare en un plan. Usted también puede ser elegible para inscribirse a PACE (Program of All-inclusive Care for the Elderly) en lugar de Cal MediConnect. Si decide no unirse a Cal MediConnect o PACE, puede elegir mantener su plan Medicare igual que hasta ahora, pero todavía debe elegir un Plan de salud de Medi-Cal para continuar recibiendo los beneficios de Medi-Cal.

Si no responde a la carta y tiene solo Medi-Cal, el estado seleccionará un plan de atención administrada de Medi-Cal para usted. Si no responde a la carta y tiene tanto Medicare como Medi-Cal, se le inscribirá automáticamente en un plan Cal MediConnect. Para obtener más información, llame al Programa de Asesoría y defensoría del seguro médico para hablar con un asesor – **(800) 434-0222**, o visite www.sccduals.com o www.calduals.com. Para conocer más sobre PACE o para averiguar si es elegible, comuníquese con On Lok Lifeways al **(888) 886-6565** o visite www.onlok.org.

NO llame a IHSS ni a su trabajador social de IHSS – ellos NO tienen información sobre Medi-Cal.

CalMediConnect



Quý vị có thể đã nhận được một phong bì màu xanh trong đó có thông báo quan trọng của Tiểu Bang California. Hoặc chẳng bao lâu nữa quý vị sẽ nhận được một thông báo.

*Khi nhận được, quý vị nhớ đọc thông báo này.
Thông báo này cho biết về các quyết định mà quý vị cần thực hiện.*

Nếu quý vị có Medi-Cal mà không có Medicare, quý vị phải chọn một Chương Trình Chăm Sóc Có Quản Lý của Medi-Cal (Medi-Cal Managed Care Plan) để tiếp tục nhận các quyền lợi Medi-Cal của quý vị. Nếu quý vị có cả Medicare và Medi-Cal, quý vị có thể chọn một chương trình tùy chọn mới được gọi là Cal MediConnect, chương trình này kết hợp các quyền lợi Medi-Cal và Medicare của quý vị vào một chương trình. Quý vị cũng có thể hội đủ điều kiện để gia nhập PACE (Chương Trình Chăm Sóc Toàn diện cho Người Già - Program of All-inclusive Care for the Elderly) thay vì Cal MediConnect. Nếu quý vị quyết định không gia nhập Cal MediConnect hoặc PACE, quý vị có thể muốn giữ lại chương trình Medicare giống như bây giờ, nhưng quý vị vẫn phải chọn một Chương Trình Chăm Sóc Có Quản Lý của Medi-Cal để tiếp tục hưởng các quyền lợi của Medi-Cal.

Nếu quý vị không trả lời thư và chỉ có Medi-Cal mà thôi, Tiểu Bang sẽ chọn một chương trình Chăm Sóc có Quản Lý của Medi-Cal cho quý vị. Nếu quý vị không trả lời thư và quý vị có cả Medicare và Medi-Cal, quý vị sẽ được tự động ghi danh vào một chương trình của Cal MediConnect. Để biết thêm thông tin, xin gọi Chương Trình Tư Vấn & Biện Hộ Bảo Hiểm Sức Khỏe (Health Insurance Counseling & Advocacy Program) để nói chuyện với một số vấn – tại số **(800) 434-0222**, hoặc đến www.sccduals.com hoặc www.calduals.com. Để tìm hiểu thêm về PACE hoặc để tìm hiểu xem quý vị có hội đủ điều kiện hay không, hãy liên lạc với On Lok Lifeways tại số **(888) 886-6565** hoặc đến www.onlok.org.

ĐỪNG gọi IHSS hoặc nhân viên xã hội IHSS của quý vị – họ KHÔNG có thông tin về Medi-Cal.

**您可能从加利福尼亚州政府收到一个含有重要通知的蓝色信封。
您也可能很快收到一个通知。**

如果您收到一个通知, 请务必阅读。此通知将告知您所需做的决定

如果您有 Medi-Cal 但没有 Medicare, 必须选择 Medi-Cal 统管保健计划来继续享受您的 Medi-Cal 福利。如果您有 Medicare 和 Medi-Cal, 您可以选择新的可选项目 - Cal MediConnect, 此新项目将 Medi-Cal 和 Medicare 的福利合并到一个计划中。如果不想加入 Cal MediConnect, 您也有资格加入 PACE (全包式老年人健康护理计划)。如果您决定不加入 Cal MediConnect 或 PACE, 您可以选择继续像现在一样使用 Medicare 计划, 但必须选择 Medi-Cal 统管保健计划来继续享受 Medi-Cal 福利。

如果您不回复此信并仅有 Medi-Cal, 州政府将为您选择 Medi-Cal 统管保健计划。如果您不回复此信并且您有 Medicare 和 Medi-Cal, 您将自动注册 Cal MediConnect 计划。有关详细信息, 请致电健康保险咨询和宣传计划 (Health Insurance Counseling & Advocacy Program) – **(800) 434-0222**, 或访问 www.sccduals.com 或 www.calduals.com 与顾问进行沟通。欲了解更多关于 PACE 的信息或确认您是否符合条件, 请致电 **(888) 886-6565** 或访问 www.onlok.org 联系 On Lok Lifeways。

请勿致电 IHSS 或您的 IHSS 社工 - 他们没有 Medi-Cal 的相关信息。

CalMediConnect

