

PROVIDER ELECTRONIC SERVICE PORTAL (ESP)

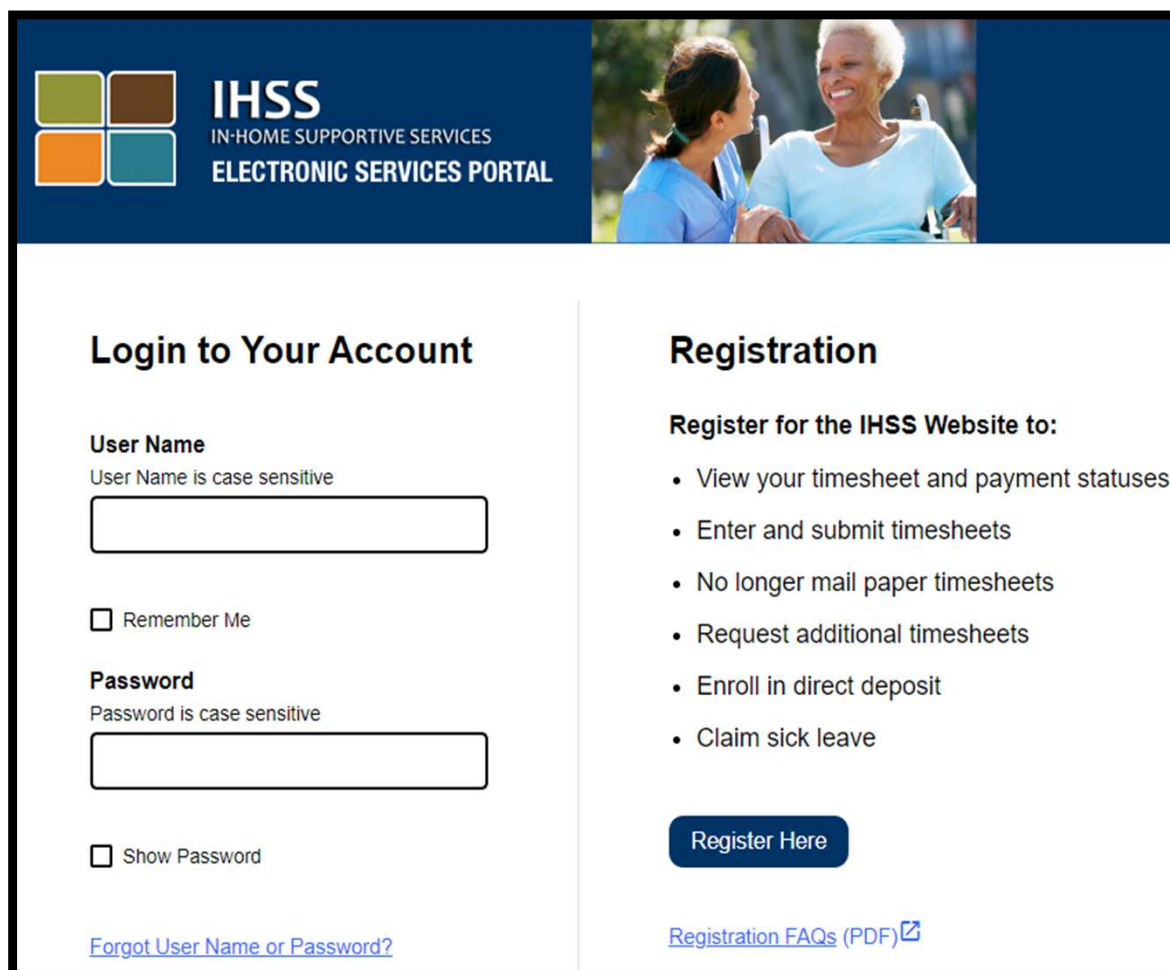
ESP Financial Setup and Review

WHAT CAN YOU DO ON ESP?

- *Check-In/Out*
- *Submit Timesheet*
- *Live-in Certification*
- *Payroll History*
- *Employment Verification*
- *Review Tax Documents*
- *Sick Leave Request*
- *Direct Deposit*
- *Update Your Contact Information*
- *Link to Resources*
- *Read Notifications About the ESP*

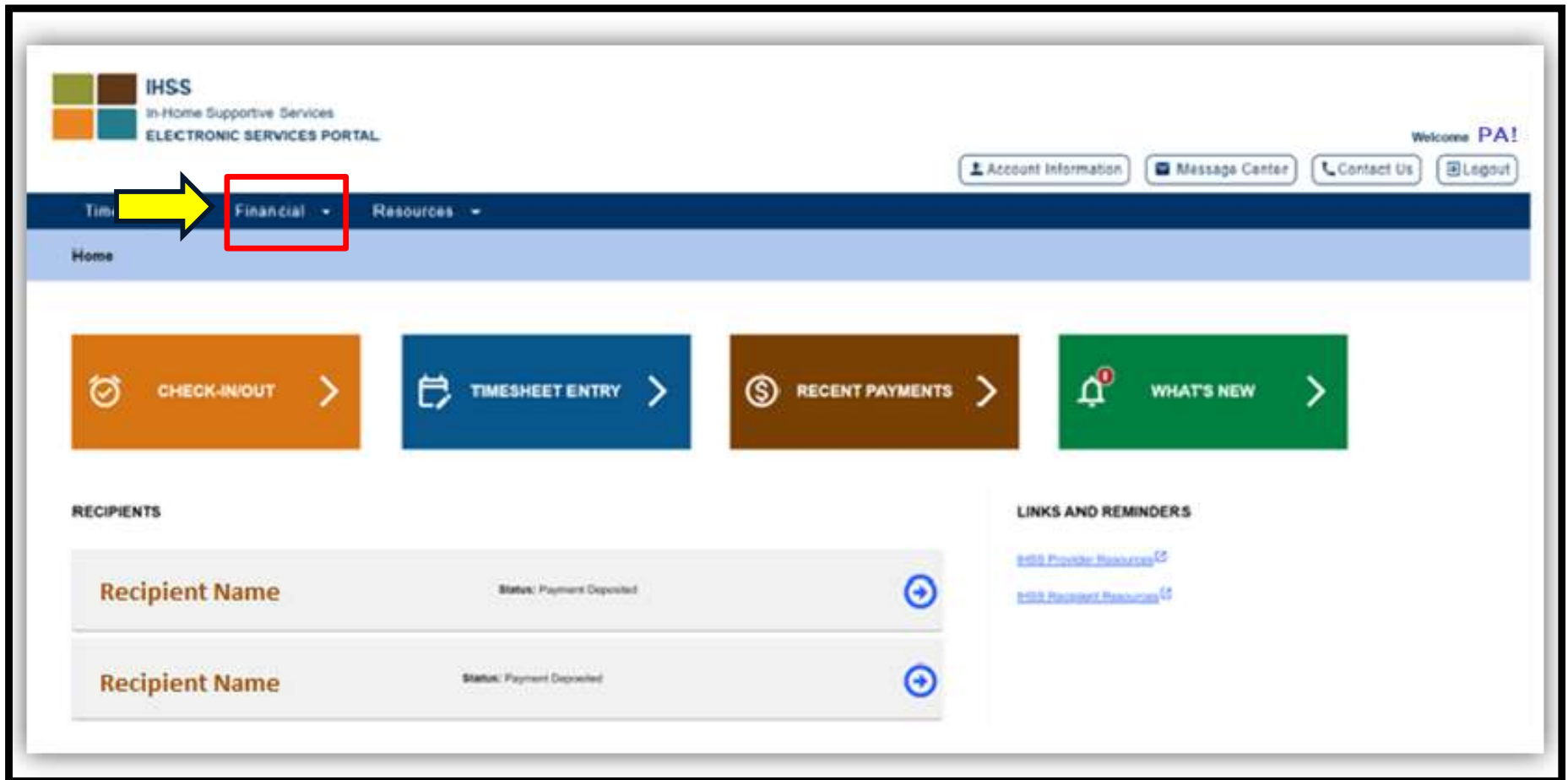
IN THIS COURSE:

- *By the end of this course, you will know how to:*
 - *Certify Live-in status*
 - *View payroll history*
 - *Set up and change direct deposit*
 - *View tax documents*
 - *Request employment verification*



The screenshot shows the IHSS Electronic Services Portal. The header features the IHSS logo (four colored squares) and the text "IHSS IN-HOME SUPPORTIVE SERVICES ELECTRONIC SERVICES PORTAL" next to a photo of a caregiver and an elderly woman. The main content area is divided into two columns. The left column is titled "Login to Your Account" and contains fields for "User Name" (with a note "User Name is case sensitive") and "Password" (with a note "Password is case sensitive"). Below these are checkboxes for "Remember Me" and "Show Password", and a link for "Forgot User Name or Password?". The right column is titled "Registration" and lists benefits of registering: "View your timesheet and payment statuses", "Enter and submit timesheets", "No longer mail paper timesheets", "Request additional timesheets", "Enroll in direct deposit", and "Claim sick leave". A "Register Here" button is at the bottom of this column, along with a link to "Registration FAQs (PDF)".

HOMEPAGE

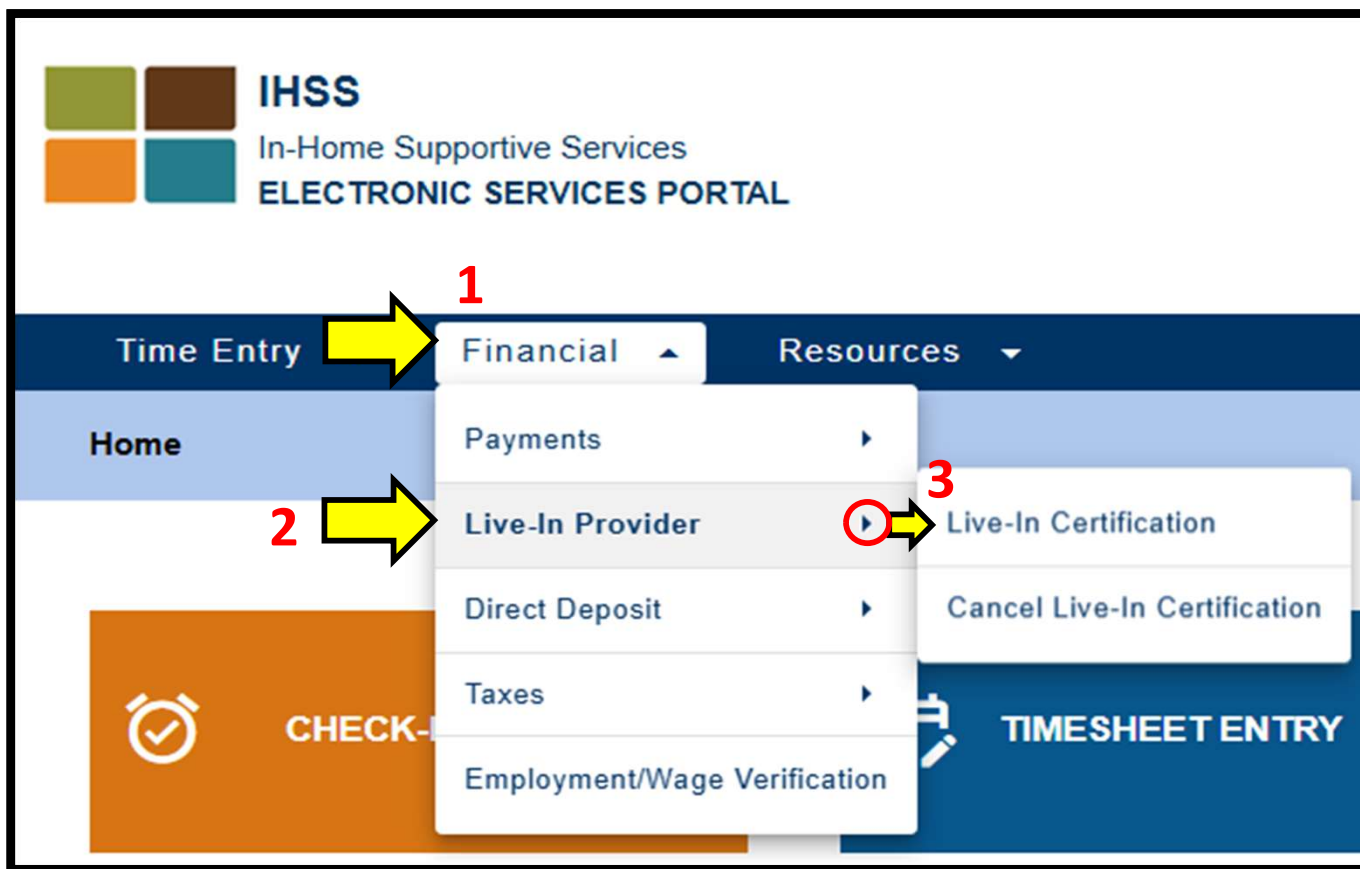


- *After you log in to your account, you will see the homepage*
- *In this course, we will be looking at the tab for “Financial”*

LIVE-IN CERTIFICATION

- *If you live with your consumer, you are a Live-in Provider and do not need to check-in and out daily*
 - *Complete the form SOC 2298 (submit it to your county IHSS office) or use the ESP to certify that you live with your recipient*
 - *If you do not certify your Live-in status, you will be asked if you live with your consumer at the beginning of each timesheet period*
- *For more information, please visit the California Department of Social Services*
 - cdss.ca.gov/inforesources/ihss/live-in-provider-self-certification
- *If you do not live with your care recipient, please skip the following Live-In certification instructions*
 - *Skip to page #11 or 3:58 in the video*

LIVE-IN CERTIFICATION



- To certify your live-in status, on the top, find the tab for “Financial” (1), then click on “Live-In Provider” (2) and choose “Live-In Certification” (3)

LIVE-IN CERTIFICATION

Time Entry ▾ Financial ▾ Resources ▾

Live-In Provider Self-Certification

In completing this self-certification, a provider living with a recipient they provide services for will have their IHSS and/or WPCS wages excluded from personal income taxes. To get more information visit [CDSS Live-In Provider Self-Certification Information](#). If you have already certified as a live-in provider for a recipient, the recipient's name will not be listed below. If you need to cancel your Live-In Self-Certification, go to the [Cancel Live-In Provider Self-Certification screen](#).

Select Recipient

Select Recipient

Jane Doe (0012345) ▾

Cancel

- Under “Select Recipient”, click the drop-down arrow in the empty box
- You will then see all recipients you are connected to and are eligible to self-certify your live-in status
- Find the recipient you are certifying your live-in status for and click on their name

LIVE-IN CERTIFICATION

Select Recipient

Jane Doe (0012345) ▾

Electronic Signature

Please electronically sign and submit your Live-In Provider Self-Certification.

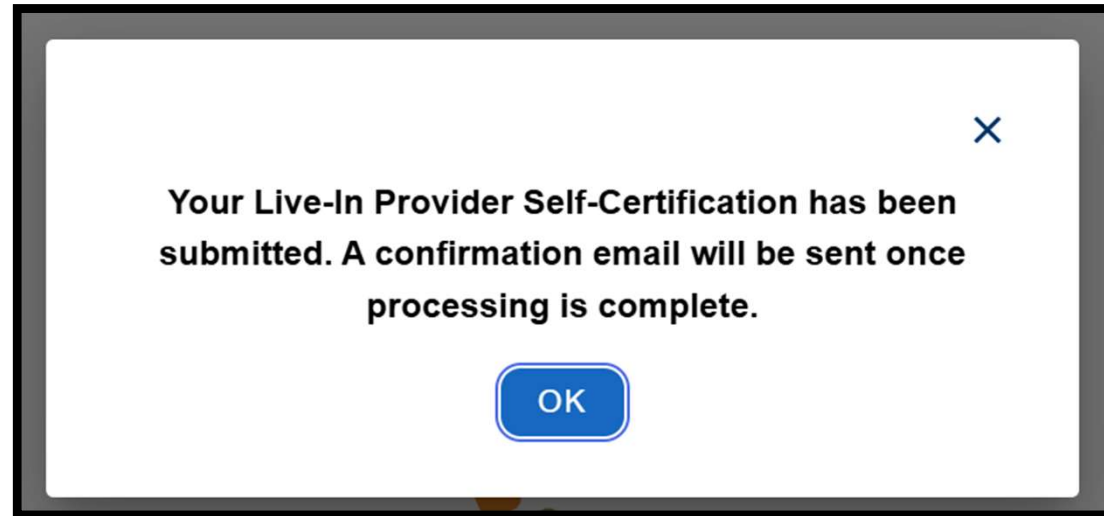
By marking the checkbox and submitting, you are certifying that the wages you receive for providing IHSS and/or WPCS services to the recipient named above **will be** excluded from your federal and state personal income taxes.

☒ I, PA IHSS, under penalties of perjury, declare that I am a provider receiving payments under the IHSS and/or WPCS programs for care I provide to the recipient named above who lives with me in the same home.

Sign and Submit Cancel

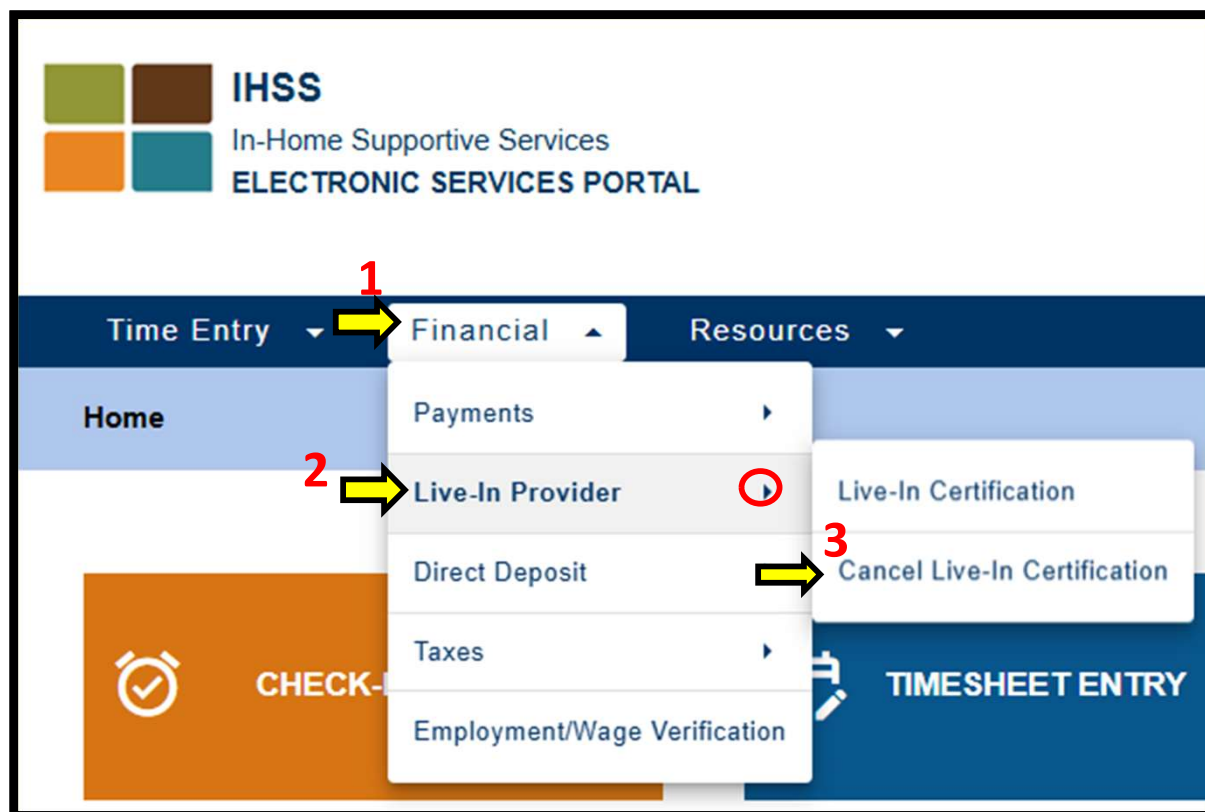
- *After selecting the recipient you wish to certify for, review the information below “Electronic Signature”, and then click on the square checkbox*
- *It will then have a checkmark*
- *Then click “Sign and Submit”*

LIVE-IN CERTIFICATION



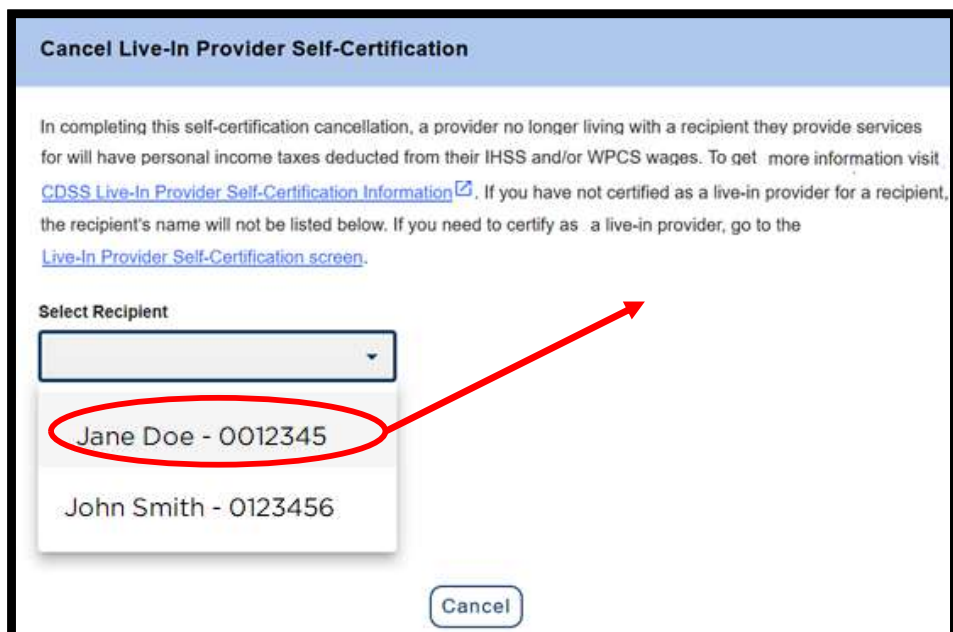
- *The ESP portal will display a notification that you have submitted your Live-In request*
 - *Once it is processed and approved, you will receive a confirmation email*
- *Click “OK”*

LIVE-IN CERTIFICATION (CANCEL)



- *If you wish to cancel your Live-in Certification, you can also put the request in on the ESP at any time*
- *To cancel your live-in status, on the top, go to the “Financial” tab (1), then click on “Live-In Provider” (2) and choose “Cancel Live-In Certification” (3)*

LIVE-IN CERTIFICATION (CANCEL)



Cancel Live-In Provider Self-Certification

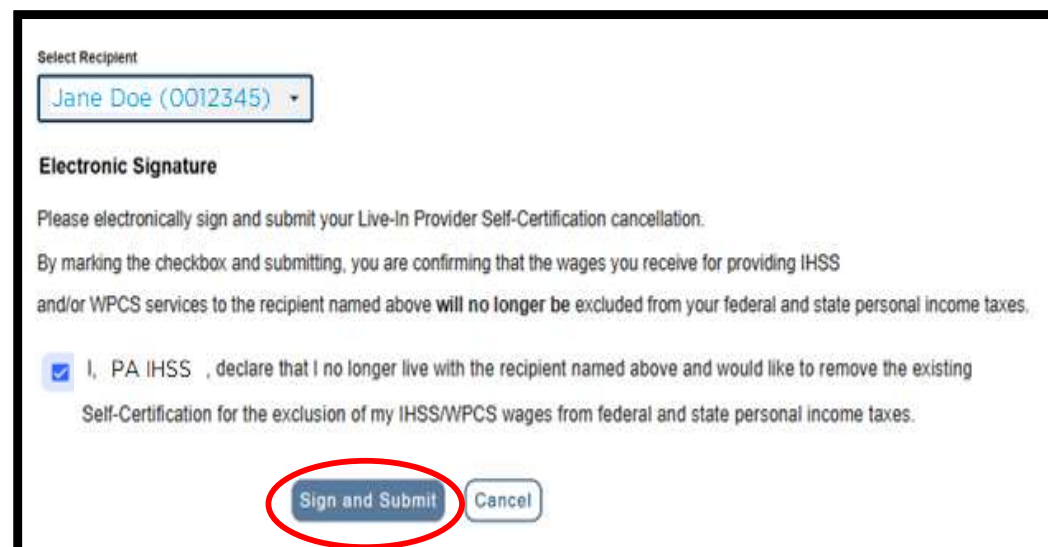
In completing this self-certification cancellation, a provider no longer living with a recipient they provide services for will have personal income taxes deducted from their IHSS and/or WPCS wages. To get more information visit [CDSS Live-In Provider Self-Certification Information](#). If you have not certified as a live-in provider for a recipient, the recipient's name will not be listed below. If you need to certify as a live-in provider, go to the [Live-In Provider Self-Certification screen](#).

Select Recipient

Jane Doe - 0012345

John Smith - 0123456

Cancel



Select Recipient

Jane Doe (0012345)

Electronic Signature

Please electronically sign and submit your Live-In Provider Self-Certification cancellation.

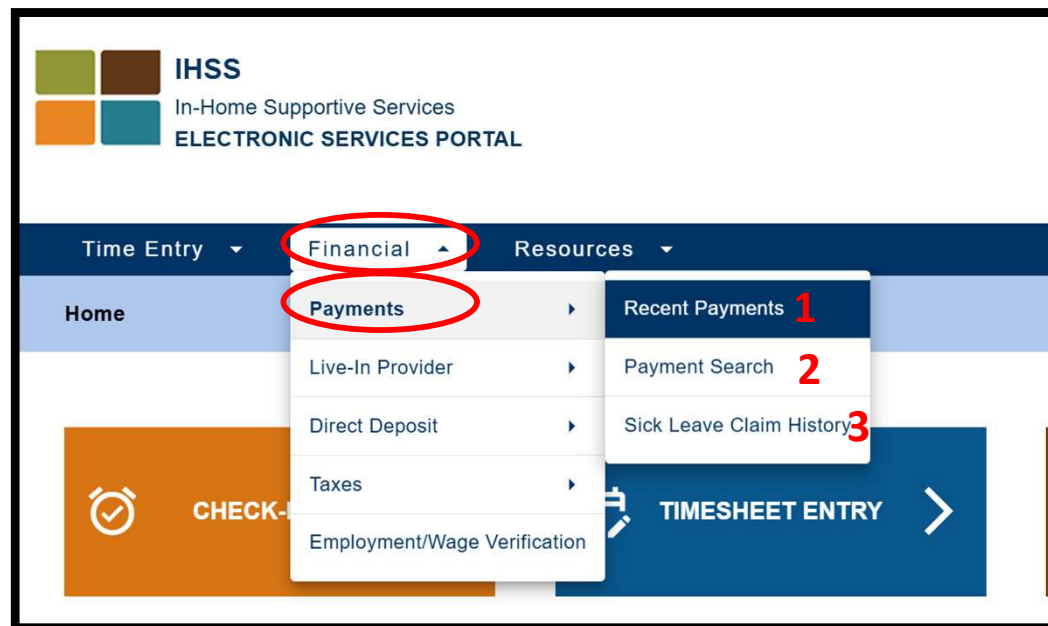
By marking the checkbox and submitting, you are confirming that the wages you receive for providing IHSS and/or WPCS services to the recipient named above **will no longer be** excluded from your federal and state personal income taxes.

☒ I, PA IHSS, declare that I no longer live with the recipient named above and would like to remove the existing Self-Certification for the exclusion of my IHSS/WPCS wages from federal and state personal income taxes.

Sign and Submit Cancel

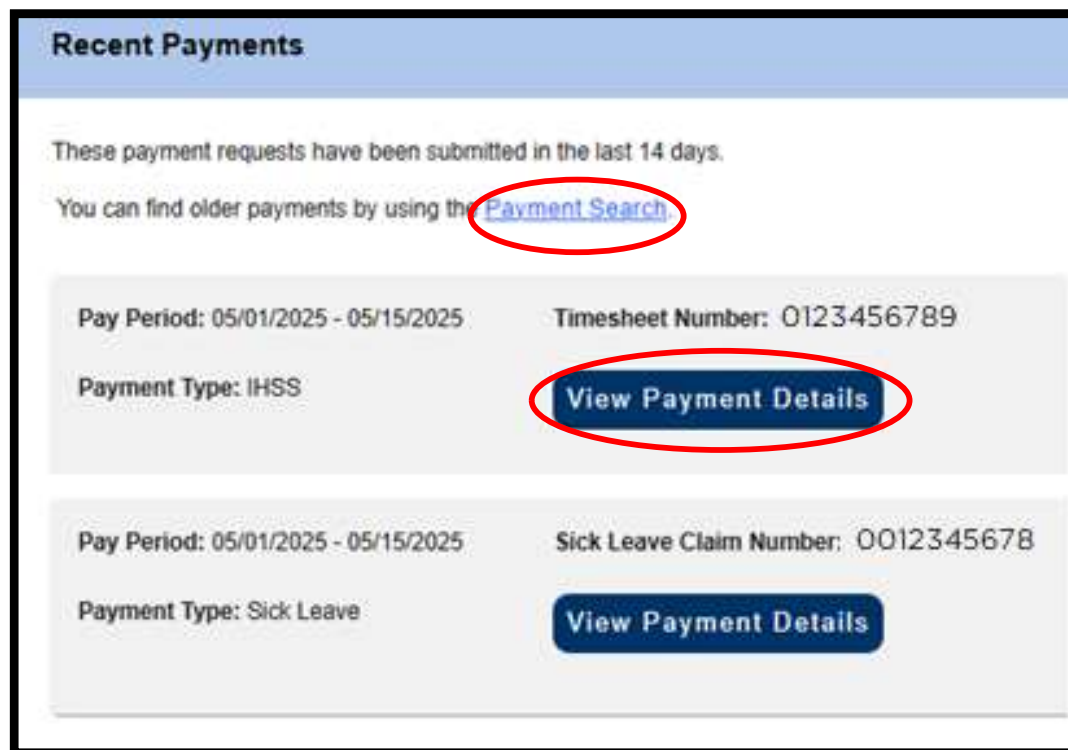
- Select the recipient you wish to cancel certification for, review the information under “Electronic Signature,” and then click on the square box
- A checkmark will appear next to the statement
- You can now click “Sign and Submit”
- You will be notified by email that your request has been processed

PAYROLL HISTORY



- To view payment history, go to “Financial,” then, “Payments”, and click on the option below:
 - Recent Payments (1): For payment requests that have been submitted in the last 14 days
 - Payment Search (2): For older payment requests
 - Sick Leave Claim History (3): For the history of sick leave requests and payments only

PAYROLL HISTORY: RECENT PAYMENT (1)



Recent Payments

These payment requests have been submitted in the last 14 days.

You can find older payments by using the [Payment Search](#)

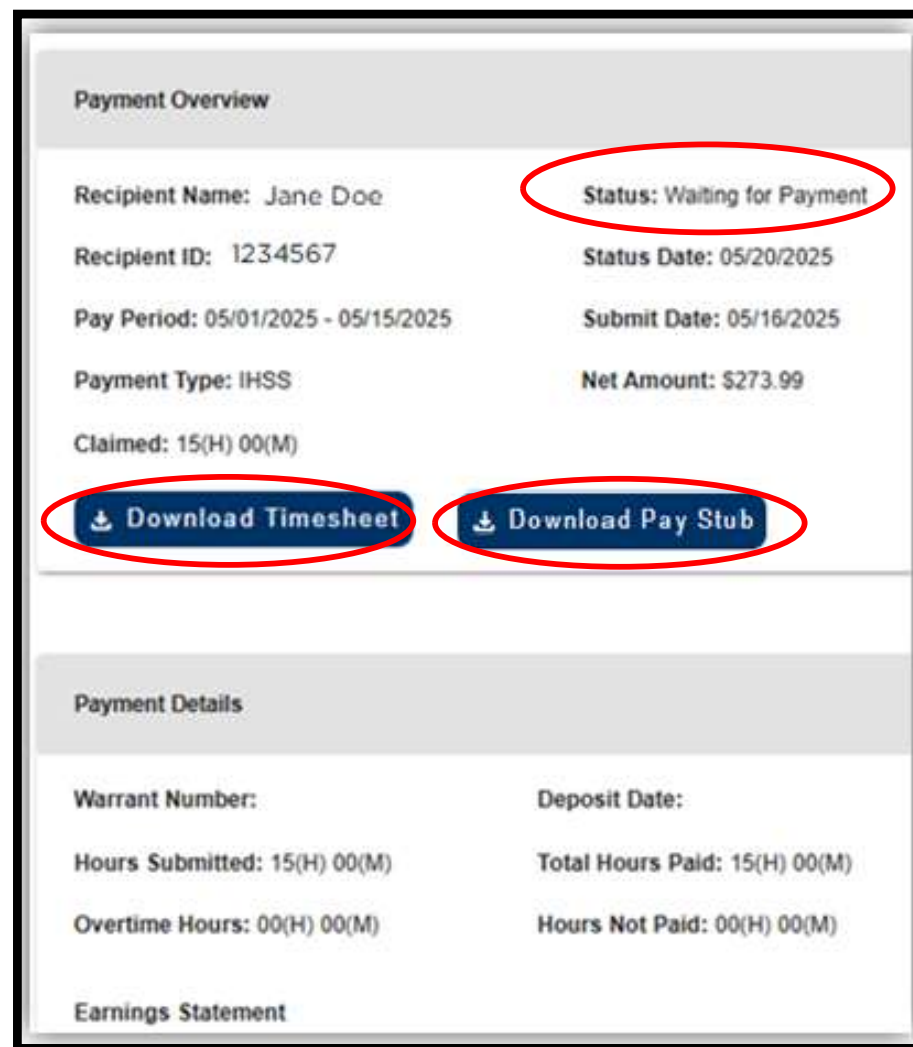
Pay Period: 05/01/2025 - 05/15/2025	Timesheet Number: 0123456789
Payment Type: IHSS	View Payment Details

Pay Period: 05/01/2025 - 05/15/2025	Sick Leave Claim Number: 0012345678
Payment Type: Sick Leave	View Payment Details

- *A quick summary of any payment request submitted in the last 14 days can be found here*
- *Click on “View Payment Details” for a detailed view of the timesheet*

PAYROLL HISTORY: RECENT PAYMENT (1)

- *The status of your timesheet will be in one of these stages:*
 - Submitted
 - Waiting Recipient Review
 - Waiting for Payment
 - Payment Deposited
- *You can download your timesheet or pay stub once it is in the “Waiting for payment” status. Do so by clicking the blue buttons in “Payment Overview”*



The screenshot displays the 'Payment Overview' section of a web application. It contains the following information:

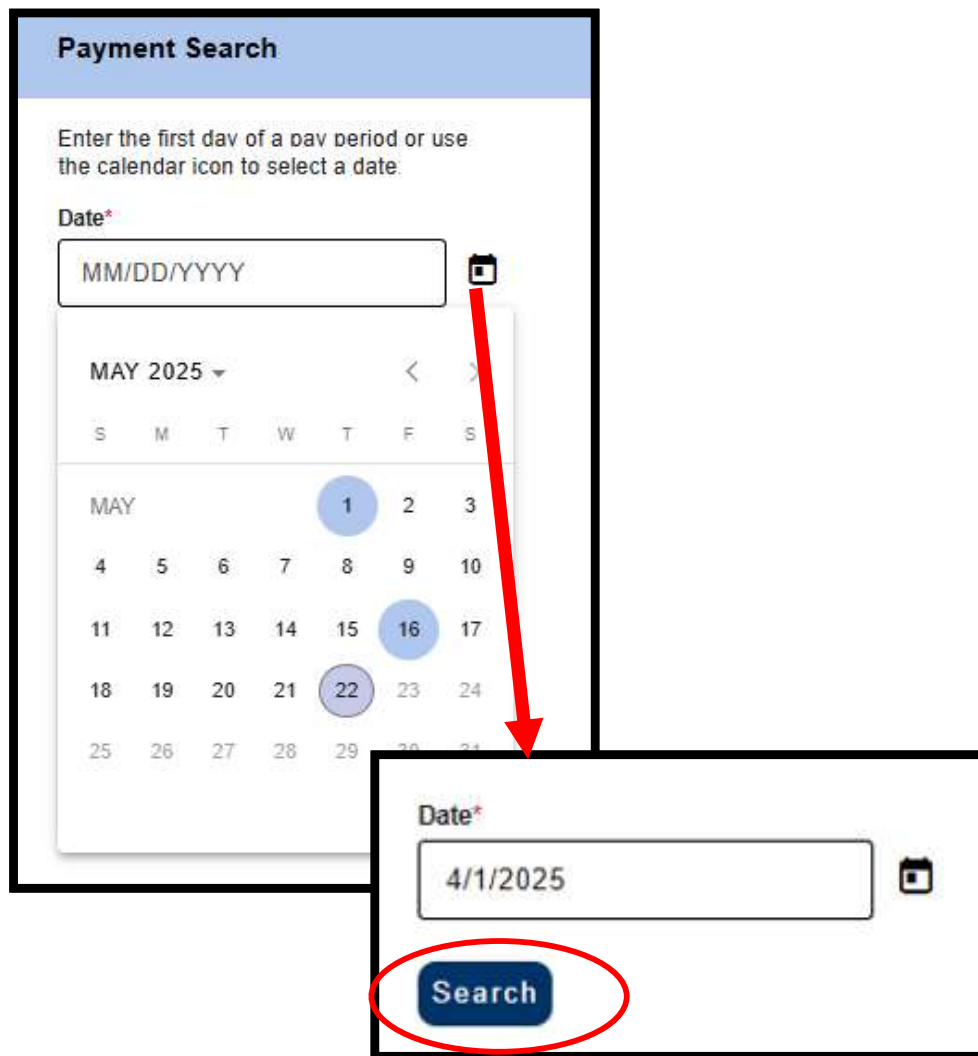
Payment Overview	
Recipient Name: Jane Doe	Status: Waiting for Payment
Recipient ID: 1234567	Status Date: 05/20/2025
Pay Period: 05/01/2025 - 05/15/2025	Submit Date: 05/16/2025
Payment Type: IHSS	Net Amount: \$273.99
Claimed: 15(H) 00(M)	
Download Timesheet	Download Pay Stub

Below the Payment Overview section is the 'Payment Details' section, which includes:

Payment Details	
Warrant Number:	Deposit Date:
Hours Submitted: 15(H) 00(M)	Total Hours Paid: 15(H) 00(M)
Overtime Hours: 00(H) 00(M)	Hours Not Paid: 00(H) 00(M)

At the bottom of the page is the 'Earnings Statement' section.

PAYROLL HISTORY: PAYMENT SEARCH (2)



Payment Search

Enter the first day of a pay period or use the calendar icon to select a date.

Date*

MM/DD/YYYY

MAY 2025

S M T W T F S

MAY

1 2 3

4 5 6 7 8 9 10

11 12 13 14 15 16 17

18 19 20 21 22 23 24

25 26 27 28 29 30 31

Date*

4/1/2025


Search

- You can find previous payment requests here
- Choose the first date of the period that you want to review
 - IHSS has two pay periods
 - From the 1st to the 15th
 - From the 16th to the end of the month
 - Click on the date, then click “Search”

PAYROLL HISTORY: PAYMENT SEARCH (2)

- *You can see more details about this pay period by selecting “View Payment Details”*

Enter the first day of a pay period or use the calendar icon to select a date:

Date*
4/1/2025 

[Search](#)

Search results for pay period 4/1/2025 - 4/15/2025 :

Jane Doe

Recipient ID: 2539426	Timesheet Number: 0011223344
Claimed: 13(H) 00(M)	Payment Type: IHSS
Status: Payment Deposited	Status Date: 04/22/2025

[View Payment Details](#)

John Smith

Recipient ID: 2539426	Sick Leave Claim Number: 0001234567
Claimed: 16(H) 00(M)	Payment Type: Sick Leave
Status: Payment Deposited	Status Date: 04/17/2025

[View Payment Details](#)

PAYROLL HISTORY: PAYMENT SEARCH (2)

Payment Details

Warrant Number: **Deposit Date:**
Hours Submitted: 15(H) 00(M) **Total Hours Paid:** 15(H) 00(M)
Overtime Hours: 00(H) 00(M) **Hours Not Paid:** 00(H) 00(M)

Earnings Statement

Earnings	Current	Year-to-Date
Regular	\$300.60	\$4,344.29
Overtime	\$0.00	\$0.00
Total Gross	\$300.60	\$4,985.57
Net Pay	\$273.99	\$4,283.97

Deductions

	Current	Year-to-Date
Federal	\$0.00	\$0.00
State	\$0.00	\$0.00
FICA	\$18.64	\$309.11
Medicare	\$4.36	\$72.29
SDI/DIEC	\$3.61	\$59.83
Health	\$0.00	\$125.00
Dues	\$0.00	\$135.37
Total Deductions	\$26.61	\$701.60

Timesheet Details

Timesheet Number: 0011223457
Signature Method: Online
Provider Signed: 05/16/2025 **Recipient Signed:** 05/16/2025

Workweek 1	▼
Workweek 2	▼
Workweek 3	▼

Timesheet Total: 15(H) 00(M)

- In the “Recent Payment” or “Payment Search”, under Payment Overview, you can review the timesheet you submitted in detail by clicking on the down arrow

- You can also download the timesheet on both payment search options

PAYROLL HISTORY: SICK LEAVE CLAIM HISTORY (3)

Sick Leave Claim History

Select a Pay Period from the dropdown to view your Sick Leave Claims for that Pay Period.

Pay Period

May 1, 2025 - May 15, 2025

Jan 16, 2024 - Jan 31, 2024

Jan 1, 2024 - Jan 15, 2024

May 1, 2025 - May 15, 2025

Apr 1, 2025 - Apr 15, 2025

Jane Doe

Recipient ID: 0123456 Status: Processed

Sick Leave Claim Number: 00224455 Status Date: 05/23/2025

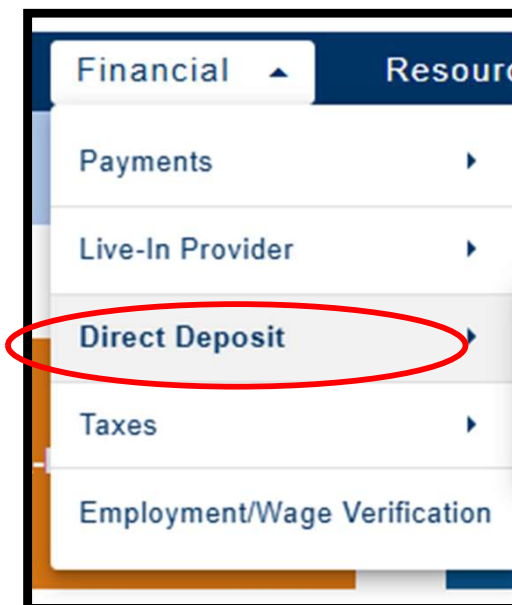
Hours Claimed: 08(H) 00(M) Hours Paid: 08(H) 00(M)

[View Sick Leave Claim Details](#)

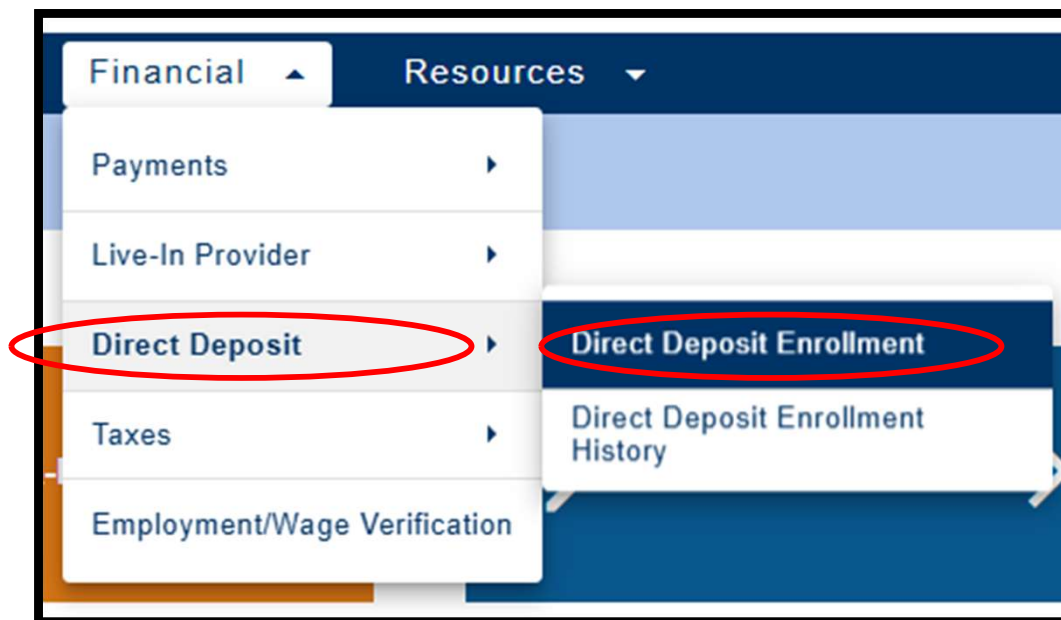
- You can see the history of sick leave payments under “Sick Leave Claim History”
- Click on the empty box under “Pay Period”. You will then see past pay periods during which you received sick pay
 - Find and click on the pay period you wish to review
- You will then see a summary of the sick payment. For a detailed summary, click on “View Sick Leave Claim Details”
 - You cannot download sick leave claims

DIRECT DEPOSIT

- *Providers cannot receive paper paychecks. Providers are required to use direct deposit or a loaded pay card to receive their payments*
 - *For more information, visit:*
cdss.ca.gov/inforesources/ihss-providers/resources/direct-deposit
- *There are two ways to enroll in direct deposit*
 - *Fill out form SOC 829 and submit it to IHSS*
 - *Through the ESP, you can enroll and change your direct deposit*
 - ▣ *Go to the “Financial” tab, then “Direct Deposit”*
- *Providers must enroll in Direct Deposit for each recipient they work for*



DIRECT DEPOSIT



- *To enroll in direct deposit, locate “Financial”, then “Direct Deposit”, and click on “Direct Deposit Enrollment”*
- *You will then be asked to complete a one-time verification*

DIRECT DEPOSIT

Action Requires Verification Code

To enroll in or change your direct deposit, we must first send you a one-time verification code.

If you select "Email me," the verification code will be sent to your email address.

If you select "Text me," the verification code will be sent to your cell phone number.

You may be charged a text messaging fee from your mobile service provider.

For more information please view our [SMS Terms Of Service](#) and [Privacy Policy](#).

If you select "Call me," the verification code will be verbally provided to you in an automated telephone call to your primary telephone number.

The verification code will expire 10 minutes after being sent, so be sure you have access to your email or phone.

Select your verification option

☒ Email me at q***@yah***

☐ Text me at ***-***-5056

☐ Call me at ***-***-5056

Send Verification Code **Cancel Request**

- *You can choose to receive your code through email, text, or call*
- *Select your verification option, then click the "Send Verification Code" button*

DIRECT DEPOSIT

← Enter Verification Code

An asterisk (*) indicates a required field

We sent a text message with your verification code to your cell phone number. Please enter the code below. The code expires after 10 minutes. If you didn't receive a code or if it expired, select "Resend Code" to receive a new code.

Verification Code*

287067

Verify Resend Code Cancel Request

- *Once you receive your verification code, enter it into the empty box and click "Verify"*
 - *The code will expire after 10 minutes*
- *If you have not received the code, you can have it resent to you by clicking the "Resend Code" button*

DIRECT DEPOSIT

Direct Deposit Enrollment

⚠ To prevent fraudulent transactions this system captures and tracks system information about the users who add or make changes to their Direct Deposit accounts. If you do not want your information to be recorded, please complete and mail the IHSS Provider Direct Deposit Enrollment/Change/Cancellation Form (SOC 829).

Please select one of the options below to begin. Select **NEW** to enroll in Direct Deposit, **CHANGE** to change your Direct Deposit Account, or **CANCEL** to stop receiving Direct Deposit. You will need your Account Number and Routing Number to request a new or change an existing Direct Deposit. After selecting a Direct Deposit Option, an authorization checkbox will be displayed. Select the authorization checkbox to confirm your option and select Next to continue. To learn more about Direct Deposit, visit [Direct Deposit FAQ \(PDF\)](#).

Select Your Direct Deposit Option

☒ **NEW** - Enroll in Direct Deposit

☐ **CHANGE** - Change Direct Deposit Account

☐ **CANCEL** - Cancel Direct Deposit

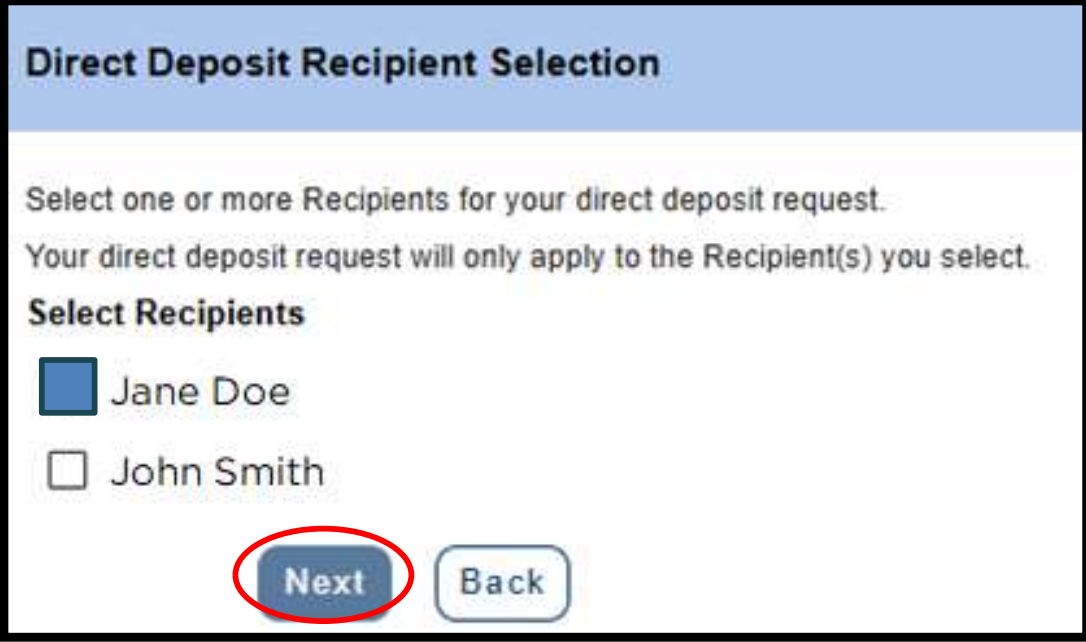
Authorization

☒ I, PA IHSS, hereby authorize the State Controller's Office to directly deposit my pay warrants to my personal bank account.

Next **Cancel**

- *If you started working for a new recipient, you will need to enroll for direct deposit. Click the circle next to “New,” then the authorization box, and then click “Next”*
- *If you want to switch to a different bank account, you will click on the circle next to “Change,” the authorization box, and then “Next”*
- *If you wish to cancel your direct deposit, you will click on the circle next to “Cancel,” the authorization box, and then “Next”*

DIRECT DEPOSIT



The screenshot shows a web form titled "Direct Deposit Recipient Selection". Below the title, there is a light blue header bar. The main content area has a white background. It contains the following text: "Select one or more Recipients for your direct deposit request." and "Your direct deposit request will only apply to the Recipient(s) you select." Below this is a section titled "Select Recipients" with two options: "Jane Doe" (selected with a blue square) and "John Smith" (not selected with a white square). At the bottom, there are two buttons: "Next" (highlighted with a red circle) and "Back".

Direct Deposit Recipient Selection

Select one or more Recipients for your direct deposit request.
Your direct deposit request will only apply to the Recipient(s) you select.

Select Recipients

☒ Jane Doe
☐ John Smith

Next **Back**

- *Select the recipient(s) you would like to enroll, change, or cancel your direct deposit for*
 - *If you work for more than one recipient, you will need to select all recipients you would like to set up the direct deposit for*

DIRECT DEPOSIT

Direct Deposit Instructions

- Begin by selecting the Type of Account then enter your routing number and account number found on your personal check. The Bank Name will display based on the Routing Number you enter.
- Entering an incorrect routing number or account number will cause your Direct Deposit to be rejected.
- The routing number is 9 digits long and starts with 0, 1, 2 or 3.
- The account number must be between 4 and 17 digits.
- Do not use a deposit slip to provide this information because the numbers can be different than your account and cause your Direct Deposit request to be rejected.
- If you need help finding your routing number and account number, please contact your bank.
- Your routing number and account number may be different if you choose to use your savings account for Direct Deposit.
- Below is an example of a check that shows where you can find this information.

Check Example:

Your Name		Check NO. 4444
Pay to the Order of _____		
11121456781:	5765432109812	4444

1 Routing No. **2** Your Acct. No. Ck. No.

Enter Your Bank Information

Type of Account:

☒ Checking

☐ Savings

- *Review the direct deposit instructions*
 - *You will need your routing (**1**) and account (**2**) numbers before setting up Direct Deposit*
 - *You can find this information on a blank check or get it from your bank*
- *Choose your banking account type, under “Type of Account”*

DIRECT DEPOSIT

Enter Your Bank Information

Type of Account:

☒ Checking

☐ Savings

Routing Number*

001122333

Account Number*

0123456789

Confirm Account Number*

0123456789

Bank Name:

Provider Bank

Next Back

- Enter your routing number and account number
 - You will need to enter your account number twice
- After entering your account numbers, your “Bank Name” will appear automatically
- Confirm the information before clicking the “Next” button
- Review the information, click on the square box to acknowledge the terms, and click “Sign and Submit”
 - It can take up to 30 calendar days after your request for direct deposit to begin. You will continue to receive paper checks until the direct deposit has gone through

You will continue to receive paper checks by mail until your Direct Deposit account has been established. Please note, it can take up to 30 calendar days after the date of your request to start Direct Deposit with your bank. You will receive an email with more information.

Click the Sign and Submit button to electronically sign your request and submit it for processing.

☒ I, PA IHSS agree to the terms above.

Sign and Submit Cancel Submit

TAXES



- To find your W-2, go to the “Financial” tab, then look for “Taxes” and click on “W-2 Forms”
- You will see the most recent year’s W-2
 - To see an earlier year’s W-2, click on the drop-down arrow in the “Select a Tax Year” box, then click on the year you would like to review

TAXES

Select a Tax Year

2024

JANE DOE

Recipient ID: 0112233

View W-2

JACK SMITH

Recipient ID: 0006789

View W-2

Download W-2

W-2 Form

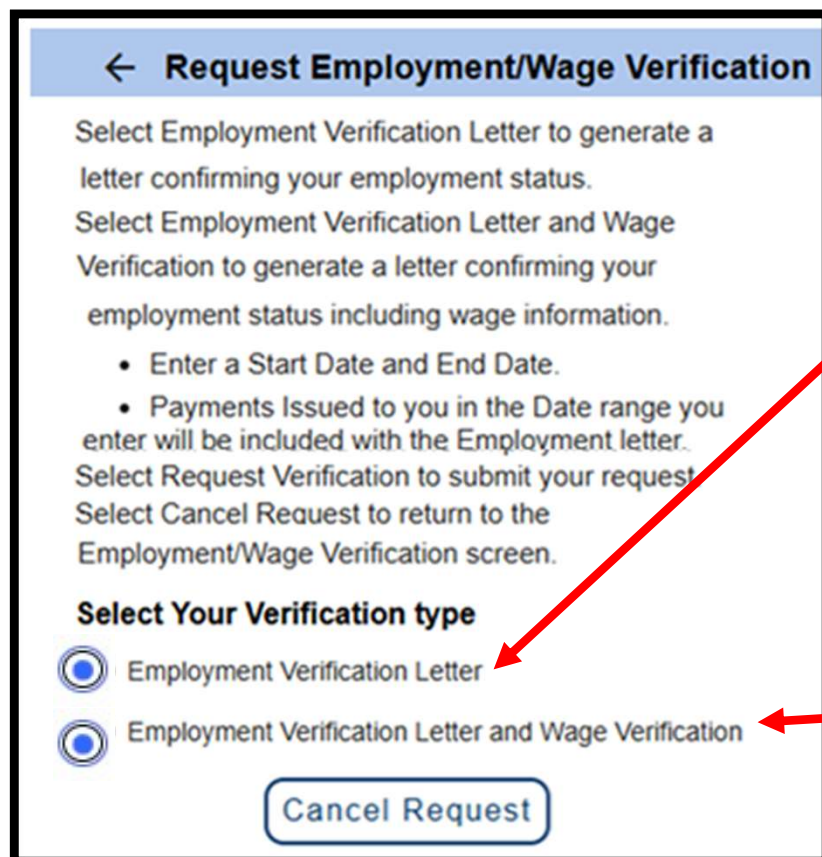
- *If you have more than one recipient, choose the recipient you would like to view the W-2 for by clicking on “View W-2” to the right side of their name*
- *You can directly view your W-2 online or click the “Download W-2” button to save a copy on your device*

REQUEST EMPLOYMENT VERIFICATION



- *IHSS Providers can request employment and wage verification through the ESP*
- *Go to the “Financial” tab and click on “Employment/wage verification”*
- *On the next page, you can request a new verification or download past request*

REQUEST EMPLOYMENT VERIFICATION



← Request Employment/Wage Verification

Select Employment Verification Letter to generate a letter confirming your employment status.

Select Employment Verification Letter and Wage Verification to generate a letter confirming your employment status including wage information.

- Enter a Start Date and End Date.
- Payments Issued to you in the Date range you enter will be included with the Employment letter.

Select Request Verification to submit your request

Select Cancel Request to return to the Employment/Wage Verification screen.

Select Your Verification type


☒ Employment Verification Letter

☒ Employment Verification Letter and Wage Verification

Cancel Request

- *If you need a letter to confirm your employment status, click on the circle to the left of “Employment Verification letter”*
- *If you need a letter to confirm your employment status with your wage information. Click the circle to the left of “Employment Verification letter and Wage Verification”*

REQUEST EMPLOYMENT VERIFICATION



The diagram illustrates the process of requesting employment verification. It shows two versions of a form. The left form is a simplified version with two radio button options: 'Employment Verification Letter' (selected) and 'Employment Verification Letter and Wage Verification'. A red circle highlights the 'Request Verification' button. A red arrow points from this button to the right form. The right form is more detailed, showing the same radio button options, but the 'Employment Verification Letter and Wage Verification' option is selected. It also includes a 'Select Date Range' section with 'Start Date*' and 'End Date*' fields, both containing the date '01/01/2025' and '01/30/2025' respectively. A red circle highlights the 'Request Verification' button in this form as well.

Select Your Verification type

☒ Employment Verification Letter

☐ Employment Verification Letter and Wage Verification

Request Verification **Cancel Request**

Select Your Verification type

☐ Employment Verification Letter

☒ Employment Verification Letter and Wage Verification

Select Date Range:

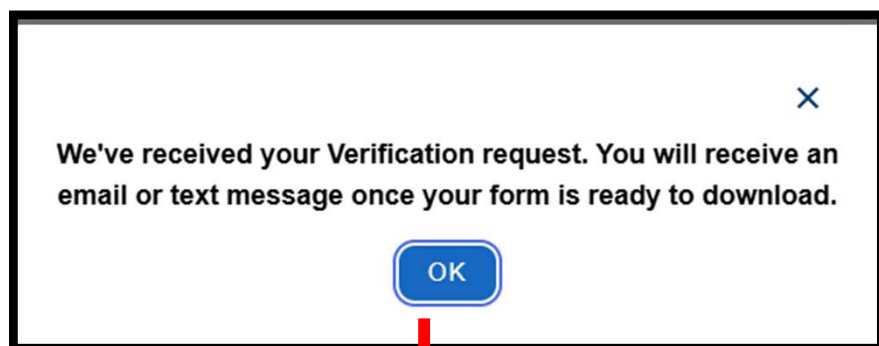
Start Date* **End Date***

01/01/2025 01/30/2025

Request Verification **Cancel Request**

- *If you need an employment verification letter, click on “Request Verification”*
- *If you need an employment verification letter with wage verification, you will need to enter the date range before clicking on “Request Verification”*

REQUEST EMPLOYMENT VERIFICATION



The main interface is titled "Employment/Wage Verification". It contains instructions: "Select the Request New Verification button to request a new Employment or Wage Verification Letter. Verification forms you have requested previously are displayed in Requested Verifications. Select the Download button to download your letter." Below the instructions is a blue button labeled "Request New Verification". Under the heading "Requested Verifications", there are two entries. The first entry is "Employment And Wage Verification" with "Status: Ready to download", "Request Date: 01/06/2025", and "Date Range: 12/01/2024 - 01/06/2025". A blue "Download" button is circled in red. The second entry is "Employment Verification" with "Status: Ready to download", "Request Date: 12/31/2024", and "Status: Pending" (circled in red).

- You will see a notification message letting you know that you'll get an email or text message when the letter is available to download from the ESP
 - The request will show "Pending" until the letter is ready to be downloaded
- When you are notified that it is ready, it can be found under "Requested Verifications". Go to the verification you need and click the "Download" button

CONGRATULATIONS!



- *You now know how to setup and review financial information on the ESP. You can now:*
 - *Certify Live-in status*
 - *View payroll history*
 - *Set up and change direct deposit*
 - *View tax documents*
 - *Request employment verification*
- *Review the “Timesheet” module to learn how to submit timesheet for payment through the ESP*

If you have questions or issues with the ETS or timesheets, call the ETS Helpdesk:

(866) 376-7066, Option 1



PUBLIC AUTHORITY
SANTA CLARA COUNTY

Public Authority Services

by Sourcewise

www.pascc.org

