

In-Home Supportive Services CMIPS II Timesheet Packet

Timesheets **MUST** be mailed with correct postage to:

**IHSS Timesheet Processing Facility
PO BOX 2380
Chico, CA 95927-2380**

DO NOT drop timesheets off at any County of San Bernardino office.

DO NOT mail timesheets to any County of San Bernardino office.

Paycheck questions? Please call: Paycheck Customer Service Hotline **1-800-722-4595**

Direct Deposit questions? Please call: Direct Deposit Hotline **1-866-376-7066**

DO NOT call to check on timesheet/paycheck status until 10 business days from the date that the timesheet was mailed.

Visit the DAAS or PA websites for additional timesheet assistance and forms:

<http://hss.sbcounty.gov/daas/>

<http://hss.sbcounty.gov/pa/>

\$\$\$ IHSS TIMESHEET TIPS - GET YOUR MONEY FASTER \$\$\$

- **DO NOT** use white out
- **DO NOT** write more than one number per box
- **DO NOT** attach or staple anything to your timesheet
- **DO NOT** write in boxes marked with **00:00**
- **DO NOT** use box 16 unless it is necessary
- **DO NOT** fold your timesheet
- **DO NOT** put anything in the envelope with your timesheet
- **DO NOT** use decimals, fractions, letters or symbols
- **DO NOT** write additional notes anywhere on timesheet
- **DO NOT** write address change on timesheet

DO:

- Write only within boxes specified
- Write clearly and legibly
- Write time in hours and minutes
- Write in black ink only
- Turn the timesheet over to sign and have your recipient sign your timesheet
- Double check your timesheet
- Use correct postage
- Write return address on timesheet envelope

**MAKE SURE YOU WRITE YOUR RETURN ADDRESS IN
THE TOP LEFT CORNER OF THE ENVELOPE!!**

CORRECT

CORRECTO

Provider #		Type	
Provider Name		IHSS	
Recipient Case #		Remaining Hrs	
Recipient Name		090:54	

Fill in time for each day worked
 Anote el tiempo para cada día que en haya trabajado.
 Լրացրեք ամեն օրվա աշխատանքի ժամերը
 填寫每日工作的時數

Days of the Month	Hours	Minutes	Minutes
1st	1	3	0
2nd			
3rd	2	4	5
4th			
5th	1	0	0
6th			
7th	3	1	5
8th	2	0	0
9th	1	4	5
10th			
11th			
12th	2	1	5
13th	1	3	0
14th			
15th			
Total	2	5	0

Timesheet # 1000015597
 Pay Period - 12/01/2012 to 12/15/2012

Pay based on daily hours
 Pago basado en las horas diarias
 Կարձավճարը ըստ օրական աշխատատևի
 款項將會依據每日的時數

This shows 10 hours worked that day

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8th	2	0	0
9th	1	4	5
10th			
11th			
12th	2	1	5
13th	1	3	0
14th			
15th			
Total	2	5	0

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 款項將會依據每日的時數

Este día demuestra 10 horas trabajadas

- Record your work in HOURS & MINUTES.
- Write only one number per box.
- Stay in the lines.
- Use only black ink.
- Include provider & recipient signatures & date on the back of the timesheet.
- Mail your timesheet to the NEW address.
- Test your pen before completing your timesheet.

- Escriba sus horas trabajadas en HORAS y MINUTOS.
- Escriba un número por casilla.
- Escriba dentro de la casilla.
- Use tinta negra solamente.
- Incluya firmas y la fecha detrás de la hoja de tiempo.
- Envié su hoja de tiempo a la nueva dirección.
- Pruebe su pluma antes de llenar su hoja de tiempo.

**In-Home Supportive Services
Case Management Information and Payrolling System II (CMIPS II)
Time Conversion Table**

CMIPS II will use the numbers in the table below to convert decimal to minutes.								
Decimal	Minutes	Rounded Minutes	Decimal	Minutes	Rounded Minutes	Decimal	Minutes	Rounded Minutes
0.00	0.00	0	0.41	24.60	25	0.81	48.60	49
0.01	0.60	1	0.42	25.20	25	0.82	49.20	49
0.02	1.20	1	0.43	25.80	26	0.83	49.80	50
0.03	1.80	2	0.44	26.40	26	0.84	50.40	50
0.04	2.40	2	0.45	27.00	27	0.85	51.00	51
0.05	3.00	3	0.46	27.60	28	0.86	51.60	52
0.06	3.60	4	0.47	28.20	28	0.87	52.20	52
0.07	4.20	4	0.48	28.80	29	0.88	52.80	53
0.08	4.80	5	0.49	29.40	29	0.89	53.40	53
0.09	5.40	5	0.50	30.00	30	0.90	54.00	54
0.10	6.00	6	0.51	30.60	31	0.91	54.60	55
0.11	6.60	7	0.52	31.20	31	0.92	55.20	55
0.12	7.20	7	0.53	31.80	32	0.93	55.80	56
0.13	7.80	8	0.54	32.40	32	0.94	56.40	56
0.14	8.40	8	0.55	33.00	33	0.95	57.00	57
0.15	9.00	9	0.56	33.60	34	0.96	57.60	58
0.16	9.60	10	0.57	34.20	34	0.97	58.20	58
0.17	10.20	10	0.58	34.80	35	0.98	58.80	59
0.18	10.80	11	0.59	35.40	35	0.99	59.40	59
0.19	11.40	11	0.60	36.00	36			
0.20	12.00	12	0.61	36.60	37			
0.21	12.60	13	0.62	37.20	37			
0.22	13.20	13	0.63	37.80	38			
0.23	13.80	14	0.64	38.40	38			
0.24	14.40	14	0.65	39.00	39			
0.25	15.00	15	0.66	39.60	40			
0.26	15.60	16	0.67	40.20	40			
0.27	16.20	16	0.68	40.80	41			
0.28	16.80	17	0.69	41.40	41			
0.29	17.40	17	0.70	42.00	42			
0.30	18.00	18	0.71	42.60	43			
0.31	18.60	19	0.72	43.20	43			
0.32	19.20	19	0.73	43.80	44			
0.33	19.80	20	0.74	44.40	44			
0.34	20.40	20	0.75	45.00	45			
0.35	21.00	21	0.76	45.60	46			
0.36	21.60	22	0.77	46.20	46			
0.37	22.20	22	0.78	46.80	47			
0.38	22.80	23	0.79	47.40	47			
0.39	23.40	23	0.80	48.00	48			
0.40	24.00	24						

**IN-HOME SUPPORTIVE SERVICES (IHSS) PROGRAM
PROVIDER OR RECIPIENT
CHANGE OF ADDRESS AND/OR TELEPHONE**

1. CHECK ONE BOX ONLY:

PROVIDER RECIPIENT

2. PROVIDER NUMBER OR RECIPIENT CASE NUMBER

3. NAME	FIRST	MIDDLE	LAST	COUNTY NAME
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4. HOME ADDRESS	STREET	CITY	STATE	ZIP CODE
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5. MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE
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6. NEW HOME ADDRESS	STREET	CITY	STATE	ZIP CODE
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7. NEW MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE
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8. TELEPHONE NUMBER

HOME _____ WORK _____ CELL _____

9. NEW TELEPHONE NUMBER

HOME _____ WORK _____ CELL _____

SIGNATURE

DATE

IHSS PROVIDERS NOTICE OF NEW TIMESHEETS PLEASE KEEP FOR FUTURE USE

As of _____ the IHSS program in your county will be getting a new payroll system that
MM/YY
will use a New IHSS Timesheet. You will be receiving the New IHSS Timesheet with your paycheck (a sample of the New Timesheet is enclosed). This notice gives you information about the New Timesheet. It is important that you read and follow the instructions provided in this notice in order to be paid correctly and on time for the hours of IHSS service you provide.

Where Timesheets are Processed for Payment: New Timesheets will be processed at a Timesheet Processing Facility (TPF) in Chico, California. **They will NOT be processed at the county IHSS office. You need to mail all New Timesheets to the Chico facility.**

The envelope you receive with the New Timesheet will have the TPF address printed on it. The TPF address is also on the back of the New Timesheet if the envelope is lost. **DO NOT** mail or drop off the New Timesheet to any county IHSS office; this will cause a **DELAY** in receiving your paycheck. Old-style timesheets should still be sent to the county IHSS payroll office.

When to Send Timesheets: Send timesheets promptly at the end of each pay period. There are two pay periods each month.

- The first pay period ends on the 15th of the month and the second pay period ends on the last day of the month. If you send your timesheet in early, it will either be rejected for payment or held until the end of the pay period.
- If time is claimed after the date the timesheet is received, it will be rejected for payment. For example, if the timesheet is received at the TPF on the 10th of the month and hours are entered on the timesheet for the 14th of the month, it will be rejected for payment. You will have to get another timesheet from the county IHSS payroll office, fill it out and have it signed and then send it to the TPF.
- If time is not claimed after the date the timesheet is received it will be held until the end of the pay period to be processed. For example, if the timesheet is received at the TPF on the 10th of the month but no hours are entered on the timesheet after the 10th of the month, the timesheet will be held until the end of the pay period to be processed.
- If you stop working for a recipient, you **MUST immediately** notify the county IHSS office of your work end date. You may then submit your timesheet at the end of your last work day and it will be processed upon receipt.

What to Send to the Timesheet Processing Facility (TPF): Send only your timesheet to the Timesheet Processing Facility. Do not send any other documents to the TPF. The TPF will **NOT** process any other information. If you or your recipient sends other information it will **DELAY** the county receiving this information. If you have other information to report to the IHSS program, send it to the county IHSS office – **Do not mail it to the TPF.**

How to Claim Your Worked Time: On the new timesheet, you will write the time you worked in **hours and minutes** each day. You no longer need to change minutes to decimals. For example, if you work 4 hours and 45 minutes, you would enter 4 in the “Hours” boxes and 45 in the “Minutes” boxes (see example on enclosed sample Pay Stub).

What Time to Claim: The IHSS recipient you work for is authorized time to receive specific domestic and related and personal care services. The IHSS program only pays for authorized hours and services. The time you work performing authorized services is the only time for which you can be paid by the IHSS program. The recipient or their representative is responsible for scheduling these services to ensure the recipient’s needs are met throughout the month.

If too many of the recipient’s authorized hours are used during the first pay period, their needs may not get met during the rest of the month. Timesheets claiming too many hours in the first pay period will be reviewed and you or the recipient you work for may be contacted to discuss the hours being claimed. This may **DELAY** your paycheck.

Completing the New Timesheet: You **MUST** use black ink to complete the timesheet. You **MUST NOT** use pencil; **MUST NOT** fold the timesheet; and **MUST NOT** write anything on the timesheet except time worked (hours and minutes), signature and date.

Signing and Dating New Timesheet: New timesheets must be signed and dated on the back side by both you and your recipient. Timesheets submitted without both signatures will be rejected for payment. You and your recipient will have to complete another timesheet. This will create a **DELAY** in receiving your paycheck.

How to Report a Change of Address: If you move, you **MUST immediately** complete a change of address form that you get from and return to the county IHSS payroll office. **DO NOT** report your new address on the new timesheet. IHSS paychecks **will not** be forwarded by the post office. If the payroll system does not have your correct address, your paycheck will be returned to the State Controller’s Office as undeliverable.

KEEP THIS NOTICE FOR USE IN COMPLETING THE NEW TIMESHEET.

CONTACT THE COUNTY IHSS PAYROLL OFFICE IF YOU HAVE QUESTIONS OR NEED ASSISTANCE COMPLETING THE NEW TIMESHEET.

New Timesheet – Back
This is a sample – DO NOT USE

Cómo llenar el reporte de horas trabajadas

1. Anote las **horas y minutos** trabajados en las casillas al lado de la fecha en que trabajó.
2. **Solamente** use una pluma con tinta azul o negra.
3. **Solamente** escriba en las casillas para horas, minutos, firma y fecha del reporte de horas trabajadas.
4. El Programa de Servicios de Apoyo en el Hogar (IHSS) **no** pagará más de las horas autorizadas.
5. El pago estará basado en las horas diarias.
6. **No** tache ni use corrector blanco en el reporte de horas trabajadas.
7. Asegúrese que el beneficiario y el proveedor hayan firmado y puesto la fecha en el reverso del reporte de horas trabajadas.
8. **No doble el reporte de horas trabajadas.**

Ինչպես լրացնել ժամանակացույցը

1. Ներմուծեք աշխատած ժամերն ու րոպեները ձեր աշխատած օրվա ամսաթվի կողքը՝ բառակառու մեջ:
2. Օգտագործեք միայն կապույտ եւ սև գրիչ:
3. Մի գրեք ժամացուցակի վրա, բացի ժամերից, րոպեներից, ստորագրությունից եւ ամսաթվից:
4. IHSS ծրագիրը լիազորված աշխատատեղից դուրս չի վճարի:
5. Վարձավճարը կլինի ըստ օրական աշխատատեղի:
6. **Մի գծեք** կամ սպիտակացրեք ժամացուցակի վրա:
7. Համոզված եղեք որ եւ՝ սպասարկողը, եւ՝ ստացողը ստորագրեն եւ ամսաթիվը նշեն ժամացուցակի ետևում:
8. Մի ծալեք ժամացուցակը:

如何填寫時間表

1. 在你工作日期旁的方匣填寫工作的時數和分鐘。
2. 只能使用藍色或黑色鋼筆。
3. 除了在時數、分鐘、簽名、和日期的方匣外，不要在時間表其它地方書寫。
4. IHSS計劃不會支付多過特許的時數。
5. 款項將會依據每日的時數。
6. 不要在時間表上刪劃或使用塗改液。
7. 確定接受者和服務提供人在時間表背面簽名和填上日期。
8. 請勿摺疊時間表。

Detach Timesheet before mailing (Save the Top portion for your information)

I declare that the information on this timesheet is true and correct. I understand that any false claim may be prosecuted under Federal and State laws and that if convicted of fraud, I may also be subject to civil penalties.

Declaro que la información en este reporte de horas trabajadas es verdadera y correcta. Entiendo que cualquier declaración falsa puede ser enjuiciada bajo las leyes federales y estatales y que si me condenan de fraude, es posible que también esté sujeto a sanciones civiles.

Ես հայտարարում եմ, որ այս հաշվեցուցակում ներկայացված տեղեկությունը ճշմարիտ և ճշգրիտ է: Ես հասկանում եմ, որ յուրաքանչյուր կեղծ հայտարարություն կարող է հետապնդվել դատական կարգով Դաշնային և Նահանգային օրենքների համաձայն, և, եթե ես դատապարտվեմ խարդախության համար, ապա ես կարող եմ նաև ենթարկվել քաղաքացիաիրավական պատժամիջոցների:

我聲明在這時間表的資料是真實和正確的。我明白任何偽造的申請會被聯邦和州法律所檢控，而且如果詐騙罪名成立，我可能也將受到民事處罰。

Mail Detached Timesheet To: IHSS Timesheet Processing Facility, PO BOX 2380 Chico, CA 95927-2380

Recipient Signature	Date	Provider Signature	Date
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-Do Not Fold Timesheet-