

WAIVER PERSONAL CARE SERVICES (WPCS) FREQUENTLY ASKED QUESTIONS

Department of Health Care Services
Integrated Systems of Care Division

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WPCS OVERVIEW

Program History

Waiver Personal Care Services (WPCS) benefit was established by legislation in 1998,¹ and is designed to assist waiver participants with remaining safely in their residence and continuing to be part of the community, and includes the following services, as described in the Home and Community Based Alternatives Waiver:

- **Assistance to Independence in Activities of Daily Living (ADL):** Assisting the participant in reaching a self-care goal, the WPCS provider promotes the participant's ability in obtaining and reinforcing his/her highest level of independence in ADLs. The WPCS provider provides assistance and feedback to the participant in an effort to help him/her reach specific self-care goals in performing or directing his/her caregivers in an activity without assistance from others. Services provided by the WPCS provider are verbal cueing, monitoring for safety, reinforcement of the participant's attempt to complete self-directed activities, advising the primary caregiver of any problems that have occurred; providing information for updating the participant's POT and addressing any self-care activities with an anticipated goal completion date.
- **Adult Companionship:** Adult companionship is for waiver participants who are isolated and/or may be homebound due to his/her medical condition. Adult companions must be at least 18 years of age and able to provide assistance to

¹ Welfare & Institutions Code section 14132.97.

participants enrolled in the waiver. Waiver participants utilizing Adult Companionship must be at least 18 years old. Adult Companion services include non-medical care, supervision, and socialization provided to a waiver participant. To help maintain a waiver participant's psychological wellbeing, adult companions may assist waiver participants in accessing self-interest activities or accessing activities in the local community for socialization and recreational purposes, and/or providing or supporting an environment conducive to interpersonal interactions.

- The WPCS Benefit While Participant is Admitted to a Health Care Facility:** WPCS providers may be paid while the participant is admitted to a health care facility for services provided outside the health care facility setting for a maximum of seven (7) days for each admission to a health care facility (or for the length of the admission to the health care facility, whichever period is shorter). This payment is necessary to retain the WPCS provider for the continuation of services and facilitate the waiver participant's transition back to his/her home environment. In order to receive WPCS benefits while admitted to a health care facility, the waiver participant must be enrolled and currently receiving State Plan Personal Care Services as authorized by WIC section 14132.95 and receiving WPCS benefits within the prior month of the admission into the health care facility.

Each time the participant is admitted to a health care facility, the WPCS provider must submit written documentation to the Waiver Agency or the Department of Health Care Services (DHCS) describing the specific activities performed, the amount of time each activity required, and the total hours they worked (e.g., 7:00 a.m. to 11:00a.m. and 2:00 p.m. to 4:00 p.m.). While the participant is admitted to a health care facility the WPCS provider can provide:

1. Routine housekeeping in the participant's absence;
2. Collection of mail and other deliverables in the participant's absence and contacting or visiting the participant to assist in responding to mail;
3. Food shopping for the participant's return to home;
4. Assistance in obtaining medications and medical supplies for the participant's return home; and
5. Availability to accept delivery of durable medical equipment and supplies at the participant's home.

WPCS providers will not be paid for care that duplicates the care that is required to be provided by the health care facility during the participant's admission. This type of care may include but is not limited to: bathing, feeding, ambulation, or direct observation of the waiver participant.

WPCS are services authorized by DHCS, for Medi-Cal beneficiaries enrolled in either the In-Home Operations (IHO) Waiver or the Home- and Community-Based Alternatives (HCBA) Waiver.

WPCS ELIGIBILITY AND ENROLLMENT

Who is eligible to receive WPCS?

To qualify to receive WPCS services, an individual must meet all of the following criteria:

- be enrolled in either the IHO or HCBA Waiver; and
- be receiving State Plan personal care services through In Home Supportive Services (IHSS); and
- has a doctor's order that specifies that he or she requires waiver personal care services in order to remain safely in his or her own home. The WPCS must be described in the participant's current primary care physician-signed POT.

If an individual meets the criteria listed above and would like to enroll in the WPCS program, they can call the DHCS, Integrated Systems of Care Division (ISCD) at: (916) 552-9105 to request assistance in adding WPCS to their Menu of Health Services.

Who is eligible to become a WPCS provider?

To qualify to become a WPCS provider, the individual:

- cannot be the parent of the minor Medi-Cal beneficiary (under age 18) the provider is serving and;
- cannot be the spouse of the Medi-Cal beneficiary the provider is serving and;
- must be at least 18 years of age.

While a prospective WPCS provider must complete the IHSS provider enrollment process, they are not required to be an active IHSS provider (claiming IHSS hours) for the WPCS participant.

If an individual meets all of the WPCS provider requirements, he/she can call ISCD at (916) 552-9105 to request a WPCS Provider Packet. The WPCS Provider Packet will include instructions for completing the required documents.

Can an IHSS provider also be a WPCS provider?

Yes. An IHSS provider can also be a WPCS provider. For more information about this, please contact the ISCD at: (916) 552-9105 and request to speak with a representative in the WPCS program.

Can documents be faxed? No. All required documents must be sent via postal mail to the address specified on the documents.

Alternate Provider Options In addition to individual providers, WPCS participants have an option to receive case management services through an approved agency provider. Case management services may be facilitated by one of the following:

- Waiver Agency
- Personal Care Agency (PCA)
- Home Health Agency (HHA)
- Individual Nurse Provider (INP)
- Professional Corporation
- Congregate Living Health Facility (CLHF)

For more information about approved agency providers, applicants, participants, or providers can contact the WPCS program at: (916) 552-9105 or visit www.dhcs.ca.gov

WPCS TIMESHEETS

When do WPCS providers receive timesheets? After the provider has met the eligibility criteria for enrollment, the provider will be added to the WPCS payroll system. Initial timesheets will then be mailed to the WPCS provider's mailing address. The WPCS timesheet for the next work period will automatically be issued once a payment for the previous work period has been made. If no time is claimed for a work period or if a timesheet is not submitted for a work period, a timesheet for the next work period will not be issued. If this occurs the WPCS provider must call the ISCD main line at (916) 552-9105 to request a timesheet for the next work period.

When to submit timesheets for payment? The WPCS timesheet should be mailed by the provider after the end of each work period. Timesheets mailed prior to the end of the work period will be returned to the WPCS provider with a replacement timesheet. A self-addressed envelope is included with each WPCS timesheet. In addition, the mailing address is included on each timesheet.

Where should WPCS timesheets be mailed? WPCS timesheets should be mailed by the provider to the appropriate address:

IHSS Timesheet Processing Facility
IHSS Timesheet Without Travel
 PO Box 989740
 West Sacramento, CA 95798-9740

IHSS Timesheet Processing Facility
IHSS Travel Timesheet
 PO Box 989780
 West Sacramento, CA 95798-9780

IHSS Timesheet Processing Facility
IHSS Large Font Timesheet
 PO Box 2340
 West Sacramento, CA 95691-2340

ELECTRONIC TIMESHEETS

What other methods are available for submitting timesheets?

An Electronic Timesheet option for WPCS and IHSS is available. Both the WPCS participant and WPCS provider must agree to use the Electronic Timesheet System (ETS). To register for ETS, visit <https://www.etimesheets.ihss.ca.gov>. Select the “New User Registration” link and follow the online prompts. If you need assistance, please call the ETS Help Desk at (866) 376-7066.

WPCS AUTHORIZATION AND ASSESSMENT OF HOURS

Who authorizes WPCS hours for the participant?

Each waiver participant is assigned to a DHCS Registered Nurse (R.N.). The assigned nurse (or case manager) will evaluate the waiver participant, as needed, to determine if WPCS is appropriate for his/her care needs. WPCS hours will be assessed and authorized based on medical necessity and the participants needs.

A participant will not be authorized to receive more than 24 hours per day of direct care and/or protective supervision regardless of the funding source.

How many hours can a WPCS provider claim?

A WPCS provider can work up to a maximum of 12 hours per day of both WPCS and IHSS hours combined.² If a WPCS provider is working for one participant, the maximum number of hours the provider can claim in one workweek is 66 hours of WPCS and IHSS combined.³ There are exemptions to this rule. Exemption requirements are discussed on page 7 of this document.

Who is responsible for monitoring and assigning hours?

WPCS participants (or their legal representatives) and their providers are responsible for ensuring they do not exceed the maximum allowable hours in one workweek. In addition, they are also responsible for ensuring the information reported on each timesheet is accurate and meets the criteria outlined above.

What is considered a workweek?

A workweek begins at 12:00 a.m. on Sunday and ends at 11:59 p.m. the following Saturday.

² Welfare & Institutions Code section 14132.99(d)(2), and HCBA Waiver, Appendix C, Personal Care Services

³ Welfare & Institutions Code sections 12300.4(b)(2), and 14132.99

HOURLY AND OVERTIME PAY RATES

What is a WPCS provider's hourly pay rate? The WPCS provider hourly pay rate is the same as the County IHSS hourly pay rate. These rates may differ depending on the county the WPCS provider works in.

What is the overtime pay rate? The overtime hourly pay rate is one and a half times the regular hourly pay rate.

What is considered overtime? Overtime is any time the provider works over 40 hours in a workweek, regardless of how many Medi-Cal beneficiaries the provider serves.

CONSEQUENCES FOR EXCEEDING WEEKLY TIME LIMIT

What happens if a Provider of WPCS exceeds the weekly time limit? If a timesheet has hours that exceed the provider weekly limits, the provider will receive a violation. The consequences for each violation are as follows:

First Violation	A violation notice and dispute rights will be mailed to the WPCS provider. A copy of the violation notice will also be mailed to the WPCS participant.
Second Violation	A violation notice, dispute rights, and training packet will be mailed to the WPCS provider. A violation notice will also be mailed to the WPCS participant. The WPCS provider has a one-time option to review the training material and return the training completion form to DHCS, in order to remove his/her second violation.

Third Violation	A violation notice and State Administrative Review rights information will be mailed to the WPCS provider and WPCS participant. The WPCS provider will be suspended for 90 days from WPCS and IHSS.
Fourth Violation	A violation notice and State Administrative Review rights information will be mailed to the WPCS provider and WPCS participant. The WPCS provider will be terminated for one year from WPCS and IHSS.

Can a WPCS provider dispute a violation?

Yes. In order to dispute a violation, the WPCS provider must submit the dispute form within ten calendar days from the date listed on the first or second violation notice. DHCS then has ten calendar days to review the violation and send a copy of the notice, with information regarding the outcome of the dispute review to the WPCS provider and WPCS participant.

For third and fourth violations, the WPCS provider may request a State Administrative Review of the violation. The notice includes instructions on how the WPCS provider can request the review. Disputes and State Admin Reviews will not be handled over the phone. The provider must complete the appropriate documents that are included with the violation notice.

Do violations remain on a WPCS provider's record?

Yes, violations remain on a WPCS provider's record. However, the number of violations a provider has will be reduced by one for each year they are a provider and don't receive another violation.

Can an individual re-enroll after being terminated for one year?

Yes. The individual must complete the WPCS provider enrollment process again. This includes re-enrolling as an IHSS provider.

EXEMPTIONS

Are there any exemptions to the workweek limits?

There are exemptions that allow a WPCS provider to work up to a maximum of 12 hours per day or 360 hours per month of both WPCS and IHSS combined, but not to exceed the WPCS recipient's total monthly authorized hours:

DHCS shall grant an exemption to the 66 hour work-week limit for a provider if all three of the following criteria are met:

1. The WPCS recipient was enrolled in either the IHO Waiver or the HCBA Waiver on January 31, 2016, **and**
2. The WPCS recipient's medical or behavioral needs require that the services to the WPCS recipient be provided by the requested provider, **and**
3. One of the following circumstances exists:
 - The WPCS provider lives in the same home as the WPCS participant; or
 - The WPCS provider is now giving care to the WPCS participant and has done so for two or more years without a break; or
 - The participant is unable to find a provider who speaks the same language

For participants who enrolled in the HCBA Waiver or IHO Waiver **after** January 31, 2016, exemptions to the 66 hour work-week limit per provider may be granted on a case-by-case basis. In evaluating the request for exemption, DHCS will consider whether any of the criteria listed above are met.

How do I request an exemption?

To request an exemption, the WPCS provider and WPCS participant must complete an exemption form and mail it to DHCS. A notice advising the provider that they have been approved or denied will be mailed to both the participant and provider following a review of their request.

To request an exemption form, you may call the ISCD main line at (916) 552-9105 or access the exemption form online at: <http://www.dhcs.ca.gov>.

TRAVEL TIME

What is travel time?

If a WPCS provider works for more than one participant for either WPCS or IHSS, he/she can be paid up to seven hours per workweek for the time it takes them to travel directly from the location where they provided care for one participant to another location where they provide services for a different participant on the same day.

Travel time does not include the time it takes a WPCS provider to travel from his/her own home to the location where he/she provides services for a participant or back home after his/her work shift is completed. The time spent traveling between participants'

locations does not count toward the maximum weekly hours and is not deducted from the participant's monthly authorized hours.⁴

How can I get paid for travel time?

A WPCS Provider workweek and Travel Time Agreement Form is included in the WPCS Provider Packet that is mailed to individuals who request to become a new WPCS provider. The WPCS provider or WPCS participant can call the ISCD main line at (916) 552-9105 to request the WPCS Provider workweek and Travel Agreement Form.

If the WPCS provider qualifies for travel pay, a Travel Claim form will be mailed to the WPCS provider along with their regular WPCS timesheet. The Travel Claim form is to be submitted with the WPCS timesheet.

WPCS PROVIDER PAYMENTS

How often is a WPCS provider paid?

There are two work periods each month. The first work period is from the 1st day of the month to the 15th of the month. The second work period is from the 16th of the month to the last day of the month. One payment will be issued for each work period a provider submits a timesheet for.

How long does it take to receive payment?

It takes approximately ten business days after the Timesheet Processing Facility receives the WPCS timesheet, to receive a payment, as long as there are no errors on the timesheet. Payments may be delayed if there are errors on the timesheet.

If a WPCS provider has submitted a WPCS timesheet and it has been more than ten days, please call the ISCD main line at (916) 552-9105.

Is there an option to have payments direct deposited?

Yes. Please call 1-866-376-7066 to get more information about the process for setting up payments via direct deposit. Please note: If a provider signs up for direct deposit of IHSS payments, they will also receive WPCS payments via direct deposit as well.

CONTACT INFORMATION

For information about:	Contact:
<ul style="list-style-type: none"> • WPCS participant authorized hours • Changing Waiver Services • Adding a new care provider 	The WPCS participant's assigned care manager

⁴ Welfare & Institutions Code section 12300.4(f).

The WPCS Program, Provider Enrollment and Payroll	ISCD Main Line (916) 552-9105 (Select the option for the WPCS Program)
IHSS Information	County IHSS office or visit: www.cdss.ca.gov
Direct Deposit Enrollment and Cancellation	(866) 376-7066
Electronic Timesheet Service	(866) 376-7066

If you have additional questions please call ISCD at (916) 552-9105, Monday-Friday from 8:00 a.m. to 5:00 p.m.