



Santa Clara County  
Social Services Agency

## “Who do I Contact?” For Independent Providers and Recipients of In-Home Supportive Services (IHSS)

### Contact In-Home Supportive Services (IHSS) when:

- You need to report an Independent Provider work injury
- You need information on how to change your address, phone number, name, etc.
- Overtime inquiries: email [ihss-flsa@ssa.sccgov.org](mailto:ihss-flsa@ssa.sccgov.org) or call IHSS; choose language; choose “Recipient” (option 1) and “Overtime” (option 2) or choose “Provider” (option 2) and “Overtime” (option 1)

To sign up for the Electronic Services Portal for timesheets: [etimesheets.ihss.ca.gov](http://etimesheets.ihss.ca.gov)

To complete or approve/reject telephone timesheets, call (833) 342-5388

Call the service desk if you need help with electronic timesheets, direct deposit, etc: (866) 376-7066, Option 1

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|--|---|--|--------------------------------|
| ■ <b>Email:</b><br>IHSS.SCC@ssa.sccgov.org | ■ <b>Mailing Address:</b><br>IHSS Social Services<br>P.O. Box 11018<br>San Jose, Ca. 95103-1018 | ■ <b>Office:</b><br>IHSS Social Services<br>353 West Julian Street<br>San Jose, CA 95110 | ■ <b>Fax:</b> (408) 792-1601   |
|  |   |  | ■ <b>Phone:</b> (408) 792-1600 |

### Other Helpful Contacts:

For Santa Clara County’s Area Agency on Aging—Sourcewise—visit [mysourcewise.com](http://mysourcewise.com) or call (408) 350-3200

For Medi-Cal information, visit [dhcs.ca.gov/individuals](http://dhcs.ca.gov/individuals) or call the automated Infoline: (877) 962-3633 or (408) 758-3600

For the Medi-Cal fraud hotline, call (800) 822-6222

For California Benefits Center (CalFresh, CalWORKS, general assistance, etc.), visit [benefitscal.com/](http://benefitscal.com/) or call (408) 758-3800 or TTY (408) 758-4361

For the Social Security Administration (SSA), visit [ssa.gov/](http://ssa.gov/) call (800) 772-1213

For the Service Employees International Union (SEIU) member action center, visit [seiu.org](http://seiu.org) or call (855) 810-2015

For Live-in Self-Certification Form (SOC 2298), visit [cdss.ca.gov/inforesources/ihss/live-in-provider-self-certification](http://cdss.ca.gov/inforesources/ihss/live-in-provider-self-certification)

For tax forms (W-2, W-4, DE-4), visit [irs.gov](http://irs.gov) or [ftb.ca.gov/index.html](http://ftb.ca.gov/index.html)

For VHP provider medical coverage verification form 1095B, call (888) 421-8444 or email [memberservices@vhp.sccgov.org](mailto:memberservices@vhp.sccgov.org)





Call Public Authority Services by Sourcewise for the following services, or visit [pascc.org](http://pascc.org)

Visit [ihss.pascc.org](http://ihss.pascc.org) to begin the enrollment process to become an In-Home Supportive Services (IHSS) provider



**Call (408) 350-3252 Public Authority Enrollment when:**

- You have challenges with the IHSS Independent Provider enrollment website
- You need information about the State requirements for becoming an IHSS provider



**Call (408) 350-3290 Public Authority Benefits when:**

- You need information about IHSS Independent Provider medical, dental, or vision benefits
- You need to know the eligibility criteria and cost of coverage for IHSS Independent Provider benefits
- You need to request an application for IHSS Independent Provider benefits
- You need information on the free transportation/VTA SmartPass Clipper Card
- You need written verification of medical coverage



**Call (408) 350-3251 Public Authority Registry when:**

- You, as an IHSS recipient, need a list of available IHSS Independent Providers who you can interview and hire
- You need to inform the Registry that a Registry provider started or stopped working, or is going on a leave
- You, as a Registry provider, want to remove your name, temporarily or permanently, from going out on lists
- You, as a Registry provider, want to update your profile due to change in address, phone number, name, availability, etc.

If you have questions about joining the Public Authority Services Registry as an independent provider so you can work for more recipients, call Registry Recruitment & Outreach at **(408) 557-4717**

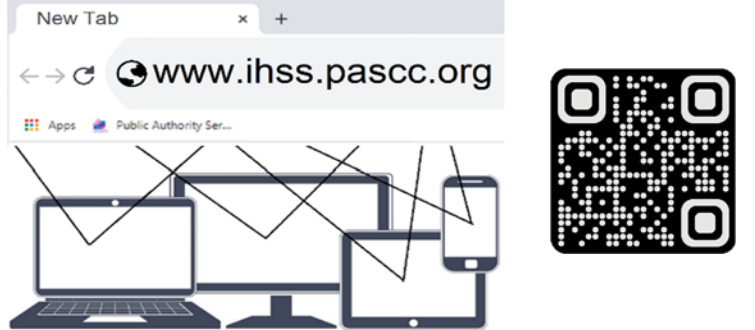
**\*Registry providers reporting availability once per month need to call (408) 350-3253**



**Call (408) 350-3220 Public Authority Training when:**

- You have questions about training opportunities for care providers or care recipients
- You, as an IHSS Independent Provider, have challenges when using the online registration portal to sign-up for free IHSS care provider training classes

## INSTRUCTIONS FOR ENROLLING AS AN IHSS INDEPENDENT PROVIDER

1	<p><b>Use the Enrollment website (<a href="http://ihss.pascc.org">ihss.pascc.org</a>) to start the process.</b> The enrollment website allows you to:</p> <ul style="list-style-type: none"> <li>▪ Complete enrollment forms</li> <li>▪ Watch mandatory enrollment videos</li> <li>▪ Schedule an individual appointment date and time</li> </ul>	
2	<p><b>Attend a Public Authority Group Orientation Meeting</b>, generally every Friday at 9AM and at 2PM. Confirm the dates and location at <a href="http://ihss.pascc.org">ihss.pascc.org</a>. No appointment is required. Allow up to 2 hours for the meeting. If you do not arrive on time, you may not be admitted to the meeting.</p> <p>Service Employees International Union (SEIU): 97 E Brokaw Rd., 2<sup>nd</sup> Fl. Suite #230, San Jose, CA 95112</p>	
3	<p><b>Attend your <u>individual appointment</u> on the date you have chosen:</b></p> <ul style="list-style-type: none"> <li>▪ Come to the address listed on the website when you book your individual appointment</li> <li>▪ Bring your <b>ORIGINAL</b> Social Security Card (we cannot accept a copy)</li> <li>▪ Bring your <b>valid driver's license or another US government issued photo ID*</b></li> <li>▪ Bring your signed purple form confirming you attended a Group Orientation Meeting</li> </ul> <p><i>*Must be un-expired</i></p>	
4	<p><b>Get fingerprinted:</b> You will be provided with the LiveScan form about how and where to have your fingerprints taken for the background check</p>	
5	<p>Ensure the person you are taking care of has designated you as their care provider on the Electronic Services Portal or by completing the form (<b>SOC 426A</b>) and emailing, faxing, mailing, or bringing it to IHSS. This form tells IHSS you will be their provider.</p> <p style="text-align: center;"><b>Email:</b> <a href="mailto:IHSS.SCC@ssa.sccgov.org">IHSS.SCC@ssa.sccgov.org</a>      <b>Mail:</b> IHSS, PO Box 11018, San Jose, CA 95013-1018  <b>In-person:</b> 353 W. Julian Street, San Jose 95110      <b>Fax:</b> (408) 792-1601</p> <p>You will receive form <b>SOC 2271</b> from IHSS with your Provider ID number. At that time, register for online timesheets at <a href="http://www.etimesheets.ihss.ca.gov">www.etimesheets.ihss.ca.gov</a>          If you do not receive form SOC 2271 <b>3-4 weeks after your individual appointment</b>, you can call to check on your provider enrollment status.</p>	
<p><b>Independent Provider enrollment questions? Call Public Authority Enrollment at (408) 350-3252</b></p>		