Per California Code of Regulations, title 2, section 548.5, the following information will be posted to CalHR's Career Executive Assignment Action Proposals website for 30 calendar days when departments propose new CEA concepts or major revisions to existing CEA concepts. Presence of the department-submitted CEA Action Proposal information on CalHR's website does not indicate CalHR support for the proposal.

A. GENERAL INFORMATION

1. Date
3/15/16

2. Department
Department of Social Services

3. Organizational Placement (Division/Branch/Office Name)
Adult Programs Division/Systems and Administrative Branch

4. CEA Position Title
Systems and Administrative Branch Chief

5. Summary of proposed position description and how it relates to the program's mission or purpose.
(2-3 sentences)
The Adult Programs Division, Systems and Administrative Branch (SAB) Chief is responsible for all aspects of policy development, implementation, monitoring and oversight for program and system functions related to the maintenance and operations functions for the In Home Supportive Services (IHSS) program, Case Management Information and Payroll systems. The SAB Chief oversees the preparation of highly sensitive qualitative and quantitative research reports used for program improvement and for Governor's Budget funding requests. The SAB Chief is responsible for the development and oversight of IHSS Fiscal Policies impacting the public authorities and counties that operate the statewide IHSS program and the development and oversight of over 20 contracts totaling $1.9 billion. In addition, the SAB Chief is responsible for statewide policy associated with the Deaf Access Program and the Assistance Dog Special Allowance Program that provide services to qualified disabled Californians.

6. Reports to: (Class Title/Level)
Deputy Director (CEA B), Adults Programs Division

7. Relationship with Department Director (Select one)

☐ Member of department's Executive Management Team, and has frequent contact with director on a wide range of department-wide issues.

✔ Not a member of department's Executive Management Team but has frequent contact with the Executive Management Team on policy issues.

(Explain): The SAB Chief advises Executive Management regularly on all SAB policy and systems issues.

8. Organizational Level (Select one)

☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th (mega departments only - 17,001+ allocated positions)
B. SUMMARY OF REQUEST

9. What are the duties and responsibilities of the CEA position? Be specific and provide examples.

The Systems and Administrative Branch (SAB) Chief (CEA A) develops and implements statewide policies internal policies and provides strategic program direction for the In-Home Supportive Services (IHSS) Program as it relates to the systems maintenance and operation for the Case Management Information and Payrolling System (CMIPS). Also develops and implements statewide policies for the Deaf Access Program (DAP) and the Assistance Dog Special Allowance (ADSA) Program.

Responsibilities include:

1. Oversees and directs the development and implementation of new and existing statewide policies, procedures, processes and regulations enacted through federal and state legislation for IHSS systems maintenance and operations.
2. Provides management oversight on politically sensitive issues regarding the most vulnerable population of aged, blind and disabled individuals and their caregivers (providers) who are served through the IHSS, DAP, and ADSA Programs.
3. Oversees the formulation of a $9.2 billion fiscal policy relating to the IHSS program's overall funding mechanisms, allowable claiming, rate setting processes and ratios of federal, state and county funding for the IHSS program.
4. Provides policy direction to the counties, and public authorities throughout the State, on the fiscal aspects and administration of the IHSS systems program.
5. Administers the application and certification process for IHSS services to entities interested in contracting with Managed Care Health Plans to become Qualified Agencies.
6. Provides management oversight of new and existing policies and procedures to ensure the interpretation and implementation captures the legislative and administrative intent of the IHSS program as set forth in the state Welfare and Institutions Codes 12300-12330 and also adheres to Title XIX of the Social Security Act and other applicable federal legislation.
7. Ensures the Office of Systems Integration and the CMIPS Prime Vendor translate all IHSS program changes effectively into Information Technology policy that is incorporated into the CMIPS accurately and timely, thereby certifying timely payments to IHSS providers.
8. Provides policy direction on CMIPS operations and coordinates with the Department of Health Care Services on the administration of the Waiver Personal Care Services Program which is funded through Medicaid and Medi-Cal and incorporated into CMIPS.
9. Represents the Department in meetings with Local, State and Federal government representatives, advocacy groups, stakeholder groups and IHSS provider unions on system administrative policy issues related to data reports and services available through CMIPS.
10. Manages a $500 million contract with the prime vendor responsible for the design development and maintenance and operations of the CMIPS system.
11. Coordinates statewide policy in conjunction with the Department of Finance and the Department of Health Care Services for the Coordinated Care Initiative (CCI) enacted through Senate Bills 1008 and 1036 and the Fair Labor and Standards Act (FLSA) enacted at the federal level.
12. Develops statewide policy for the appeal process for denied provider enrollment and oversees the administration of the policies as they pertain to CCI Qualified Agency certifications and FLSA provider violations.

The SAB Chief is also responsible for managerial and administrative tasks including, but not limited to:

1. Supervises one Staff Services Manager (SSM III), two SSM IIs, and oversees 53 first line managers and staff throughout the nine units within the SAB. Ensures through subordinate managers that SAB staff deliver timely and efficient resources to Californians served through the IHSS, DAP and ADSA programs.
2. Ensures clients in the DAP receive the necessary resources to achieve self sufficiency and independence, and access the benefits and services to which they are entitled.
3. Ensures clients in the ADSA program receive timely monthly payments to assist with needs related to their physical challenges.
4. Oversees the Workers’ Compensation program for the nearly 500,000 IHSS providers.
5. Monitors the Division budget and the Division’s over 20 contracts totaling approximately $1.9 billion.
B. SUMMARY OF REQUEST (continued)

10. How critical is the program's mission or purpose to the department's mission as a whole? Include a description of the degree to which the program is critical to the department's mission.

☑ Program is directly related to department’s primary mission and is critical to achieving the department's goals.

☐ Program is indirectly related to department's primary mission.

☐ Program plays a supporting role in achieving department's mission (i.e., budget, personnel, other admin functions).

Description: The SAB is critical to the CDSS mission to serve, aid and protect needy and vulnerable children and adults. The IHSS program assists over 500,000 low-income aged, blind and disabled Californians remain safely in their homes through the provision of IHSS services.

The CMIPS is the fifth largest electronic payroll system in California; exceeding the payroll of the State Controller's Office. CMIPS tracks case information for over 500,000 aged, blind, and disabled recipients in California and processes over 418,000 bi-monthly paychecks timely and accurately for unionized providers.

The DAP provides a comprehensive program of services to help individuals who are deaf and hard of hearing access services and live independently. The program raises awareness and educates the public about the specific issues surrounding deafness and hearing loss by providing the following services: Communication Services, Advocacy Services, Job Development and Placement, Information and Referral Services, Counseling, Independent Living Skills Instruction and Community Education.

The ADSA Program provides a monthly payment to eligible Californians who use a guide, signal, or service dog to help them with needs related to their physical disabilities. The allowance is to help pay the costs of food, grooming and health care for the dogs. This allows the recipient to be more independent and self sufficient thereby avoiding the more expensive, and isolating, institutional care options.
11. Describe what has changed that makes this request necessary. Explain how the change justifies the current request. Be specific and provide examples.

The IHSS program was created 40 years ago and since 2005 there have been major policy changes nearly every year. In the last four years there have been reductions in hours, changes to provider background checks, expanded federal participation, and the implementation and changes of a new payrolling system used by all 58 counties. Most recently was the introduction of CCI and FLSA both of which resulted in drastic and highly sensitive system administration changes with impacts that reach every aspect of the program. The constant evolution of the program will continue to require new and/or updated policies.

SSB 1008 (Chapter 33, Statutes of 2012) and SB 1036 (Chapter 45, Statutes of 2012) initiated the Coordinated Care Initiative (CCI) to integrate delivery of medical, behavioral, and long-term care services for individuals on Medicare and MediCal. Although the CCI is under the authority of the Department of Health Care Services (DHCS), it has a huge impact on the recipients in the IHSS program. The CCI changed the funding structure of the IHSS program to a method in which each county is responsible for paying a Maintenance of Effort (MOE) instead of paying a percentage of program costs. It requires the SAB, in conjunction with DHCS, to certify any agency that is contracting with a Managed Care Health Plan for the provision of IHSS. The SAB is responsible for developing a written appeal policy for any agency dissatisfied with the decision regarding certification.

The CCI legislation created a need for many complex statewide policy changes for the IHSS program. Each aspect of CCI impacted a different facet of the IHSS program. Each new and/or changed programmatic policy requires a coordinating system administrative policy to ensure the changes can be implemented into CMIPS timely and effectively. Many of the CCI policies are still being refined due to their complex nature and the level of impact on the aged, blind and disabled population that is served through the IHSS program. The CCI changes the way medical care and long-term services and supports are delivered to aging adult and the disabled population in California.

On October 1, 2013, the United States Department of Labor issued its FLSA Final Rule under which the Department of Social Services (DSS) is required to pay IHSS providers overtime wages and compensate providers for wait time during medical accompaniment and commute time between multiple recipients. In response to the new federal regulations, Senate Bill (SB) 855 and SB 873 were chaptered in 2014. In order to comply with the Final Rule and adhere to the SB 855 and SB 873, the DSS was tasked with developing a statewide policy for implementation while considering the impacts to the recipients and providers in the IHSS program. This statewide policy development process required extensive research, planning and coordination. Additionally, the creation of a corresponding system administrative policy was necessary in order to implement the legislative changes effective January 1, 2015 into the Case Management, Information and Payrolling System (CMIPS). This required coordination with Executive staff, the State Controller’s Office, Employment Development Department, Department of Health Care Services, Statewide Automated Welfare Systems, county labor organizations and county health benefits management contractors and many stakeholder groups. After extensive policy development, the U.S. District Court vacated the Final Rule on January 14, 2015, resulting in the DSS halting implementation. On August 21, 2015, the Appellate Court reversed that decision and the planning and development resumed. On February 1, 2016, the DSS implemented the new FLSA Final Rule policies and procedures for payment of overtime and travel time compensation to IHSS providers.
C. ROLE IN POLICY INFLUENCE

12. Provide 3-5 specific examples of policy areas over which the CEA position will be the principle policy maker. Each example should cite a policy that would have an identifiable impact. Include a description of the statewide impact of the assigned program.

The SAB Chief must develop and maintain policies and procedures that reflect the system implementation needs of CMIPS, while reflecting the programmatic regulations of the Federal and State legislation for IHSS recipients and providers. The SAB Chief is the principal fiscal policy maker for developing and defining funding mechanisms, allowable claiming and rate setting processes and ratios of federal, state and county funding for the IHSS program. While developing some of these policies, it was discovered that Welfare and Institutions Code (WIC) Section 12306.15 did not cover all modes of service delivery and therefore California was bearing a higher share of cost for the IHSS program than was intended. The SAB Chief must develop new policies that encompasses all modes of IHSS service delivery.

Some recent and significant changes in legislation that impact IHSS recipients and providers are:

1. Overtime exemptions for providers with multiple clients.
2. Minimum wage increase.
3. Paid sick leave for IHSS providers.
4. New tax guideline for providers who live with the recipient.
5. New time sheet rules for providers.

With each new legislative change, policies must be developed for CMIPS which impact approximately one million IHSS recipients and providers statewide. The failure to properly address these significant program changes appropriately may result in loss of available providers and increased program costs to the state.

The SAB Chief sets policies for the DAB which provides communication needs for people who are deaf, deaf-blind, hard of hearing and late-deafened. $5.2 million in services are paid annually to assist with services that include, but are not limited to:

1. Communication services provide qualified sign language interpreters to meet the needs of a recipient or agency. This includes providing emergency 24-hour, 7-day a week sign language services to meet medical, legal, or civil emergencies and provides translation of documents for deaf clients with low language skills.
2. Advocacy services provides assistance in crisis situations by intervening to ensure all public services – including social, health, and safety services are available to the deaf and hard of hearing population. This includes intervention to protect deaf children’s communication rights.
3. Job development and placement services assist deaf clients in obtaining employment related services.
4. Information and referral services directs recipients to appropriate organizations and programs for social and health care needs and answers questions about deafness and hearing loss.
5. Counseling services provides intervention in crisis situations, such as spousal, child or adult abuse. This service also teaches clients how to effectively cope with deafness or hearing loss.
6. Independent living skills instruction services assists deaf clients in acquiring skills to live independent of public institutions and programs.
7. Community education services increases public awareness and understanding of deaf and hard of hearing impaired needs. This service also addresses health and safety issues related to deafness.

Statewide impact: provides the necessary services to Californian’s with disabilities which allow them to remain in their homes and retain their independence and dignity. This also reduces the strain on the state budget and on available space within institutionalized care settings.
C. ROLE IN POLICY INFLUENCE (continued)

13. What is the CEA position's scope and nature of decision-making authority?

The SAB Chief has primary responsibility for prioritizing and developing policies for IHSS system administration and CMIPS. To ensure policies are appropriate and can be implemented in CMIPS, the SAB Chief must consider the new and/or revised state and federal legislation and budgeting needs as well as incorporate timely, feedback from stakeholder groups, DHCS, labor organizations, consumers, providers, local, state, and federal governmental entities and must effectively communicate the policies to the CMIPS vendor.

14. Will the CEA position be developing and implementing new policy, or interpreting and implementing existing policy? How?

Both. In addition to ensuring CMIPS adheres to current IHSS program policy, regulations and statutes, the SAB Chief is responsible for providing direction and oversight in the following areas:

1. Managing county requests for changes to the CMIPS application.
2. Requesting and approving new changes to the CMIPS system.
3. Initiating change requests for system changes related to the ongoing administration of the IHSS program and all other non-IT related updates to CMIPS.
4. Prioritizing existing change requests and all other system changes based on IHSS program and departmental priorities.
5. Communication with internal and external stakeholders such as the legislature, counties, PAs, LOs, and advocates, etc. regarding system changes and IHSS policy.
6. Stakeholder work groups regarding CMIPS processes and functionality.
7. Final approval of all budget documents and invoices related to CMIPS.
9. Training coordination for CMIPS users.
10. Service Help Desk coordination.
11. Ad-hoc reporting and data analytics for program and county usability.
12. County Customer Relationship Management.