<u>Instructions for Completing the IHSS Recipient Request for Assignment</u> of Authorized Hours to Providers (SOC 838)

IHSS Recipients

- 1. Please assign hours to your provider(s) so that the hours assigned to all of your providers match **EXACTLY** to the total authorized monthly hours allotted to you.
- 2. Please complete a SOC 838 form(s) for **EACH** "Active" provider.
- 3. There are two ways to assign hours to your provider(s):
 - *a.* You can assign all of your authorized hours/minutes to each provider. This will allow you to vary the hours each provider works on a monthly basis, without notifying the county. *You will be responsible for managing the hours worked by the providers to ensure that the total hours of all your providers do not exceed your total monthly authorized hours.*

Example A

You are assigned 100:00 hours. You have two providers, Jane and John. Complete two <u>separate</u> SOC 838 forms for Jane and John: (1) Enter 100:00 hours on Jane's SOC 838 and (2) Enter 100:00 hours on John's SOC 838.

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b. You can assign each provider a specific number of hours, when added together, match exactly to your total authorized hours/minutes per month.

<u>Example B</u>

You are assigned 100:00 hours. You have two providers, Jane and John. You assign 30:00 hours to Jane and 70:00 hours to John.

Complete two <u>separate</u> SOC 838 forms for Jane and John: (1) Enter 30:00 hours on Jane's SOC 838 and (2) Enter 70:00 hours on John's SOC 838.

- 4. In the "COUNTY USE ONLY" section, please indicate the Effective Date of the assigned monthly hours.
- 5. Please return the completed SOC 838 form(s) with the attached packet.
- 6. You may request additional SOC 838 forms by calling the Payroll Line at 510-577-1877, downloading on the website or picking up the forms in person at the IHSS office.
- 7. If you need to hire and enroll a new provider, you may request a new Provider Enrollment Packet by calling the Payroll Line at 510-577-1877, downloading the packet on the website or picking up an enrollment packet in person at the IHSS office.

For additional assistance, please call the IHSS Payroll Department at 510-577-1877. Thank you. Form 70-7, SOC 838 Instructions, NEW, 7/1/15