



San Benito County Public Authority

for In-Home Supportive Services (IHSS) Program

Policies & Procedures Manual

June 1, 2026

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June 1, 2026

1.0 Public Authority Introduction

1.1 Purpose of this Manual

Policy

This Policy and Procedure Manual establishes standardized guidance for county employees responsible for administering and supporting the San Benito County Public Authority (PA) for the In-Home Supportive Services (IHSS) Program.

Procedure

The manual outlines:

- Program purpose and scope
- Operational procedures
- Staff responsibilities
- Consumer and provider requirements
- Documentation standards
- Compliance expectations

Staff Responsibilities

PA staff shall:

- Follow all policies and procedures contained within this manual
- Maintain compliance with applicable confidentiality and privacy laws
- Ensure services are delivered consistently and professionally
- Document all required actions accurately and timely in the appropriate authorized systems

Documentation Requirements

PA staff shall maintain documentation in accordance with:

- County record retention requirements
- California Department of Social Services (CDSS) regulations
- Confidentiality and HIPAA-related standards, when applicable

1.2 Mission & Vision

Mission Statement:

The mission of the San Benito County Public Authority is to improve the quality of life for In-Home Supportive Services (IHSS) recipients by supporting access to high-quality, reliable, and compassionate in-home care services.

The PA is committed to:

- Ensuring consumers and providers have meaningful input in program development and service delivery

- Promoting collaborative relationships among consumers, providers, IHSS staff, and community partners
- Strengthening the availability, quality, and sustainability of in-home supportive services
- Supporting service delivery through transparency, accountability, community engagement

Vision Statement

The Public Authority envisions a community in which every eligible individual receives person-centered in-home care that promotes dignity, independence, safety and respect.

2.0 Public Authority Program Overview

2.1 Public Authority Overview

Policy

The Public Authority serves as the employer of record for In-Home Supportive Services (IHSS) providers for the purpose of collective bargaining and administers provider-related support functions for the IHSS Program.

Procedure

The Public Authority supports the IHSS Program through:

- Provider enrollment assistance
- Registry administration
- Provider referrals
- Background checks
- Training support
- Consumer and provider assistance
- Collaboration with county and state partners

The Public Authority also serves as a liaison between IHSS consumers and care providers to support successful service delivery and program participation.

Staff Responsibilities

PA staff shall:

- Provide accurate information regarding IHSS and Public Authority services
- Assist consumers and providers in navigating program requirements
- Maintain professional and impartial interactions with all program participants
- Coordinate services with IHSS staff and external partners, as appropriate

Consumer Responsibilities

Consumers are responsible for:

- Selecting, training, and supervising their IHSS providers

- Reporting concerns regarding provider performance
- Complying with IHSS program requirements

Provider Responsibilities

Providers are responsible for:

- Completing all enrollment requirements prior to providing services
- Following IHSS program requirements and authorized service tasks
- Maintaining professional conduct with consumers and staff

2.2 Governance and Authority

Policy

The Public Authority shall operate in compliance with all applicable federal and state laws governing the IHSS Program.

Procedure

The Public Authority operates pursuant to:

- Welfare and Institutions Code (WIC) Sections 12301.6 and 12302.25
- Applicable California Department of Social Services (CDSS) regulations
- County policies and procedures
- The Memorandum of Understanding (MOU) between the County and the Public Authority

Staff Responsibilities

PA staff shall:

- Maintain knowledge of applicable IHSS regulations and program requirements
- Implement services in accordance with state and county guidance
- Participate in required training and policy updates

Documentation Requirements

PA staff shall maintain:

- Current policy and procedure references
- Required compliance documentation
- Records of staff training and regulatory updates, as applicable

2.3 Public Authority Functions

Policy

The Public Authority shall provide administrative and support services necessary to support IHSS consumers and providers.

Procedure

Public Authority functions include, but are not limited to:

Provider Enrollment

PA staff shall assist with provider enrollment activities to ensure eligibility requirements are completed in accordance with CDSS regulations

Provider Registry

Registry staff shall maintain a registry of eligible providers available for referral to IHSS consumers requesting assistance locating care providers

Training and Support

PA staff shall coordinate or provide training resources related to:

- Caregiving best practices
- Consumer safety
- Infection Control
- Professional boundaries
- Program requirements

Payroll and Timesheet Support

PA staff shall provide general assistance and troubleshooting support related to electronic services portal access, timesheets, and payment concerns

Case Management and Support Services

PA staff may provide supportive case coordination and referrals to appropriate resources when necessary to support service continuity

Advocacy and Community Support

PA staff should support fair and respectful access to services for consumers and caregivers and promote positive working relationships within the IHSS community

Program Reporting

PA staff shall prepare and submit reports required by the County, CDSS, or other oversight entities

Documentation Requirements

PA staff shall document all required actions, contacts, and status updates shall be documented in the appropriate authorized systems:

- Consumer and provider contacts
- Registry referrals
- Enrollment assistance activities
- Training Participation
- Complaint or incident reports
- Required program reports

2.4 Public Authority Goals

Policy

The Public Authority shall maintain operational goals that support effective, compliance, and consumer-centered services delivery.

Program Goals

Maintain a Qualified Provider Registry

PA staff shall maintain an updated registry of eligible providers to support timely referrals for IHSS consumers

Protect Privacy and Confidentiality

PA staff shall safeguard the confidentiality of consumers and providers with information in accordance with all applicable privacy laws and county policies

Provide Training and Support

PA staff shall support access to ongoing education and resources that promote quality care and safe service delivery

Support Consumer Rights

PA staff shall support consumers in exercising their rights to recruit, hire, train, supervise, and terminate their providers in accordance with IHSS regulations

Promote Employee Professional Development

PA management shall encourage ongoing staff development and training to improve program knowledge, compliance, and customer service delivery

3.0 Program Organizational Structure

3.1 Organizational Structure

Policy

The Public Authority (PA) operates within the County of San Benito and receives administrative support through the Health & Human Services Agency (HHS).

Procedure

The Public Authority shall coordinate with County departments, state agencies, and community partners to support the administration of IHSS-related services and Registry operations.

The Public Authority works in collaboration with:

- County IHSS Program staff
- County Counsel
- HHS Administration
- Fiscal departments

- State agencies
- Labor organizations
- Community-based organizations

Staff Responsibilities

PA staff shall:

- Follow established county administrative structures
- Coordinate services with internal and external partners, as appropriate
- Maintain professional communication with partner agencies and stakeholders

3.2 County Partnership

Policy

The Public Authority shall collaborate with County departments and external agencies to support effective program operations and service coordination.

Procedure

The Public Authority may collaborate with:

- County IHSS staff regarding referrals, eligibility verification, and reporting requirements
- Regional or statewide Public Authorities regarding operational best practices and program updates
- Community agencies and workforce development partners regarding provider recruitment and outreach
- Labor organizations regarding matters permitted under applicable agreements and laws

Staff Responsibilities

PA staff shall:

- Participate in interagency meetings, as assigned
- Share information in accordance with confidentiality requirements
- Maintain collaborative working relationships with partner organizations

Documentation Requirements

PA staff shall document:

- Interagency meetings, when required
- Outreach activities
- Program coordination efforts, as applicable

3.3 County IHSS Program

Policy

The County IHSS Program maintains responsibility determinations and case management functions associated with IHSS services.

Procedure

The County IHSS Program is responsible for:

- Determining consumer eligibility for IHSS services
- Conducting initial assessments and annual reassessments
- Authorizing service hours and tasks
- Providing ongoing case management services
- Issuing IHSS-related notices and program materials

Staff Responsibilities

PA staff shall:

- Coordinate with IHSS social workers, as appropriate
- Refer eligibility-related questions to the County IHSS Program
- Avoid making eligibility determinations or authorizing services unless specifically authorized to do so

3.4 Reporting and Quality Assurance

Policy

The Public Authority shall maintain quality assurance practices and comply with all applicable reporting requirements.

Procedure

The Public Authority shall complete required:

- Monthly reports
- Quarterly reports
- Annual reports
- State reporting submissions
- Operational performance reviews

Quality assurance activities may include:

- Internal audits
- File reviews
- Corrective action plans
- Feedback surveys
- Performance monitoring activities

Staff Responsibilities

Program staff shall:

- Maintain accurate and timely records
- Participate in quality improvement activities, as assigned
- Implement corrective actions when deficiencies are identified

Documentation Requirements

Program staff shall maintain:

- Required program reports
- Audit findings and corrective action documentation
- Quality assurance records
- Performance tracking documentation

3.5 Fraud Prevention

Policy

The Public Authority shall support program integrity and cooperate with fraud prevention efforts.

Procedure

The Public Authority may:

- Report on suspected fraud or misuse of services to the appropriate agency
- Cooperate with County, State, or Department of Justice investigations
- Participate in compliance monitoring activities

Staff Responsibilities

PA staff shall:

- Report suspected fraud through appropriate supervisory channels
- Document concerns factually and objectively
- Maintain confidentiality during investigations

Documentation Requirements

PA staff shall maintain documentation related to:

- Reported concerns
- Referrals to investigative agencies
- Internal compliance actions, as applicable

3.6 Advisory Committee

At the time of publication, there is no active Advisory Committee in place.

Policy

The Advisory Committee serves in an advisory capacity only and does not possess administrative or fiscal authority.

Procedure

The Advisory Committee may:

- Provide stakeholder feedback and recommendations
- Review community concerns related to IHSS services
- Offer input regarding Public Authority operations and service delivery

The Advisory Committee shall operate in accordance with:

- AB 1682 requirements
- Brown Act requirements
- Applicable county procedures

3.7 Lines of Communication

Policy

County employees shall follow established supervisory and communication protocols.

Procedure

Employees are expected to:

- Follow designated supervisory structures
- Communicate operational concerns through appropriate channels
- Maintain professional and respectful workplace communication
- Collaborate effectively with team members and partner departments

Staff Responsibilities

PA staff shall:

- Notify supervisor regarding operational concerns or incidents
- Respond to internal communications timely
- Maintain professional conduct in all workplace interactions

3.8 Confidentiality & Conflict of Interest

Policy

All employees shall protect confidential information and avoid conflicts of interest that may compromise program integrity or impartiality.

Procedure

Employees shall comply with:

- County confidentiality policies
- Applicable privacy laws
- Ethics and conflict-of-interest requirements
- Records management requirements

Confidential information shall only be shared with authorized individuals for legitimate business purposes.

Staff Responsibilities

PA staff shall:

- Safeguard confidential consumer and provider information
- Avoid unauthorized disclosure of records or protected information
- Disclose potential conflicts of interest to supervisory staff
- Maintain impartiality in all program activities.

Documentation Requirements

PA staff shall complete:

- Required confidentiality acknowledgments
- Conflict-of-interest disclosures, when applicable
- Mandatory privacy and ethics trainings, as assigned

4.0 Roles and Responsibilities

4.1 General Responsibilities of County Employees

Policy

County employees assigned to the Public Authority Program shall perform duties in accordance with applicable laws, county policies, and this manual.

Procedure

County employees are responsible for:

- Supporting access to authorized IHSS services
- Providing accurate program information
- Maintaining Registry records and related documentation
- Assisting consumers and providers with available resources and referrals
- Supporting compliance with program requirements

Staff Responsibilities

PA staff shall:

- Perform duties professionally and impartially.
- Maintain confidentiality of all program information.
- Complete assigned tasks accurately and timely.
- Maintain compliance with applicable policies and procedures.

Documentation Requirements

PA staff shall maintain:

- Accurate case and Registry documentation
- Consumer and provider contact records
- Required program forms and correspondence

4.2 Deputy Director

Policy

The Deputy Director is responsible for oversight, administration, compliance, and strategic direction of the Public Authority Program.

Functions

The Deputy Director shall:

- Provide leadership, planning, and operational oversight for program operations
- Ensure compliance with applicable county, state and federal laws, regulations, and agreements

- Serve as liaison to County leadership, the Board of Supervisors, administration and partner agencies
- Support fiscal accountability and program integrity
- Approve operational and policy decisions
- Review appeals related to Registry determinations
- Represent the Public Authority in stakeholder and advisory matters

Documentation Requirements

The Deputy Director shall maintain:

- Program oversight records
- Policy approvals
- Appeal determinations
- Administrative reports and correspondence

4.3 Employment & Training Supervisor

Policy

The Employment and Training Supervisor oversees day-to-day program operations and staff compliance activities.

Functions

The Employment and Training Supervisor shall:

- Monitor operational activities and staff performance
- Coordinate staff training and policy implementation
- Prepare operational and performance reports
- Respond to escalated concerns and inquiries
- Review Registry-related determinations and appeals
- Serve as Custodian of Records for background check documentation
- Coordinate provider recruitment and community outreach efforts to recruit qualified IHSS providers and collaborate with local job centers, workforce agencies and organizations
- Provide guidance regarding Public Authority procedures

Documentation Requirements

The Employment and Training Supervisor shall maintain:

- Training records
- Supervisory documentation
- Background check records
- Operational reports
- Appeal documentation

4.4 Account Clerk

Policy

The Account Clerk is responsible for provider enrollment, registry intake, and administrative processing functions.

Functions

The Account Clerk shall:

- Conduct Registry intake and provider interviews
- Verify identification and enrollment documentation
- Maintain and update Registry records
- Maintain Public Authority forms and resources
- Provide administrative and clerical support, as needed
- Process employment and income verification requests
- Maintain the county's SharePoint with program forms, resources and guidelines

Documentation Requirements

The Account Clerk shall maintain the following within the applicable system:

- Enrollment records
- Verification documentation
- Registry records
- Referral documentation

4.5 Office Assistant

Policy

The Office Assistant provides clerical and administrative support for Public Authority operations.

Functions

The Office Assistant shall:

- Perform data entry and scanning functions
- Maintain records and filing systems
- Schedule appointments
- Assist with reference checks
- Greeting walk-ins, screening incoming calls and responding to general inquiries
- Monitor office supply inventory
- Prepare routine correspondence

Documentation Requirements

The Office Assistant shall maintain the following within the applicable system:

- Administrative records
- Filing systems

- Scheduling interviews
- Inventory records, as applicable

4.6 County Counsel

Policy

County Counsel provides legal guidance and consultation to the Public Authority.

Functions

County Counsel may provide:

- Legal review of contracts, policies, board items and employee-related matters
- Guidance regarding labor relations and other employment matters
- Legal consultation regarding Registry operations
- Support regarding Public Authority compliance requirements
- Legal guidance to the Advisory Committee, as appropriate

4.7 Fiscal Department and State Controller's Office

Policy

Fiscal and payroll functions shall be administered through the appropriate County and State entities.

Procedure

The County Fiscal Department is responsible for:

- Budget development
- Accounting functions
- Financial reporting activities

The State Controller's Office is responsible for:

- Processing IHSS provider payroll
- Issuing provider payments

4.8 Health & Human Services Agency (HHSA)

Policy

HHSA provides administrative oversight and operational support to the Public Authority.

Functions

HHSA may provide:

- Budget and fiscal oversight
- Contract administration development
- Coordinate agenda items for the Board of Supervisors
- Submission of required state reports, materials and fiscal claims
- Monitoring compliance with the Memorandum of Understanding (MOU)

4.10 Labor Organization (SEIU Local 2015)

Policy

SEIU Local 2015 represents IHSS providers in accordance with applicable labor laws and collective bargaining agreements.

Procedure

SEIU Local 2015 may:

- Negotiate wages, benefits, and working conditions
- Represent providers in grievance matters
- Provide information and advocacy to union members
- Collaborate on training and educational activities
- Advocates at the local and state levels on issues affecting IHSS providers, including wages, benefits, and program funding

Staff Responsibilities

PA staff shall:

- Refrain from engaging in partisan labor activities during work duties.
- Refer labor-related questions to the appropriate representative, when necessary.
- Maintain neutrality in all union-related matters.

5.0 Public Authority Registry

5.1 Registry Overview

Policy

The Public Authority (PA) Registry is a voluntary referral service established to assist eligible In-Home Supportive Services (IHSS) consumers in locating qualified Independent Providers (IPs) to perform authorized IHSS services.

Procedure

The Registry shall:

- Recruit and screen prospective providers
- Maintain an active Registry database
- Facilitate referrals based on consumer needs and provider availability
- Provide information and support related to Registry participation

The PA does not employ, assign, supervise, or terminate registry providers. Providers are independently hired and supervised by the consumer.

Staff Responsibilities

Registry staff shall:

- Maintain accurate Registry records
- Process referrals in a timely manner
- Provide neutral and impartial referral services
- Explain Registry limitations and participant responsibilities

Consumer Responsibilities

Consumers are responsible for:

- Selecting and hiring providers
- Supervising and training providers
- Determining provider compatibility
- Managing employment-related responsibilities

Provider Responsibilities

Providers are responsible for:

- Maintaining eligibility requirements
- Responding to consumer inquiries timely
- Communicating availability changes to Registry staff

5.2 Independent Provider (IPs) Status

Policy

Registry providers shall be considered independent, self-employed individuals and not employees of the Public Authority or County.

Procedure

Independent Providers:

- Are hired and supervised directly by consumers
- Determine whether to accept referral opportunities
- Are compensated in accordance with the established county IHSS wage structure
- Remain responsible for maintaining Registry eligibility requirements

Staff Responsibilities

Registry staff shall:

- Explain provider status during enrollment and orientation
- Avoid representing providers as county employees
- Maintain documentation regarding provider acknowledgment of Registry terms

5.3 Registry Provider Eligibility Requirements:

Policy

All Registry applicants must meet established eligibility requirements prior to activation on the Registry.

Procedure

Applicants must:

- Be at least 18 years of age
- Submit a completed Registry application
- Complete successful reference checks and required interview
- Complete online enrollment requirements
- Attend in-person orientation
- Pass a DOJ criminal background check
- Maintain a clear background while active on the Registry

Applicants shall provide current and accurate:

- Valid government-issued identification
- Social Security card or authorized work documentation (if applicable)
- Supporting enrollment documents, as applicable
- Signed User Registry Agreement and confidentiality document

Staff Responsibilities

Registry staff shall:

- Review applications for completeness
- Verify required documentation
- Maintain applicant records
- Notify applicants of missing information or next steps

Documentation Requirements

Registry staff shall maintain:

- Enrollment applications
- Reference check documentation
- Orientation records
- Signed agreements and acknowledgments
- Background clearance documentation

5.4 Registry Provider (IP) Enrollment Procedure

Policy

The Registry Provider Enrollment process shall ensure applicants meet eligibility requirements and are informed of Registry participation standards.

A. Application Intake and Review

Procedure

Registry staff shall:

- Date-stamp all applications upon receipt

- Review applications for completeness
- Request missing information, when necessary

Applications shall include:

- Part A: Reference Questionnaire
- Part B: Applicant Interview Questionnaire

Applicants must complete all required enrollment steps within 30 calendar days of application receipt unless an extension is approved.

Documentation Requirements

Registry staff shall document:

- Date received
- Communication attempts
- Missing items
- Processing status updates

B. Review and Interview Timelines

Procedure

Registry staff shall:

- Conduct initial review and reference checks within five (5) business days
- Schedule and conduct interviews within ten (10) business days, when possible
- Upload required documents into the authorized Registry system

Processing timelines may be extended when delays occur due to:

- Inability to contact the applicant
- Missing documentation
- Delayed references

Staff Responsibilities

Registry staff shall document all actions, contacts, and delays within the Registry database.

C. Reference Checks

Procedure

Applicants shall provide a minimum of two non-family references.

Registry staff shall:

- Conduct and document reference checks
- Evaluate references for suitability
- Notify applicants if enrollment cannot proceed due to unfavorable references

Applicants with limited employment history may be reviewed on a case-by-case basis in accordance with Public Authority guidelines.

D. Online Enrollment

Procedure

Applicants must:

- Create required online accounts
- Complete required training modules
- Electronically sign enrollment forms
- Schedule in-person orientation
- Obtain a Live Scan form

Training topics may include:

- IHSS program overview
- Consumer rights and responsibilities
- Fraud prevention
- Timesheet procedures
- Provider expectations

Applicants must complete online enrollment requirements within 90 calendar days of signing the SOC 426 form.

Staff Responsibilities

Registry staff shall:

- Monitor completion status
- Update applicant status within authorized systems
- Document incomplete or expired enrollment actions

E. In-Person Orientation

Procedure

Applicants shall present:

- Government-issued photo identification
- Social Security card or work authorization documentation

Orientation may include:

- Review of program requirements and services
- Registry participation expectations
- Distribution of educational materials
- Labor organization presentation

Documentation Requirements

Registry staff shall maintain attendance and orientation completion records.

F. Background Check Requirements

Policy

All Registry applicants must complete a DOJ criminal background check prior to Registry activation.

Procedure

Applicants shall complete Live Scan fingerprinting using the authorized BCIA form.

Background reviews shall comply with:

- WIC §12305.81 (Tier 1 Crimes)
- WIC §12305.87 (Tier 2 Crimes)

Background clearance applies only to Registry participation and does not determine overall IHSS employment eligibility.

Documentation Requirements

Authorized staff shall maintain background clearance records in accordance with confidentiality requirements.

G. Activation and Ongoing Participation

Procedure

Upon successful completion of enrollment requirements:

- Providers shall be activated within the Registry database
- Providers shall maintain current contact and availability information
- Providers shall participate in required monthly check-ins

Referral decisions shall consider:

- Consumer needs
- Provider qualifications
- Availability
- Geographic preferences

Staff Responsibilities

Registry staff shall:

- Encourage timely provider responses
- Provide guidance regarding interviews and hiring expectations
- Maintain accurate Registry status records

H. User Registry Agreement

Policy

Applicants shall sign the User Registry Agreement and confidentiality forms prior to Registry activation.

Procedure

Applicants who fail to submit signed forms shall remain in pending status until completed documentation is received.

The Agreement outlines:

- Registry participation expectations
- Confidentiality requirements
- Consumer and provider responsibilities
- Professional conduct expectations

Documentation Requirements

Signed agreements shall be uploaded into the authorized Registry system.

5.5 Registry Provider Services

Policy

The Public Authority shall provide referral and support services to active Registry participants.

A. Provider-Consumer Matching

Procedure

Registry staff shall facilitate referrals based on:

- Authorized service needs
- Provider skills and experience
- Availability and scheduling compatibility
- Language or geographic preferences

Consumers retain responsibility for provider selection and hiring decisions.

B. Customer Service Standards

Staff Responsibilities

Registry staff shall:

- Treat all participants professionally and respectfully
- Respond to inquiries timely
- Document Registry contacts and interactions
- Provide general guidance regarding Registry participation
- Assist with informal problem resolution, when appropriate

C. Provider Removal and Inactivation

Policy

Providers may be placed on inactive status or removed from the Registry when eligibility or participation requirements are not maintained.

Procedure

Reasons for inactive status or removal may include:

- Failure to maintain eligibility requirements
- Failure to complete required check-ins
- Extended inactivity
- Registry policy violations
- Misconduct concerns

Documentation Requirements

All status changes shall be documented within the authorized Registry system.

5.6 Registry Provider Follow-Up

Policy

Providers shall maintain ongoing communication with the Public Authority to remain active on the Registry.

Procedure

Monthly Provider Check-In

Providers shall notify the Public Authority regarding:

- Contact information changes
- Availability updates
- Employment status changes
- Temporary leaves or absences

Providers should provide advance notice when unable to continue assignments.

Staff Responsibilities

Registry staff shall:

- Monitor provider activity
- Send reminders regarding inactive status
- Document all provider communications and status changes

Inactive Status and Reactivation

Procedure

Registry staff may place providers on inactive status when:

- Contact cannot be established
- Required updates are not provided
- No provider activity is identified

Staff may issue the SOC 881 notice when inactivity is identified.

Reactivation may require:

- Updated information
- Additional references
- Re-interview or orientation completion

Documentation Requirements

Registry staff shall document:

- Notices issued
- Contact attempts
- Reactivation determinations
- Updated eligibility information

5.7 Provider Background Check

Policy

All Registry providers shall complete and maintain DOJ background clearance requirements in accordance with applicable law and All County Letter guidance.

Procedure

The Custodian of Records shall review background information through authorized DOJ systems.

Tier 1 offenses are permanently disqualifying pursuant to WIC §12305.81.

Tier 2 offenses may require:

- Consumer waiver approval
- Additional review
- Written notice regarding appeal rights

Staff Responsibilities

Authorized staff shall:

- Maintain confidentiality of criminal offender record information (CORI)
- Restrict access to authorized personnel only
- Document all eligibility determinations appropriately

5.8 Registry Consumer Registration Process

Policy

Eligible IHSS consumers may voluntarily participate in the Registry referral program.

Procedure

Consumers must:

- Be eligible for IHSS services
- Complete a Registry application
- Sign the User Registry Agreement

Applications may be submitted by:

- The consumer
- An Authorized Representative
- The assigned social worker

Consumer Responsibilities

Consumers are responsible for:

- Reviewing Registry participation requirements
- Providing accurate information
- Communicating care needs and preferences

5.9 Registry Consumer Services

Policy

The Public Authority may provide referral and support services to eligible consumers participating in the Registry.

Consumer Rights

Consumers retain the right to:

- Choose providers
- Train and supervise providers
- Terminate providers
- Decline Registry referrals

Assistance and Referrals

Procedure

Registry staff shall generate referrals based on:

- Authorized service needs
- Schedule compatibility
- Provider qualifications
- Language and location preferences

Referral lists are informational only and do not constitute provider recommendations.

Conflict Mediation

Procedure

The Public Authority may provide informal mediation assistance regarding consumer-provider concerns, when appropriate.

5.10 Consumer Intake and Registry Application

Policy

Consumers must complete a Registry application to receive referral services.

Procedure

Registry staff shall:

- Verify IHSS eligibility
- Enter application information into the Registry database
- Explain Registry participation requirements
- Provide referral information timely
- Review consumer rights and responsibilities

Consumer Responsibilities

Consumers are responsible for:

- Providing accurate application information
- Reviewing authorized service hours and tasks

- Contacting referred providers directly

Documentation Requirements

Registry staff shall document:

- Intake activities
- Referral dates
- Consumer preferences
- Follow-up actions

5.11 Registry Referrals to Consumers

Policy

The Registry functions solely as a referral service.

Procedure

Referral lists may include providers matched according to:

- Service needs
- Availability
- Geographic preferences
- Provider experience

Consumers are responsible for:

- Contacting providers
- Conducting interviews
- Verifying compatibility
- Hiring decisions

Staff Responsibilities

Registry staff shall:

- Generate referral lists
- Notify assigned IHSS staff, when applicable
- Provide general hiring guidance
- Document referral activity

5.12 Consumer Training

Policy

The Public Authority may provide consumer education and training related to IHSS participation and employer responsibilities.

Training Topics May Include

- IHSS program overview
- Employer responsibilities
- Consumer rights
- Provider supervision
- ESP/TTS assistance

- Timesheet procedures

Staff Responsibilities

PA staff shall provide educational materials and guidance consistent with program requirements.

5.13 Consumer Follow-Up

Policy

Registry staff shall conduct follow-up activities to support successful Registry referrals and identify additional service needs.

Procedure

Registry staff shall:

- Contact consumers following referrals
- Determine whether a provider was hired
- Assess need for additional referrals
- Update Registry status information
- Document outcomes and follow-up activities

Additional Support Services

Support services may include:

- Employer responsibility guidance
- Conflict resolution assistance
- Timesheet support
- ESP/TTS assistance

Documentation Requirements

Registry staff shall maintain:

- Contact records
- Follow-up outcomes
- Referral updates
- Consumer status changes

6.0 Consumer & Provider Support Services

6.1 Support Services Overview

Policy

The Public Authority may provide additional support services to consumers and providers to promote successful service delivery and program compliance.

Support Services May Include:

- Timesheets and payroll guidance
- Community resource referrals

- Employer responsibility education
- Hiring and supervising guidance
- Informal conflict resolution
- Emergency preparedness information

Methods of Service Delivery:

Services may be provided through:

- Telephone assistance
- Written materials
- Orientations and training
- Home visits, when appropriate

Staff Responsibilities

PA staff shall:

- Respond PA staff shall:
- Respond to service requests professionally
- Provide accurate program information
- Document significant support activities

7.0 Consumer & Provider Trainings

7.1 Training Overview

Policy

The Public Authority may provide training opportunities to consumers and providers to support quality service delivery and program participation.

Procedure

Training opportunities may be offered:

- Upon request
- Based on identified program needs
- In collaboration with labor organizations and community partners

Training topics may include:

- Personal care skills
- Safety and injury prevention
- Professional boundaries
- Emergency preparedness
- Consumer and provider rights

Staff Responsibilities

PA staff shall:

- Coordinate training activities

- Maintain attendance records
- Review and update training materials periodically
- Evaluate training effectiveness, when applicable

8.0 Provider Recruitment

8.1 Recruitment Policy

Policy

The Public Authority shall recruit and maintain a sufficient number of qualified providers to support identified consumer needs.

Procedure

Recruitment activities may include:

- Community outreach
- Collaboration with workforce agencies
- Coordination with labor organizations
- Public presentations and informational meetings
- Social media and public advertising
- Outreach through educational and community organizations
- Employment Development Department listings

Staff Responsibilities

Registry staff shall:

- Identify recruitment needs based on consumer demand
- Conduct outreach activities
- Maintain recruitment documentation
- Promote Registry participation opportunities

Documentation Requirements

Registry staff shall maintain records related to:

- Outreach activities
- Recruitment events
- Advertising efforts
- Provider inquiries and applications

9.0 Grievance and Complaint Procedures

9.1 Complaint and Grievance Overview

Policy

The Public Authority (PA) shall maintain a fair, timely, impartial, and confidential process for addressing complaints and grievances involving Registry consumers and Registry providers while supporting the health, safety, and integrity of the IHSS Program.

Procedure

Complaints may be submitted verbally or in writing to the Public Authority.

Complaints may involve:

- Registry providers
- Registry consumers
- Registry-related services or interactions

The Public Authority shall only address complaints involving active or former Registry participants. Complaints involving non-Registry consumers shall be referred to the assigned IHSS Social Worker or appropriate agency.

Staff Responsibilities

PA staff shall:

- Receive and document complaints objectively
- Maintain confidentiality throughout the review process
- Refer allegations involving abuse, neglect, exploitation, or criminal conduct to the appropriate authority
- Attempt informal resolution when appropriate

Documentation Requirements

PA staff shall document:

- Complaint details
- Dates and methods of contact
- Investigative actions taken
- Resolution outcomes
- Referrals to outside agencies, when applicable

9.2 Informal Resolution Process

Policy

The Public Authority shall attempt to resolve complaints informally whenever appropriate prior to formal corrective action.

Procedure

Informal resolution efforts may include:

- Discussion with the consumer and provider

- Consultation with the assigned IHSS Social Worker
- Clarification of Registry expectations and responsibilities
- Referral to alternative services or community resources

Participation in the review process is required. Failure to cooperate with a complaint review or investigation may result in suspension or removal from the Registry.

Staff Responsibilities

PA staff shall:

- Conduct complaint reviews impartially
- Communicate expectations clearly to involved parties
- Document all resolution efforts and outcomes

10.0 Removal from the Registry

10.1 Registry Suspension and Removal

Policy

The Public Authority retains authority to approve, deny, suspend, inactivate, or remove consumers and providers from the Registry in accordance with applicable program requirements and Public Authority procedures.

Removal decisions shall be based on credible information, documented concerns, program integrity, participant safety, and compliance with Registry standards.

10.2 Minor Complaints

Policy

Minor complaints are concerns that negatively affect Registry operations, professional conduct, or service delivery but do not present an immediate health or safety threat.

Procedure

An individual may be subject to suspension or removal following repeated credible minor complaints within a six (6) month period.

Examples of minor complaints may include:

- Discourteous or inappropriate behavior
- Repeated tardiness
- Failure to follow Registry procedures
- Failure to maintain communication with Registry staff
- Failure to update contact or availability information
- Repeated missed interviews or referral follow-up failures
- Repeated requests for unauthorized IHSS tasks
- Failure to comply with User Registry Agreement requirements

Additional concerns not specifically listed may also result in corrective action when determined appropriate by the Public Authority.

Staff Responsibilities

Registry staff shall:

- Review and document complaint patterns
- Issue written notices when appropriate
- Provide participants an opportunity to respond to concerns

Documentation Requirements

Registry staff shall maintain:

- Complaint records
- Notices issued
- Participant responses
- Investigative findings
- Corrective action documentation

10.3 Major Complaints:

Policy

Major complaints involve conduct that may jeopardize the health, safety, welfare, confidentiality, or integrity of Registry services.

Procedure

A single credible major complaint may result in immediate suspension or removal from the Registry.

Examples of major complaints may include:

- Theft, fraud, or forgery
- Physical, verbal, sexual, or financial abuse
- Neglect or exploitation
- Possession of weapons while providing services
- Possession or use of illegal substances while performing services
- Falsification of records or timesheets
- Discriminatory conduct or harassment
- Unauthorized disclosure of confidential information
- Confirmed Adult Protective Services findings
- Serious violations of IHSS program rules or regulations

The Public Authority reserves the right to remove individuals for serious conduct not specifically listed when necessary to protect program integrity or participant safety.

Staff Responsibilities

PA staff shall:

- Immediately report concerns involving abuse, neglect, or criminal conduct

- Coordinate with APS or law enforcement, when required
- Maintain confidentiality throughout the review process

10.4 Complaint Investigation Process

Procedure

Upon receipt of a complaint, PA staff shall:

- Review available information
- Contact involved parties, when appropriate
- Conduct interviews or gather supporting documentation
- Determine whether corrective action is warranted

For first or second minor complaints:

- Written notice may be issued describing the concern
- The individual may submit a written response within ten (10) calendar days

Documentation Requirements

PA staff shall maintain:

- Investigation notes
- Interview summaries
- Written responses
- Final determinations

10.5 Notice of Removal or Denial of Registry Services

Policy

Individuals subject to suspension, removal, or denial of Registry services shall receive written notice of the action.

Procedure

Within ten (10) working days of the determination, the Public Authority shall provide:

- Verbal notification, when feasible
- Written notice stating the reason(s) for the action
- Appeal rights and applicable timelines
- Information regarding union representation rights, when applicable

A copy of the notice may be provided to the assigned IHSS Social Worker, when appropriate.

Documentation Requirements

PA staff shall maintain copies of:

- Notices issued
- Supporting documentation
- Mailing records
- Appeal correspondence

11.0 Appeal Process

11.1 Appeal of Registry Removal or Denial

Policy

Consumers and providers shall have the opportunity to appeal Registry removal or denial decisions in accordance with established procedures.

Procedure

An appeal must:

- Be submitted in writing
- Be received within ten (10) calendar days of the notice date
- Include the basis for the appeal

The Public Authority may:

- Meet with the individual and representative, when applicable
- Review supporting documentation
- Conduct additional fact-finding, when necessary

A written determination shall be issued following review of the appeal.

Upper management shall issue a final written decision within thirty (30) working days of receipt of the appeal, unless additional review time is necessary.

Registry suspension or removal may remain in effect pending final determination.

Staff Responsibilities

PA staff shall:

- Provide appeal information timely
- Maintain neutrality during the appeal review
- Document all appeal-related communications and actions

Reapplication Eligibility

Individuals removed for non-major violations may reapply after two (2) years unless otherwise restricted.

Individuals removed for major violations may be permanently ineligible for Registry participation.

12.0 Tier 2 - Appeal of Provider Denial (Background Check)

12.1 Background Check Appeal Process

Policy

Provider applicants subject to denial based on criminal background findings may appeal only when permitted under applicable law and Welfare and Institutions Code requirements.

Procedure

Applicants shall submit a written appeal within ten (10) working days of the denial notice.

The appeal shall include:

- Basis for the appeal
- Supporting documentation, if applicable
- Request for written or oral review

Public Authority management or the Deputy Director shall review:

- Criminal background information
- Applicable legal requirements
- Supporting evidence submitted by the applicant

A final written determination shall be issued following review.

12.2 Tier 1 and Tier 2 Crimes

Procedure

The Custodian of Records (COR) shall review criminal background information in accordance with:

- Welfare and Institutions Code §§12305.81 and 12305.87
- Applicable All County Letters
- CDSS Provider Enrollment guidance

Tier 1 Crimes

Tier 1 crimes are permanently disqualifying and may include:

- Child abuse
- Elder or dependent adult abuse
- Fraud involving government health care or supportive service programs

The COR shall issue required notices, including SOC 852 forms, when applicable.

Tier 2 Crimes

Tier 2 crimes may allow conditional eligibility through an approved waiver process.

Examples may include:

- Violent or serious felonies
- Certain fraud offenses
- Sex offender registration offenses

The COR shall process required notices and waiver documentation in accordance with current state guidance.

Documentation Requirements

Authorized staff shall maintain:

- Appeal records
- Waiver documentation
- Required notices
- Background determination records

12.3 Waiver Process

Policy

Consumers may request a waiver to employ a provider otherwise restricted due to a Tier 2 offense when permitted under applicable law.

Procedure

Approved waivers apply only:

- To the requesting consumer
- Within the approving county jurisdiction

Waiver processing shall follow current CDSS enrollment procedures and applicable state guidance.

13.0 Labor-Management Committee

13.1 Labor-Management Committee Overview

Policy

The Labor-Management Committee serves as a collaborative forum for discussion between the Public Authority and the recognized labor organization.

Procedure

In accordance with the applicable Memorandum of Understanding (MOU):

- Each party may appoint up to three (3) representatives
- Meetings may be scheduled upon union request
- Meetings should occur quarterly when requested

The Committee does not replace formal bargaining, disciplinary, or grievance procedures.

Staff Responsibilities

County employees participating in Labor-Management meetings shall:

- Maintain professional conduct
- Follow labor neutrality requirements
- Limit discussions to appropriate operational matters

14.0 County Employee Role in Labor Relations

Policy

County employees shall remain neutral in labor relations matters involving recognized labor organizations.

Procedure

County employees shall:

- Refrain from providing labor relations advice to providers

- Refer union-related questions to the appropriate union representative or management staff
- Avoid conduct that may be interpreted as support for or opposition to labor organizations

Staff Responsibilities

PA staff maintain impartiality and professionalism in all labor-related interactions

15.0 County Board of Supervisors (PA Governing Body)

15.1 Governing Authority

Policy

The County Board of Supervisors serves as the governing body of the Public Authority and retains final authority over Public Authority operations, fiscal oversight, policy direction, and labor relations matters.

Responsibilities

The County Board of Supervisors may:

- Establish Public Authority policy
- Approve budgets and reimbursement rates
- Approve interagency agreements
- Delegate operational oversight authority, when appropriate
- Consider recommendations from Public Authority management and advisory bodies
- Adopt employer-employee relations policies
- Conduct or authorize labor representation activities, as required

Staff Responsibilities

PA management shall:

- Provide information and reports requested by the Board
- Implement Board-approved policies and directives
- Maintain compliance with county governance requirements

16.0 Confidentiality & Data Security Policy

16.1 Confidentiality and Data Security Policy

Policy

All employees assigned to or supporting the Public Authority Program shall protect the confidentiality, privacy, and security of all consumer, provider, employee, and program-related information obtained through the performance of official duties.

Confidential information shall only be accessed, used, disclosed, transmitted, or stored by authorized personnel for legitimate business purposes and in accordance with applicable federal, state, and county laws, regulations, and policies.

This policy applies to:

- Paper records
- Electronic records
- Verbal communications
- Email communications
- Cloud-based systems
- Portable devices and storage media
- Information transmitted through county systems or approved third-party platforms

Staff Responsibilities

PA staff shall:

- Access only information necessary to perform assigned job duties.
- Maintain confidentiality of all protected information.
- Secure records from unauthorized access, disclosure, or loss.
- Follow county cybersecurity and records management requirements.
- Report suspected or confirmed confidentiality breaches immediately.

Documentation Requirements

PA staff shall complete:

- Required confidentiality acknowledgments
- Privacy and cybersecurity trainings
- Incident reporting documentation, when applicable

16.2 Confidential Information

Policy

Confidential information includes all protected information obtained through Public Authority operations, whether written, verbal, electronic, or otherwise recorded.

Confidential Information May Include

- Names, addresses, and contact information
- Social Security numbers and identifying information
- Medical information and health conditions
- Financial and benefits information
- Employment and enrollment records
- Criminal background information
- Payroll and timesheet information

- Case notes and internal records
- Information protected under federal, state, or county law

Staff Responsibilities

PA staff shall:

- Prevent unauthorized disclosure of confidential information
- Verify authorization prior to releasing information
- Use discretion when discussing confidential matters in public or shared workspaces

16.3 Legal and Regulatory Compliance

Policy

All employees shall comply with applicable confidentiality and data security laws and regulations.

Procedure

Applicable laws and regulations may include:

- California Welfare and Institutions Code (WIC) §10850
- Health Insurance Portability and Accountability Act (HIPAA)
- California Information Practices Act (IPA)
- County confidentiality and records policies
- Applicable state and federal cybersecurity requirements

Staff Responsibilities

PA staff shall:

- Participate in required confidentiality and security trainings.
- Follow all applicable legal and operational requirements related to protected information.
- Cooperate with investigations involving confidentiality violations or data security incidents.

16.4 Data Security Requirements

Policy

The Public Authority shall implement reasonable administrative, technical, and physical safeguards to protect confidential information.

Procedure

Employees shall:

- Secure confidential files and records when unattended
- Use approved secure methods when transmitting confidential information
- Follow county password and access-control requirements
- Protect electronic devices from unauthorized use
- Avoid storing confidential information on unauthorized devices or systems

Staff Responsibilities

PA staff shall:

- Immediately report lost devices, unauthorized disclosures, or suspected cybersecurity incidents
- Follow county information technology and cybersecurity protocols
- Maintain secure workspaces and document handling practices

17.0 County Employee Responsibilities

17.1 Confidentiality Responsibilities

Policy

Confidential information obtained through employment with the Public Authority shall only be used or disclosed in the performance of official job duties and only to authorized individuals.

Procedure

Employees shall:

- Maintain confidentiality during and after employment.
- Follow county confidentiality and privacy policies.
- Report suspected or confirmed breaches immediately to supervisory staff or management.

Employees shall comply with all applicable Employee Handbook confidentiality policies and procedures.

Staff Responsibilities

PA staff shall:

- Protect confidential information from unauthorized disclosure.
- Use county-approved systems and communication methods.
- Exercise professional judgment when handling sensitive information.

Documentation Requirements

PA staff shall complete:

- Confidentiality agreements
- Required privacy trainings
- Incident reports, when applicable

17.2 Relatives or Personal Acquaintances

Policy

To prevent conflicts of interest and protect confidentiality, employees shall not participate in Public Authority activities involving relatives, household members, or personal acquaintances.

Procedure

Employees shall:

- Notify their supervisor immediately when a relative or personal acquaintance seeks services through the Public Authority
- Refrain from accessing or participating in related intake, enrollment, referral, or service activities
- Transfer responsibility for processing the matter to another authorized employee or supervisor

Employees are prohibited from:

- Accessing records involving relatives or acquaintances
- Discussing confidential case information
- Influencing service determinations or Registry activities involving personal relationships

Staff Responsibilities

Supervisory staff shall:

- Reassign work when conflicts are identified
- Monitor compliance with conflict-of-interest requirements
- Document reassignment actions, when applicable

18.0 Policy Review & Amendments

18.1 Policy Review Cycle

Policy

This Policy and Procedure Manual shall be reviewed periodically to ensure compliance with current laws, regulations, operational practices, and program requirements.

Procedure

The manual shall be reviewed:

- Annually, at minimum
- Following significant legal or regulatory changes
- When operational revisions or program updates occur

All revisions shall be reviewed and approved by Public Authority management prior to implementation.

Staff Responsibilities

PA management shall:

- Coordinate policy review activities
- Maintain current versions of the manual
- Ensure outdated versions are removed from circulation

Documentation Requirements

PA management shall maintain:

- Revision histories
- Approval records
- Updated policy distribution records

18.2 Staff Notification and Training

Policy

Employees shall be informed of significant policy changes affecting Public Authority operations or compliance requirements.

Procedure

Staff notification may include:

- Email communications
- Staff meetings
- Required trainings

Additional training may be required when policies significantly impact operational procedures or compliance standards.

Staff Responsibilities

PA staff shall:

- Review updated policies timely
- Participate in required trainings
- Implement revised procedures as directed

19.0 Public Authority Program Software

19.1 Information Systems Policy

Policy

The Public Authority shall utilize approved information systems to support Registry operations, provider enrollment, reporting, case coordination, and program administration. All systems shall be used in compliance with applicable confidentiality, privacy, and data security requirements.

Staff Responsibilities

PA staff shall:

- Use authorized systems only for official business purposes
- Maintain confidentiality of system access credentials
- Follow county technology and acceptable-use policies
- Access only records necessary to perform assigned duties

19.2 CMIPSI: (Case Management Information Payroll System II)

Overview

CMIPS II is the State of California's centralized case management and payroll system for the IHSS Program.

Functions

Authorized staff may use CMIPS II to:

- Verify provider enrollment and eligibility
- Review authorized service hours
- Access payroll and service-related information
- Obtain required reports and performance measures
- Support program oversight and compliance activities

Staff Responsibilities

PA staff shall:

- Access CMIPS II only within authorized permissions.
- Follow state and county system usage requirements.
- Refer to current CMIPS II user guidance and procedures.

19.3 REVA: (Registration Enrollment Video Appointment)

Overview

REVA is a secure electronic enrollment system used to support IHSS provider enrollment and orientation activities.

Functions

REVA allows applicants to:

- Complete enrollment requirements electronically
- Review required orientation materials
- Electronically sign enrollment documents
- Obtain Live Scan forms
- Schedule orientation appointments

Staff Responsibilities

Registry staff shall:

- Monitor enrollment completion status
- Assist applicants with system navigation, when appropriate
- Maintain compliance with enrollment processing requirements

19.4 NEXUS Registry System

Overview

NEXUS is a secure Registry management system utilized to support Public Authority referral and Registry operations.

Functions

NEXUS may be used to:

- Maintain consumer and provider Registry records
- Generate provider referral lists
- Track Registry activity and contacts
- Produce standardized forms and correspondence
- Document follow-up and case activity

The NEXUS system shall be utilized in accordance with HIPAA and applicable confidentiality requirements.

Staff Responsibilities

Registry staff shall:

- Maintain accurate and timely data entry
- Document Registry activities consistently
- Protect system access credentials and confidential information

Documentation Requirements

Registry staff shall maintain:

- Referral records
- Contact documentation
- Registry activity logs
- Electronic correspondence and notices

20.0 Acknowledgement and Agreement

20.1 Employee Acknowledgment

Policy

County employees assigned to or supporting the Public Authority Program shall acknowledge receipt and understanding of this Policy and Procedure Manual.

Compliance with these policies and procedures is a condition of employment and continued participation in Public Authority operations.

Procedure

Employees shall:

- Review of the manual and related updates
- Participate in required training
- Comply with all applicable policies and procedures

Staff Responsibilities

Supervisory staff shall:

- Ensure staff receive updated policy materials
- Monitor compliance with required training and policy implementation

Documentation Requirements

The Public Authority shall maintain:

- Training attendance records
- Policy distribution documentation

21.0 Definition / Acronyms

21.1 Definitions and Acronyms

The following definitions and acronyms are used throughout this Policy and Procedure Manual:

Acronym/Term	Definition
IHSS	In-Home Supportive Services
PA	Public Authority
IP	Independent Provider
CMIPS II	Case Management, Information and Payrolling System II
REVA	Registration Enrollment Video Appointment
NEXUS	Registry database and referral management system
ACL	All County Letter
CDSS	California Department of Social Services
DOJ	Department of Justice
APS	Adult Protective Services
HHSA	Health and Human Services Agency
MOU	Memorandum of Understanding
COR	Custodian of Records
HIPAA	Health Insurance Portability and Accountability Act
IPA	California Information Practices Act
NOA	Notice of Action
ESP	Electronic Services Portal
TTS	Telephone Timesheet System
BOS	Board of Supervisors
SEIU	Service Employees International Union

22.0 Resources and References

22.1 Reference Materials

Policy

The Public Authority shall maintain access to current program resources, reference materials, and operational guidance necessary to support compliance with IHSS and Registry requirements.

Resources and References

The following materials support implementation of this Policy and Procedure Manual:

IHSS Provider Enrollment Toolkit

The IHSS Provider Enrollment Toolkit contains provider enrollment guidance, applicable All County Letters (ACLs), enrollment forms, and frequently asked questions related to provider enrollment requirements.

[IHSS Provider Enrollment Toolkit](#)

User Registry Agreement

The User Registry Agreement outlines the rights, responsibilities, expectations, and participation requirements for Registry consumers and providers.

[User Registry Agreement](#)

NEXUS User Guidance

NEXUS reference materials provide operational guidance and instructions for authorized staff using the Registry database system.

Staff Responsibilities

PA staff shall:

- Utilize current reference materials and program guidance.
- Follow updated state and county procedures.
- Maintain access to applicable forms, manuals, and operational resources.

22.2 Public Authority Contact Information

Public Authority Main Office

For provider enrollment, payroll assistance, and timesheet support:

831.634.0784

1111 San Felipe Road, Suite 108

For general Public Authority questions and program information:

PA-IHSS@sanbenitocountyca.gov

Registry Referrals

To request Registry referrals or provider lists:

Email:

ReferralPa@sanbenitocountyca.gov

Provider Monthly Check-In

For Registry provider monthly check-ins and status updates:

Email:

ProviderCheckin@sanbenitocountyca.gov

Staff Responsibilities

PA staff shall:

- Provide accurate and updated contact information to consumers and providers
- Respond to phone calls, emails, and inquiries in a timely and professional manner
- Route inquiries to the appropriate staff member or department when necessary
- Notify management of any changes to Public Authority contact information requiring updates to forms, materials, or public resources