To apply for IHSS call (916) 874-9471

Monday through Friday from 9:00 A.M. to 4:00 P.M.

County Executive Bradley J. Hudson

Board of Supervisors

Phil Serna, 1St District Patrick Kennedy 2nd District Susan Peters, 3rd District Roberta MacGlashan 4th District Don Nottoli, 5th District



SERVICES

County of Sacramento
Department of Health & Human Servi
P O Box 269131
Sacramento, CA 95826

IN-HOME SUPPORTIVE SERVICES



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Department of
Health & Human Services
In-Home Supportive Services

P.O. Box 269131 Sacramento, CA 95826

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IN-HOME SUPPORTIVE SERVICES

- The **IHSS** provides program in-home domestic and personal care services to allow individuals to remain safely in their own home and prevent the need for out-of-home care. To be eligible, you must be over 65 years of age, or disabled, or blind and have completed a Medi-Cal Eligibility Determination licensed health and care professional must complete a Health Care Certification (SOC 873) indicating your need for service
- The types of services which can be authorized through IHSS are house cleaning, meal preparation, laundry, grocery shopping, personal care services (such as bowel and bladder care, bathing, grooming and paramedical services), accompaniment to medical appointments, and protective supervision for the mentally impaired.

How IHSS Works

- A county social worker will interview you at your home to determine your need for IHSS. Based on your ability to safely perform certain tasks for yourself, the social worker will assess the types and hours of services you need. This assessment will include information given by you and other individuals involved with your care such as your physician or other licensed health care professional.
- A completed Health Care Certification (SOC 873) must be received by the county prior to authorization of services.
- You will be notified if IHSS has been approved or denied. If denied, you will be informed of the reason for the denial and your right to appeal. If approved, you will be notified of the services and the number of hours per month authorized for you.

- If you are approved for IHSS, you must hire a care provider to perform the authorized services. You are considered the employer of your care provider and therefore, it is your responsibility to hire, train, supervise, and terminate your care provider.
- Recipients may contact the IHSS Caregiver Registry (916) 874-4411 for assistance with locating a care provider.
- All care providers must complete enrollment requirements to be paid by the IHSS program. Contact the IHSS Public Authority for Provider Enrollment information.
- In order to become an IHSS care provider:
 - ♦ A Department of Criminal Justice background check must be passed (at the potential care providers expense).
 - All required care provider forms must be completed and submitted.
 - The care provider must attend a mandatory care provider orientation.