



CDSS

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STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES

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EDMUND G. BROWN JR.
GOVERNOR

December 4, 2012

ALL-COUNTY LETTER NO.: 12-68

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

TO: ALL COUNTY WELFARE DIRECTORS
ALL IHSS PROGRAM MANAGERS

SUBJECT: CASE MANAGEMENT, INFORMATION AND PAYROLLING SYSTEM II (CMIPS II) NEW USER ID FORMS

The purpose of this All County Letter is to inform counties of the change to processes related to managing users in the new Case Management, Information and Payrolling System II (CMIPS II) and to transmit copies of the three (3) new California Department of Social Services (CDSS) forms for CMIPS II users.

BACKGROUND:

The In-Home Supportive Services (IHSS) program is a Medi-Cal benefit, with the exception of residual cases. As such, all state and county staff must adhere to the Health Insurance Portability and Accountability Act (HIPAA) requirements with regard to maintaining the privacy and security of each recipient's medical records and any other personal health information. HIPAA requires safeguards for storing medical information electronically, as well as, setting limits and conditions on the uses and disclosures that may be made without authorization from the individual. HIPAA requirements restrict the right to review or copy any of the individual's health records in whatever format they may be stored. These rules include the personal information stored in CMIPS II that is viewed by state and county staff administering the IHSS program.

GENERAL INFORMATION:

CDSS, the Department of Health Care Services, Hewlett Packard (HP) Enterprise Services, LLC, the CMIPS II vendor, and county staff will have access to information in the CMIPS II system. The primary system functions are processing payroll for IHSS

and the Waiver Personal Care Services (WPCS) providers, maintaining case information for IHSS recipients and producing IHSS program reports.

CMIPS II USERS:

CMIPS II usage is restricted to staff who have a business need to review information contained in CMIPS II strictly for the purpose of administering IHSS benefits. For example, this includes county staff that process IHSS intakes, assessments, payroll, and provider enrollment; IHSS social workers and their supervisors; and Quality Assurance staff.

Auditors, district attorney and county investigators, Medi-Cal eligibility workers, income verification staff or CalFresh staff and all other users who are not directly affiliated with the IHSS program are not allowed access to CMIPS II. If information is needed pertaining to a particular case, the information should be requested from the IHSS office in the county. If the request is lengthy, the county should continue to send their request to CDSS who will work with the CMIPS II vendor to fulfill the request. Other uses or release of the information contained in CMIPS II are prohibited and any exceptions must be approved by CDSS in advance.

PUBLIC AUTHORITIES:

Public Authority (PA) users will have continued access as long as they are authorized by the county. Counties will continue to choose the level of access for their PAs based on their business functions.

CMIPS II User ID Forms

Prior to the CMIPS II implementation, counties sent their User Request forms to CDSS to be reviewed and then forwarded on to HP for processing. With the implementation of CMIPS II, the process of obtaining or making a change to a User ID will now be handled by a county appointed Security Officer who will be responsible for managing all requests to add, modify, deactivate and reactivate users in their county.

CDSS has created and attached the following forms for county use:

- COUNTY CMIPS II USER REQUEST FORM – ADD/MODIFY USER (SOC 884)
- COUNTY CMIPS II USER REQUEST FORM - DEACTIVATE/REACTIVATE USER (SOC 883)
- CDSS CMIPS II USER ID CONFIRMATION FORM (SOC 882)

Camera Ready Copies

For a camera-ready copy in English, contact the Forms Management Unit at fmudss@dss.ca.gov. If your office has internet access, you may obtain these forms from the CDSS webpages at: http://www.dss.cahwnet.gov/cdssweb/FormsandPu_271.htm.

These forms follow the layout of the corresponding CMIPS II screens in order to aid county Security Officers with user management. All forms must be filled out in their entirety including:

Approving Manager and Security Officers' Signatures
Workers' Name
4-Digit Worker Number
Phone Number
Birthdate
Access and Sensitivity Level
County and Location

Signatures of both the Approving Manager and the Security Officer are required before a user can be added or modified. These signatures certify that the person has a business need to access CMIPS II and view confidential IHSS information.

The PA users are allowed access but must have an authorized county approval signature from the local county welfare department and identify PA user name(s) and user roles. Since the User ID Request forms are no longer sent to CDSS for processing, **counties are now required to submit the new CDSS CMIPS II User ID Confirmation Form to CDSS**. This will aid CDSS with identifying the users in the CMIPS II system and tracking the number of licenses used by each county. This form may be e-mailed to CDSS at CMIPSID@dss.ca.gov or faxed to (916) 651-5256.

Should you have questions regarding the information provided in this letter, please contact the Adult Programs Systems Units' County Assistance line at (916) 551-1003.

Sincerely,

Original Document Signed By:

EILEEN CARROLL
Deputy Director
Adult Programs Division

Attachments

c: CWDA
Department of Health Care Services

COUNTY CMIPS II USER ID CONFIRMATION CDSS COPY

The **CDSS CMIPS II USER ID CONFIRMATION FORM** is used to inform CDSS when a user is added, modified or terminated in the CMIPS II. The information on this form must be kept current. It must be signed by the County/Public Authority Authorized Approver of person requesting access. It must also be signed by the user before he/she obtains access to CMIPS II. When an employee separates from the Department an updated copy of this form must be submitted to the CDSS CMIPS II Unit.

Counties can email completed forms to CDSS at CMIPSID@dss.ca.gov or fax to the CMIPS II Unit at (916) 651-5256.

USER INFORMATION

Action to be Taken

Add Modify Terminate Deactivate Reactivate

User's Name

First Name

Last Name

Mr. Mrs. Ms.

Duties

County

User Role

Effective Date (MM/DD/YYYY)

Authorizing Manager's Name

First Name

Last Name

Authorizing Manger's
Phone Number

Authorizing Manager's Email

I acknowledge that the above user has a business need to access CMIPS II and has been informed that they must use the access according to HIPAA Privacy Rules for appropriate business purposes and will take reasonable precautions to protect the confidential and sensitive data in these systems and applications.

Authorizing Manager's Signature

Date

User Acknowledgement: Must be signed by the user above prior to being granted access to CMIPS II

I acknowledge that I have a business need to access CMIPS II and have been informed that I must use this access, according to HIPAA Privacy Rules, for appropriate business purposes directly related to the administration of the IHSS program and will take reasonable precautions to protect the confidential and sensitive data in these systems and applications.

User Signature

Date

**INSTRUCTIONS ON FILLING OUT COUNTY CMIPS II USER ID CONFIRMATION FORM
CDSS COPY**

These instructions are to assist a requesting agency in completing the ID confirmation form. Please be sure to complete the form in its entirety. If you need assistance or have questions, please contact the CDSS Adult Programs Systems Unit at (916) 551-1003.

User Information

Action To Be Taken – Check appropriate box.

User's Name – Check appropriate box and then enter first and last name of User.

Duties – Enter title and the User's business need for access to CMIPS II
(e.g. Social Worker, Intake Worker).

County – Enter User's county name.

User Role – Enter User's Role.

Effective Date (MM/DD/YYYY) – Enter effective date. Month and day must have two digits
(e.g.01/05/2012).

Authorizing Manager's Name – Enter first and last name of Authorizing Manager.

Authorizing Manager's Phone Number – Enter Authorizing Manager's telephone number.

Authorizing Manager's Email – Enter Authorizing Manager's email address.

Read completely the acceptance statement

Authorizing Manager's Signature – Enter Authorizing Manager's signature.

Date – Enter date Authorizing Manager signed form.

User Acknowledgement: Must be signed by the user prior to being granted access to CMIPS II.

Read completely the acceptance statement.

User's Signature – Enter User's signature.

Date – Enter date User signed form.

COUNTY CMIPS II USER REQUEST FORM DEACTIVATE/REACTIVATE USER

USER INFORMATION

Action to be Taken <input type="checkbox"/> Deactivate <input type="checkbox"/> Reactivate	User's Name: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	First Name	Last Name
Effective Date (MM/DD/YYYY)	Authorizing Manager's Name	First Name	Last Name
Authorizing Manager's Phone Number			Date

PORTAL (UPDATE USER PROFILE SCREEN)

Action To Be Taken (Options include: 1) Deactivate user's account; 2) Reactivate user's account;
3) Remove access to certain areas; 4) Restore access to certain areas)

Deactivate Reactivate Remove Access Restore Access
 Inactive/Lockout (completed by Security Officer)

Assign Access Dates (MM/DD/YYYY): Leave blank if no access is to be given

Web Portal	Start Date:	End Date:
Case Management	Start Date:	End Date:
Report Access	Start Date:	End Date:

Assign Portal Roles and Access Date (MM/DD/YYYY): Leave blank if no access is to be given

Query and Sampling Tool	Start Date:	End Date:
Data Retention	Start Date:	End Date:
Security Administrator	Start Date:	End Date:
Security Officer	Start Date:	End Date:
System Generated Password (completed by Security Officer)		

CASE MANAGEMENT (USER HOME/CLOSE USER/REOPEN SCREENS)

Reassign Cases and Identify New Case Owner (Name)	End Date:
Cases Reassigned (completed by Security Officer) <input type="checkbox"/> Yes <input type="checkbox"/> No	Reopen Previous Positions <input type="checkbox"/> Yes <input type="checkbox"/> No

REPORTING (FOR USER ACCESS REACTIVATION ONLY)

Security Group	Y/N
CORE	<input type="checkbox"/> Yes <input type="checkbox"/> No
SYSTEM ADMIN	<input type="checkbox"/> Yes <input type="checkbox"/> No
HEALTH BENEFITS MANAGER	<input type="checkbox"/> Yes <input type="checkbox"/> No
Security Officer/Administrator Signature	Date

**INSTRUCTIONS ON FILLING OUT COUNTY CMIPS II USER REQUEST FORM
Deactivate/Reactivate User**

These instructions are to assist a requesting agency in completing the User Request form. Please be sure to complete the form in its entirety. If you need assistance or have questions, please contact the CDSS Adult Programs Systems Unit at (916) 551-1003.

USER INFORMATION

Action To Be Taken – Check appropriate box.

User's Name – Check appropriate box and then enter first and last name of User.

Effective Date (MM/DD/YYYY) – Enter effective date. Month and day must have two digits
(e.g.01/05/2012).

Authorizing Manager's Name – Enter first and last name of Authorizing Manager.

Authorizing Manager's Signature – Enter Authorizing Manager's signature here.

Date – Enter date Authorizing Manager signed form.

PORTAL

Action To Be Taken – Check appropriate box.

Assign Access Dates (MM/DD/YYYY): Leave blank if no access is to be given –
Enter date for each applicable area. If no specific end date is available, it is recommended that
“2099” be used in “End Date” fields.

**Assign Portal Roles and Access Dates (MM/DD/YYYY): Leave blank if no
access is to be given** – Enter date for each applicable area. If no specific
end date is available, it is recommended that “2099” be used in “End Date” fields.

System Generated Password (completed by Security Officer) – For Reactivation Only.
Upon completion of the reactivation, enter the system generated
password assigned to the user.

CASE MANAGEMENT

Reassign Cases and Identify New Case Owner – Before user can be closed, the supervisor must reassign all cases to an active user (*e.g. another caseworker or a Supervisor*). Enter name of the new case owner.

End Date: Enter the End Date (*effective date that the account will be suspended*). Defaults to current date.

Cases Reassigned (*completed by Security Officer*) – Check appropriate box.

Reopen Previous Positions – Check appropriate box.

REPORTING

Check appropriate box for the security group(s) to which the reactivated user needs access. A user can be given access to multiple groups. Contact the CMIPS II Help Desk to request that this user be reactivated in the Reporting area.

Security Officer/Administrator Signature – Enter Security Officer/Administrator's signature.

Date – Enter date Security Officer/Administrator signed form.

**COUNTY CMIPS II USER REQUEST FORM
ADD/MODIFY USER**

USER INFORMATION			
Action to be Taken <input type="checkbox"/> Add <input type="checkbox"/> Modify	User's Name:	First Name	Last Name
Effective Date (MM/DD/YYYY)	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Authorizing Manager's Name	First Name Last Name
Authorizing Manager's Signature			Date

PORTAL			
User ID	Worker Number	County	Location/District Office
User's Birthdate (MM/DD)	Report Access Level <input type="checkbox"/> 0 = State Only <input type="checkbox"/> 1 = County-Wide Access <input type="checkbox"/> 2 = Limited - Caseload Only		

Assign Access Dates (MM/DD/YYYY): Leave blank if no access is to be given

Web Portal	Start Date:	End Date:
Case Management	Start Date:	End Date:
Report Access	Start Date:	End Date:

Assign Portal Roles and Access Date (MM/DD/YYYY): Leave blank if no access is to be given (Some Portal Roles are not for county use)

Query and Sampling Tool	Start Date:	End Date:
Data Retention	Start Date:	End Date:
Security Administrator	Start Date:	End Date:

CASE MANAGEMENT			
Worker Number from Portal	Sensitivity Level (1-5)	Location	Primary Alternate Language
Secondary Alternate Language	Business Phone & Extension	Main Office Phone	
County Email Address		Fax Number	County Cellphone or Pager Number
User Role (See Instructions)		Application	Default Printer

Position

WORK QUEUES - Work Queue Administrator <input type="checkbox"/> Yes <input type="checkbox"/> No					
Queue Name	Y/N	Queue Name	Y/N	Queue Name	Y/N
Timhseet Errors		Timesheet Eligibility Errors		Timesheets on Hold	
timesheets Over 70%		Payroll Supervisor		Payroll Pending Approval	
QA		QA Supervisor		Public authority	
ICT Coordinator		Homemaker Supervisor		County Contractor Coordinator	

REPORTING				
Security Group	Types Of Reports	Y/N	Types Of Reports	Y/N
CORE	Case Maintenance		Payroll	
	Provider Management		Time and Attendance	
	QA/Fraud		Homemaker Reports	
SYSTEM ADMIN	System Performance		System Security	
	Date Download		Data Retention	
HEALTH BENEFITS MANAGER	Health Benefits Manager			

Security Officer/Administrator Signature	Date
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INSTRUCTIONS ON FILLING OUT COUNTY CMIPS II USER REQUEST FORM

Add/Modify User

These instructions are to assist a requesting agency in completing the application. Please be sure to complete the form in its entirety. If you need assistance or have questions, please contact the CDSS CMIPS II Unit at (916) 651-1069.

USER INFORMATION

Action To Be Taken – Check appropriate box.

User's Name – Check appropriate box and then enter first and last name of User.

Effective Date (MM/DD/YYYY) – Enter effective date. Month and day must have two digits, (e.g. 01/05/2012).

Authorizing Manager's Name – Enter first and last name of Authorizing Manager.

Authorizing Manager's Signature – Enter Authorizing Manager signature.

Date – Enter date Authorizing Manager signed form.

PORTAL

User ID – Enter a unique User ID. Standard format includes: First initial of first name (capital), up to 7 letters of last name (first letter capitalized), and 3-digit number (001-999)
Omit hyphens, dashes, and apostrophes.

Worker Number – Enter user's worker number (4 Characters). It is very important for this number to be unique. All users must have one.

County – Make sure the appropriate county name displays.

Location/District Office – Enter a 2-digit number to identify the district office associated with user (only numbers are allowed). Enter 00 if user not associated with a specific district office.

User's Birthdate – Enter User's month and day of birth. (MM/DD)

Report Access Level – Check appropriate box for User's level of access to Report data.
(0=State only, 1=User will have county-wide access, 2=User will have access to their caseload only.)

Assign Access Dates (MM/DD/YYYY): Leave blank if no access is to be given –
Enter dates for each applicable area. If no specific end date is available, it is recommended that "2099" be used in End Date: fields.

Assign Portal Roles and Access Dates (MM/DD/YYYY): Leave blank if no access is to be given (Some Portal Roles are not for county use) – Enter dates for each applicable area. If no specific end date is available, it is recommended that “2099” be used in End Date: fields.

CASE MANAGEMENT

Worker Number from Portal – Defaults to 99. Enter User’s worker number. Must be same worker number from Portal setup. It is very important for this number to be unique. All users must have one.

Sensitivity Level (1-5) – Applies to Case Notes: Values = 1-5 (e.g. level 1 can only view/create a note at a level 1; level 3 can view/create 3, 2, 1, etc.)

Location – Pertains to level of cases User is allowed to access/update (e.g. county vs. district office). Enter appropriate organizational level.

Primary Alternate Language – Optional: Enter primary alternate language to which User is associated. This is used for case assignment purposes.

Secondary Alternate Language – Enter secondary alternate language to which User is associated. This is used for case assignment purposes.

Business Phone No & Extension – Enter business telephone number and extension of User.

Main Office Phone – Enter main office telephone number of User.

County Email Address – Enter county email address of User.
(e.g. for.example@saccounty.gov)

Fax Number – Enter Fax machine telephone number of User.

County Cellphone or Pager Number – Enter county cellphone or pager number of User.

Application – Defaults to “NewWrkrApp.” Determines appropriate My Workspace (home page) screen. Options are: DefaultAPP (common to most staff); CTYSYSADMN (County Security Administrators); PAApp (PA staff with PA-specific roles).

Default Printer – Enter User’s default CMIPS II Printer. rXXpsY (XX=Co. #, Y=Printer #)

Position – Enter assigned position. (Security Admin: Navigate to appropriate Organizational Unit to locate position).

User Role – Defaults to “NewUserRole” Enter User’s role (see listing of user roles). If setting up a new Security Administrator, role selected must be a County Security Admin.

CMIPS II CASE MANAGEMENT USER ROLES

#	User Role	Includes Business Functions
1	Referrallintake	Create referrals/applications/cases; maintain person information, create person/case notes.
2	CaseManagement	Create referrals/applications/cases; determine program eligibility; conduct needs assessment; conduct reassessment/renew case; perform leave/terminate/deny/withdraw/rescind a termination or denial; generate replacement/supplemental timesheets; perform County Contractor/Homemaker activities; create person/case notes; generate forms; ability to assign a worker on upon receipt of an ICT case; perform quality assurance activities; perform state hearing activities; view payroll (timesheet, special transaction, overpayment, collection, warrant, payment correction) information; view provider information; create unannounced home visit information.
3	CaseManagement WithApproval	This role offers the same functionality as CaseManagement except this role requires Supervisor Approval.
4	CaseManagement Supervisor	This role offers the same functionality as CaseManagement except this role can also perform Supervisor Approval.
5	Timesheet	Create person/case notes; receive/process timesheet; generate replacement/ supplemental timesheet; view case management information; view provider information; view unannounced home visit information; create payment corrections; view payroll (timesheet, special transaction, overpayment, collection, warrant, payment correction) information.
6	Homemaker	Create and view person/case notes; view case management information; enter/view homemaker timesheets.
7	CDSSView (CDSS Only)	This role offers view access to screens including case, payroll (timesheet, warrant, special transaction, overpayment, collection, and payment correction), home visit, case/person notes.
8	CDSSFiscal (CDSS Only)	This role offers the same functionality as <i>CDSSView</i> except this role can also update rate information (county contractor, public authority, county wage rates).
9	WPCS	View case information; view/modify payroll (timesheet, warrant, special transaction, overpayment, collection, and payment correction); ability to approve special transactions; assign/modify provider information.
10	PublicAuthority	This role offers a limited view of information such as case home, authorization summary, case providers, and payment search.

11	CasemgmtProv Mgmt	This role offers a combination of the <i>CaseManagement</i> and <i>Provider Management</i> roles.
12	CaseMgmtWith ApprovalProvMgmt	This role offers a combination of the <i>CaseManagementWithApproval</i> and <i>ProviderManagement</i> roles.
13	CaseMgmtPayroll	This role offers a combination of the <i>CaseManagement</i> and <i>Payroll</i> roles.
14	CaseMgmtWith ApprovalPayroll	This role offers a combination of the <i>CaseManagementWithApproval</i> and <i>Payroll</i> roles.
15	CaseMgmtPayroll Approver	This role offers a combination of the <i>CaseManagement</i> and <i>Payroll</i> roles except this role can also approve payments submitted by other users.
16	CasemgmtWith ApprovalPayroll Approver	This role offers a combination of the <i>CaseManagementWithApproval</i> and <i>Payroll</i> roles except this role can also approve payments submitted by other users.
17	ProviderMgmt Payroll	This role offers a combination of the <i>ProviderManagement</i> and <i>Payroll</i> roles.
18	ProviderMgmt PayrollApprover	This role offers the same functionality as <i>ProviderMgmtPayroll</i> but this role can also approve payments submitted by other users.
19	CaseMgmtProv MgmtPayroll	This role is a combination of the <i>CaseManagement</i> , <i>ProviderManagement</i> , and <i>Payroll</i> roles.
20	CaseMgmtWith ApprovalProvMgmt Payroll	This role is a combination of the <i>CaseManagementWithApproval</i> , <i>ProviderManagement</i> , and <i>Payroll</i> roles.
21	CaseMgmtProv MgmtPayroll Approver	This role offers the same functionality as <i>CaseMgmtProvMgmtPayroll</i> except this role can also approve payments submitted by other users.
22	CaseMgmtwith AprovalProvMgmt PayrollApprover	This role offers the same functionality as <i>CaseMgmtWith ApprovalProvMgmtPayroll</i> except this role can also approve payments submitted by other users.
23	CrossCounty Payroll	This role offers the same functionality as <i>PayrollMgmt</i> and <i>ProviderMgmt</i> role except this role can key a payment on a case after it has transferred to another county. Note: If a county cannot assign this to a user as their primary role, they can temporarily assign or contact current county to process the action for them.
24	PayrollMgmt	This role offers the same functionality as <i>Payroll</i> except this role can also approve payments submitted by other users.

25	ProgramMgmt	This role offers view and modify access to most areas of Case Management. The only exception is that it does not offer "Cross County Payroll" functionality. It is recommended that this role be assigned to a limited amount of users as it is considered to be a "super user" role.
26	ProviderMgmt	Create person/case notes; view case management information; view payroll information (timesheet, warrant, special transaction, overpayment, collection, payment correction); view unannounced home visit information; assign providers; modify all provider information including benefits; generate forms.
27	Payroll	Create person/case notes; view case management information; view/modify payroll information (timesheet, warrant, special transaction, overpayment, collection, payment correction); view unannounced home visit information; view provider information.
28	CDSSModify (CDSS Only)	This role offers the same functionality as <i>CDSSFiscal</i> except this role can also modify unannounced home visit information, view payment corrections, and process special transactions for missed buyout.
29	CDSSProgram Mgmt (CDSS Only)	This role offers the same functionality as CaseMgmtSupervisor, ProviderMgmt, and CDSSFiscal except this role can also process special transactions for missed buyout.
30	CountyView Only	This role offers view access to case management, payroll, and provider information.
31	PAPProviderEnroll (new)	This role offers the same functionality as the <i>PublicAuthority</i> role but this role can also enroll providers.
32	PAPProviderEnroll Benefits(new)	This role offers the same functionality as the <i>PublicAuthority</i> role but this role can also enroll providers and manage provider benefits.
33	PABenefits(new)	This role offers the same functionality as the <i>PublicAuthority</i> role but this role can also enroll providers and manage provider benefits.

CMIPS II CASE MANAGEMENT SECURITY

#	User Role	Includes Business Functions
1	CountySecurity Admin	Add/assign/modify/close user access to Case Management. Note: This user role must be assigned to any user being added as a Security Officer/Administrator in CMIPS II. With this role, the Security Officer/Administrator has the full functionality needed to manage user setup in Case Management.

WORK QUEUES – Work Queue Administrator (Yes/No)

Enter Y if User is a Work Queue Admin. User must also have County Security Admin role. Only CMIPS II Help Desk can assign a user to this. Contact CMIPS II Help Desk; inform them which queues User will administer.

Queue Name – Enter Y for yes or N for no for each applicable Queue Name User will have access to. If no access is to be granted leave blank.

REPORTING

Enter Y next to the security group(s) to which this User needs access. The Security Group is a “folder” and under each folder the listed types of reports are available. A user can be given access to multiple groups. Contact the CMIPS II Help Desk to request that this user be added/modified in the Reporting area.

Security Officer/Administrator Signature – Enter Security Officer/Administrator’s Signature.

Date – Enter date Security Officer/Administrator signed form.