



County of Riverside Department of Public Social Services  
 In-Home Supportive Services (IHSS), Public Authority  
 12125 Day St., Suite S-101, Moreno Valley, CA 92557  
 Phone: (888) 960-4477  
 E-mail: IHSSPACOR@rivco.org  
 Fax: (951) 686-1419

## VERIFICATION OF EMPLOYMENT (VOE)

[Redacted]		[Redacted]	
IHSS Provider Name		Telephone Number (Home Care Provider)	
[Redacted]		[Redacted]	
Residence Address (Home Care Provider)		Still Authorized	
10/21/2009	<input checked="" type="checkbox"/> Active <input type="checkbox"/> Inactive <input type="checkbox"/> Leave <input type="checkbox"/> Pending	Authorized End Date	
Initial Hire Date (Employment may be continuous or intermittent from this date)	Employment Status (Home Care Provider)	IHSS Provider	
Not Applicable		[Redacted]	
Reason for Inactive or Not Currently Working		Position	

Earnings reported in the attachment are based on warrants issued and are inclusive of overtime, sick time & travel time paid when applicable. This is real time information, payroll data is subject to change at any time due to the submission of timesheets.

**Pay Frequency: Semi-Monthly on approximately the 10th and 25th.**

**Current Hourly Rate:** \$18.00

**Current Assigned Hours Per Month:**

(Riverside County IHSS Providers had an increase in hourly wages to \$15.50 effective 01/01/2022. Wages were again increased to \$16.75 effective 05/01/2023 and again to \$18.00 on 01/01/2024)

283:0

**PLEASE NOTE, THE ATTACHED PAYMENT HISTORY MAY REFLECT INCOME FOR MULTIPLE CLIENTS.**

Riverside County solely releases IHSS income and earnings information as presented herein.

Comments:

Home Care Providers are paid solely for hours worked. For information regarding Workers' Compensation claims please contact: Intercare Holdings Insurance Services, Inc. P.O. Box 579 Roseville, CA 95661 Phone: (800) 771-5454. For Health Benefit enrollment verification please contact Walker Insurance Solutions, LLC at (800) 883-0902. IHSS Public Authority does not coordinate/integrate wages, nor do we have a state-approved voluntary plan for disability insurance.

[Redacted]	OFFICE ASSISTANT III	[Redacted]	2/5/2024 9:52 AM
Verified by (Print)	Title	Verified by (Signature)	Date Verified

**Please Note:**

As Custodian of Records for IHSS home care providers, the IHSS Public Authority (PA) processes all provider verifications of employment (VOEs). In our efforts to more stringently safeguard home care providers' Personally Identifiable Information (PII), the PA exclusively utilizes this form to process VOEs. However, questions regarding a home care provider's work ethics or hours worked must be directed to the Recipient of IHSS services (actual Employer to the home care provider). **The name(s) of IHSS recipient(s) is/are confidential under State Department of Social Services (SDSS) Division 19, W&I Code 10554, 15633, 10850 & 17006 - Penal Code 11167. As such, IHSS recipient information has been redacted in the attached documents.**