



# Electronic Services Portal (ESP) Website Provider Registration

www.etimesheets.ihss.ca.gov



For assistance call the San Diego Public Authority Provider Enrollment and Training Department at (866) 351-7722.

## **REGISTRATION AS A FIRST TIME USER**

You will need the following information to register exactly as shown in your IHSS records:

- Your first name and last name
- 9-digit provider number
- Date of birth
- Last four digits of your social security number
- A valid e-mail address

To access the Electronic Services Portal Website, please visit <u>www.etimesheets.ihss.ca.gov</u>

# There are 5 steps to the Registration process:





Note: Each step will start off orange, then turn green when completed.

https://www.etimesheets.ihss.ca.gov/login IHSS IN-HOME SUPPORTIVE SERVICES **ELECTRONIC SERVICES PORTAL** First Time User? Login to Your Account Register for the IHSS Website to: User Name · View your timesheet and payment statuses User Name is case sensitive · Enter and submit timesheets Remember me · No longer mail paper timesheets · Request additional timesheets Password · Enroll in direct deposit Password is case sensitive · Claim sick leave Forgot User Name or Password? **Register Here** Login **Registration FAQs** The IHSS Electronic Services Portal is now available in Español, 中文 and ลมมุษุทษน for both Providers and Recipients. Language English (English) English (English) Spanish (Español) Armenian (Յայերեն) CDSS sistance, contact the Electronic Timesheet Help Desk at 1-866-376-7066 (select option 4) Chinese (中文)

- Go to "Language."
- Click the drop-down menu.
- Select your preferred Language.
- Click the "Register Here" button.

IHSS ELE	CTRONIC SERVICES	PORTAL
Welcome		
To register with this website yo Personal Care Services (WPC cases. Information collected by this we registration process and will be	ou must be a provider of In-Home Supportive S) program or be a recipient of either progra ebsite will be used for managing IHSS and 1 e used to send you reminders and notices.	Services for the In-Home Supportive Services (IHSS) and/or the Wair im. Information viewed on this website is only related to IHSS and/or V NPCS program processes. Your email address will be collected during
To get started, tell us if you are	e a recipient or a provider?	

Now you'll see the **Welcome** screen.

- Click "I am a Provider."
- Click "Begin Registration Process."

### Step 1: User Information

Register				
1	2	3	4	5
User Information Enter your name, provider number, date of birth and SSN number	Account Information Create your user name, password and enter your email address	Security Questions Select your security questions and enter your answers	Email Verification Check your email and select the link to complete registration Step 4	<b>Confirm Registration</b> Enter your user name, password and one of the security questions you selected in Step 3
Enter your first name, last nar	me and provider number as showr	n on your IHSS/WPCS timesheet		
First Name				
Last Name				
Date of Birth (MM/DD/	YYYY)			
Date of Birth (MM/DD/ <sup>^</sup>	YYYY)			
Date of Birth (MM/DD/ Provider Number You must enter all 9 digits of : the leading zeros.	YYYY) your Provider Number including			
Date of Birth (MM/DD/ Provider Number You must enter all 9 digits of : he leading zeros.	YYYY) your Provider Number including			
Date of Birth (MM/DD/ Provider Number You must enter all 9 digits of y the leading zeros. SSN (Last 4 Digits) We ask for the last 4 digits of that we can verify who you ar	yyyyy) your Provider Number including your Social Security Number so e.			

Enter your information:

- First Name.
- Last Name.
- Date of Birth.
- Provider Number It is a 9-digit number and is located on your paper timesheet, or a previous paystub.
- The Last Four Digits of your Social Security Number

**Note**: If you receive a message informing you that the information is not a match to our records, please contact San Diego Public Authority at (866) 351-7722.

• Click "Next."

Register				
0		3	4	5
User Information Enter your name, provider number, date of birth and SSN number	Account Information Create your user name, password and enter your email address	Security Questions Select your security questions and enter your answers	Email Verification Check your email and select the link to complete registration Step 4	Confirm Registration Enter your user name, password and one of the security questions you selected in Step 3
Create User Name User Name is case sensitive a characters in length. It cannot cannot have the # or % or & c	and must be at least 6 have blank spaces and or ' or " or > or ? characters.			
Create Password Password is case sensitive ar characters in length and contra and at least 2 numbers.	nd must be at least 8 ain a combination of letters			
Confirm Password				
Email		ſ		
It is recommended that provid have their own separate emai for IHSS website emails, Use Password reset.	lers and recipients each il account. Email will be used r Name retrieval and			

#### **Step 2: Account Information**

- Create User Name
  - Your user name is case sensitive and can be anything you want it to be, it must be at least 6 characters, these can be numbers, letters, or symbols. These symbols <u>cannot be used</u>: # % & ' > ?
- Create Password
  - Your password is case sensitive and must be at least 8 characters in length, and must include a combination of letters, at least two numbers and no special characters.
- Confirm Password
  - Enter the same password again
- Email:
  - Enter a valid email address, as this will be used for notifications on your account
- Confirm Email
  - Enter the same email again

• Click "Next."

Register				
	2	3	4	5
User Information Enter your name, provider number, date of bith and SSN number	Create your user name, password and enter your email address	Security Questions Select your security questions and enter your answers	Email Verification Check your email and select the link to complete registration Step 4	Confirm Registration Enter your user name, password and one of the security questions you selected in Step 3
birth and SSN humber				
t is important that the questio Security questions and answe	ns and answers that you choose rs will be used to help you rese	e are hard for others to guess, b t your Password.	out easy for you to remember.	
t is important that the questions and answe	ns and answers that you choose rs will be used to help you rese	e are hard for others to guess, b t your Password.	but easy for you to remember.	
t is important that the question Security questions and answe	ns and answers that you choose rs will be used to help you rese	e are hard for others to guess, b t your Password. Security Questions	but easy for you to remember.	
t is important that the question Security questions and answer Please Select One Answer	ns and answers that you chooss rs will be used to help you rese	e are hard for others to guess, b t your Password. Security Questions Security Answers	but easy for you to remember.	
Please Select One Please Select One Please Select One	ns and answers that you chooss rrs will be used to help you rese	e are hard for others to guess, b t your Password. Security Questions Security Answers	out easy for you to remember.	
Please Select One Please Select One Please Select One	ns and answers that you choos rs will be used to help you rese	e are hard for others to guess, b t your Password. Security Questions Security Answers	but easy for you to remember.	
Please Select One Answer Please Select One Answer Answer	ns and answers that you chooss rrs will be used to help you rese	e are hard for others to guess, b t your Password. Security Questions Security Answers	out easy for you to remember.	

**Step 3: Security Questions** 

- Choose three different security questions. Click the arrow on the right-hand side of the box to see the questions you can choose from. Select your questions then enter your answers.
- Click "Next."



# Step 4: Verify Email

• Check your private email for a message from the IHSS Website.

Example Of Email
IHSS
Thank you for registering with the IHSS Electronic Services Portal (ESP) with the user name testprovider01. To finish creating your account please click on the link below and log in to the application.
Verify my email address and login. This link will expire after 04/08/2019 13:42. If the link has expired, you will need to complete the registration process again.
Please do not reply to this email. For questions about this email or the IHSS/WPCS E-Timesheet System, please contact the Electronic Timesheet Help Desk during business hours at 1-866-376-7066 (select option 4 for Electronic Timesheet assistance).
We respect your privacy. Please review our Privacy Policy here.
CDSS Adult Programs Division

Here is a sample of what your email message will look like.

- Open the email to verify your email address.
- Click on "Verify my email address and login" link.
  - It is important to verify your email address immediately.
  - If your email login link times out, you will need to begin the registration process again.

**Note:** If you could not find the email, check your spam or junk folders.

1	2	3	-4	
Suser Information Enter your name, provider number, date of birth and SSN number	Create your user name, password and enter your email address	Select your security questions and enter your answers	Check your email and select the link to complete registration Step 4	Confirm Registration Enter your user name, passwor and one of the security questions you selected in Step
User Name				
User Name is case sensitive	1			
Password				
Password is case sensitive				

# Step 5: Confirm Registration

- Enter your user name, password, and the answer to your security question.
- Click "Login."



#### Main Landing Page

You can now do the following using your account:

- Enroll into Electronic Timesheets
- View Payment History
- Sign up for Direct Deposit online
- Submit a Sick Leave Claim online