

As a result of the COVID-19 outbreak, we realize many parent providers and live-in providers may have clients with hours assigned to another provider, who is now unable or unwilling to provide them. It may also be the case that you simply want to reduce the threat of exposure and spread of COVID-19 by limiting how many other people enter your household.

SEIU 775 has been raising this issue with the state and asking them to suspend the overtime limits to protect parent providers and other live-in caregivers and help avoid the spread of COVID-19.

While they are not eliminating the workweek limits across the board, the state has indicated that they are likely to approve temporarily waiving the overtime workweek limits on a case-by-case basis, especially where there is a concern about bringing additional caregivers into a shared living situation in a way that would increase risk of transmitting COVID-19. If you are in that situation – or if you can't get a caregiver because of COVID-19 – we encourage you to submit in writing a request for an exception to the Client Specific Work Week Limit (CSWWL) to your caseworker to exceed your work week limits.

Below is a template of a letter you can use to send to your caseworker requesting an exception to the CSWWL to be able to exceed your work week limit and provide all of your client's authorized hours. Please edit or add detail as needed. If you submit an exception to the CSWWL request, copy our Member Resource Center ([mrc@seiu775.org](mailto:mrc@seiu775.org)) on the request, and if you are denied, call the Member Resource Center at 1-866-371-3200

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[DATE]

Dear [CASE MANAGER],

I am writing to request an exception to the Client Specific Work Week Limit (CSWWL) to be able to exceed my work week limit to provide all of my client's authorized hours because of the coronavirus crisis.

[NUMBER] of my client's authorized hours per week/month are assigned to another provider(s).

That other provider is unwilling to provide services to my client because of coronavirus fears.

[AND/OR]

We are concerned about bringing another provider into our home at this time because of the coronavirus. [PROVIDE ANY ADDITIONAL DETAILS HERE.]

The tasks that are assigned to the other provider are not tasks that can be done remotely or telephonically. My client will not respond to telephone calls. [PROVIDE ANY ADDITIONAL DETAILS HERE.]

The wellbeing of my client is harmed because of the inability to provide all authorized hours to my client because [PROVIDE ANY ADDITIONAL DETAILS OR EXAMPLES HERE.]

[YOUR NAME]

[YOUR PROVIDER ID]