ICLS Time and Activity Documentation						TIMESHEETS ARE DUE BY 4:30PM MONDAY AFTER WEEK 2									
WEEK 1 of pay period	MON	TUE	WED	THU	FRI	SAT	SUN	WEEK 2 of pay period	MON	TUE	WED	THU	FRI	SAT	SUN
Month/Day/Year								Month/Day/Year							
VISIT ONE								VISIT ONE							
TIME IN	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	TIME IN	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
TIME OUT	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	TIME OUT	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
Visit 1 Hours:								Visit 1 Hours:							
VISIT TWO								VISIT TWO							
TIME IN	AM PM	AM PM	AM PM	AM PM		AM PM	AM PM	TIME IN	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
TIME OUT	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	TIME OUT	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
Visit 2 Hours								Visit 2 Hours							
		Total your	daily hou	ırs in the b	oxes belo	W				Total your	daily hou	rs in the b	oxes belov	N	
Total Daily Hrs:								Total Daily Hrs:							
WEEK 1			ILS Wk 1 Total hours:					EEK 2	ILS Wk 2 To		Nk 2 Total h	al hours:			
Supports								Supports							
ADL's								ADL's							
Household Mgt								Household Mgt.							
Health, Safety & Wellness								Health, Safety & Wellness							
Community Living Engagement								Community Liiving Engagement							
Adaptive Support								Adaptive Support							
Active Cognitive Face to Face								Active Cognitive Face to Face							
Active Cognitive Remote (15min)								Active Cognitive Remote (15min)							
Acknowledgemen	ts & Signat	ures: After th	ne PCA has i	documented	his/her time	and activity	the recinier	nt must draw a line th	rough any d	ates and time	es he/she di	d not receive	services from	m the PCA	Review the

acknowledgements & Signatures: After the PCA has documented his/her time and activity, the recipient must draw a line through any dates and times he/she did not receive services from the PCA. Review the completed time sheet for accuracy before signing. It is a federal crime to provide false information on PCA billings for Medical Assistance payment. Your signature verifies the time and services entered above are accurate and that the services were performed as specified in the PCA Care Plan. I certify and swear under penalty of law that I have accurately reported on this time sheet the hours I actually worked, the services I provided, and the dates and times worked. I understand that misreporting my hours is fraud for which I could face criminal prosecution.

Print Recipient Name	MA Member# or DOB	Please use standard 12 hr time, in 15 min (quarter: 25, 30, 75) increments					
		Timesheet must indicate AM or PM for every Time IN and every Time OUT.					
Recipient/Responsible Party Signature:	Date:	Every date box must have month/day/year entered for entire timesheet.					
		Timesheet must be filled out each shift.					
Print PCA Name	PCA Provider # (office use)	Timesheet must be an ORIGINAL timesheet - not photocopied.					
		Incomplete, incorrect, or illegible timesheets cannot be accepted for billing.					
PCA Signature	Date:	Total Hours (office use) SANDSTONE					
Charting Codes	Dates & location	HEARTLAND PCA HOMEGARE P: 320-233-0119 E: 320-233-0120					
C -Completed D -Declined V -Verbal Prompt	of client stay in	HOMECARE F: 320-233-0129					
M -Modeling Prompt P -Physical Assistance	hospital or care						
	facility	Late timesheets will not be processed until the next payroll cycle (2 more weeks)					

Goals Being Addressed:	2024 Pay Periods and Pay Days								
	unless Monday is	Charting is due every other MONDAY , after week 2 is over, unless Monday is a holiday, then submit by or before Tuesday Payday is FRIDAY.							
Steps taken to accomplish	Pay Period		<u>Due Date</u>	<u>Payday</u>					
Goal:	12/11/2023 -	12/24/2023							
	12/25/2023 -	1/7/2024							
	1/8/2024 -	1/21/2024							
	1/22/2024 -	2/4/2024							
	2/5/2024 -	2/18/2024							
	2/19/2024 -	3/3/2024							
	3/4/2024 -	3/17/2024	3/18/2024						
	3/18/2024 -	3/31/2024	4/1/2024						
	4/1/2024 -	4/14/2024							
	4/15/2024 -	4/28/2024							
	4/29/2024 -	5/12/2024	5/13/2024						
	5/13/2024 -	5/26/2024	5/27/2024						
	5/27/2024 -	6/9/2024							
Additional Information:	6/10/2024 -	6/23/2024	6/24/2024						
	6/24/2024 -	7/7/2024							
	7/8/2024 -	7/21/2024							
	7/22/2024 -	8/4/2024							
	8/5/2024 -	8/18/2024							
	8/19/2024 -	9/1/2024							
	9/2/2024 -	9/15/2024							
	9/16/2024 -	9/29/2024							
	9/30/2024 -	10/13/2024							
	10/14/2024 -	10/27/2024							
	10/28/2024 -	11/10/2024							
	11/11/2024 -	11/24/2024							
	11/25/2024 -	12/8/2024	12/9/2024						
	12/9/2024 -	12/22/2024	12/23/2024	1/3/2025					