PCA Time and Activity Documentation 1:1 Care							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	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 you	daily hou	rs in the b	oxes belo	W				Total your	daily hours	s in the box	es below		
Total Daily Hrs:								Total Daily Hrs:							
WEEK 1				1:2Total weekly hours:			WEEK 2				1:2Total weekly hours:				
Activities								Activities							
Dressing								Dressing							
Grooming								Grooming							
Bathing								Bathing							
Eating								Eating							
Transfers								Transfers							
Mobility								Mobility							
Positioning								Positioning							
Toileting								Toileting							
Behavior								Behavior							
Health-Related								Health-Related							
Laundry								Laundry							
Housekeeping								Housekeeping							
Other (note on back)								Other (note on back)							
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. Legrify and swear under penalty of law that I have accurately reported on this time sheet the hours Lactually															

Print Recipient Name	MA Member# or DOB	You must initial cares provided. Do not pre-fill or pre-sign/date timesheets.					
		Every date box mus	x must have month/day/year for entire timesheet & include AM/PM notation				
Recipient/Responsible Party Signature:	Date:	Incomplete, incorrect, or illegible timesheets cannot be accepted for billing.					
Print PCA Name	PCA Provider # (office use)	(office use)		HIBBING P: 218-263-4177			
PCA Signature	Date:			F 218-263-5102			
		Late timesheets will not be processed until the next payroll cycle (2 more weeks)					
Dates & location of client stay in hospital or care facility or incarceration:							

If you provided shared services, DHS requires that you complete the following information: 1) who the shared services were with, 2) any change in the client's condition, and 3) any concerns or issues. If you did not provide shared services, you may use the additional narrative spaces to document any client changes, activities, issues or concerns.

provi	d services ded with any):			20	24 Pay Periods a	and Pay Days	
			Week 1				
Day	Date	Changes in Condition? If yes, what?	Issues or Concerns? If yes, what?	Charting is due ever	•	•	, after week 2 is
MON					over. Payday is	s FRIDAY.	
TUES				Pay Period		T/s Due	Payday
				12/11/2023 -	12/24/2023	12/25/2023	
WED				12/25/2023 -	1/7/2024	1/8/2024	
				1/8/2024 -	1/21/2024	1/22/2024	
THURS				1/22/2024 -	2/4/2024	2/5/2024	
				2/5/2024 -	2/18/2024	2/19/2024	
FRI				2/19/2024 -	3/3/2024	3/4/2024	
CAT				3/4/2024 -	3/17/2024	3/18/2024	3/29/2024
SAT				3/18/2024 -	3/31/2024	4/1/2024	4/12/2024
CLIN				4/1/2024 -	4/14/2024	4/15/2024	4/26/2024
SUN				4/15/2024 -	4/28/2024	4/29/2024	5/10/2024
			4/29/2024 -	5/12/2024	5/13/2024	5/24/2024	
Day	Date	Changes in Condition?	Issues or Concerns?	5/13/2024 -	5/26/2024	5/27/2024	6/7/2024
Day	Date	If yes, what?	If yes, what?	5/27/2024 -	6/9/2024	6/10/2024	6/21/2024
NAONI				6/10/2024 -	6/23/2024	6/24/2024	7/5/2024
MON				6/24/2024 -	7/7/2024	7/8/2024	7/19/2024
TUES				7/8/2024 -	7/21/2024	7/22/2024	
				7/22/2024 -	8/4/2024	8/5/2024	
WED				8/5/2024 - 8/19/2024 -	8/18/2024 9/1/2024	8/19/2024 9/2/2024	
				9/2/2024 -	9/15/2024	9/16/2024	
THURS				9/16/2024 -	9/29/2024	9/30/2024	
FRI				9/30/2024 -	10/13/2024	10/14/2024	
I NI				10/14/2024 -	10/27/2024	10/28/2024	11/8/2024
SAT				10/28/2024 -	11/10/2024	11/11/2024	
				11/11/2024 -	11/24/2024	11/25/2024	
SUN				11/25/2024 - 12/9/2024 -	12/8/2024 12/22/2024	12/9/2024 12/23/2024	
				12/3/2024 -	12/22/2024	±2/23/2024	1/3/2023